THE IOWA CONSORTIUM
FOR SUBSTANCE ABUSE RESEARCH AND EVALUATION

AMERICAN GOTHIC REVISITED
JACKSON COUNTY
PROGRAM EVALUATION

PROJECT YEAR 3, REPORT 2

THE IOWA
CONSORTIUM
For Substance Abuse Research And Evaluation

American Gothic Revisited
Jackson County
Program Evaluation

Biannual Report

July 1, 2008 – June 30, 2011

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A Grant to Reduce Alcohol Abuse from the Department of Education was awarded to the Maquoketa, Iowa School District in partnership with the Andrew, Bellevue, and Preston School Districts in May 2008. Four prevention programs are being implemented in this project: LifeSkills Training (LST), Project Towards No Drug Abuse (TND), and the Leadership and Resiliency Program (LRP), which are school-based prevention programs; and Communities Mobilizing for Change on Alcohol (CMCA), which is a community-based program. Outcome data are not provided in this report for LRP, as that program has an insufficient sample size on which to report outcomes. The project has nine goals, six of which are substance abuse prevention program outcome goals, two are process goals, and one is for substance abuse counseling. Substance abuse prevention program Goals 1, 2, 4, and 6 use the 2008 Iowa Youth Survey as a reference for the anticipated year-to-year change. The Iowa Youth Survey (IYS) is a triennial, and recently a biennial, assessment of Iowa's school-age (grades 6, 8, and 11) students' attitudes toward substance use and actual use of substances. The IYS provides an estimate of the change one might expect each year in Iowa's general youth population due to maturation. IYS data for the sixth and eighth grades provide the reference figures for the LST program; IYS data for the eighth and eleventh grades provide the reference figures for the TND program. School-based prevention program data are reported by program year: TND is a single-year program, but LST spans three years, therefore each year of LST is reported individually. Of the nine goals, six have been met, and three are partially met.

Goal 1
Goal 1 is a 50% reduction in the anticipated year-to-year increase in the percentage of participating students who report alcohol consumption in the past 30-day period.

Status: Met. Outcomes for all three years of LST and for TND exceed this goal. An increase in alcohol consumption of 3.25 percentage points or less is needed to achieve this goal for LST: LST Year 1 shows an increase in alcohol consumption of 0.4 percentage points, LST Year 2 shows an increase in alcohol consumption of 2.5, and LST Year 3 shows a decrease of 2.4. An increase of 3.15 percentage points or less is needed to achieve this goal for TND: The change for TND is a 1.9 percentage point decrease.

Goal 2
Goal 2 is a 50% reduction in the anticipated year-to-year increase in the percentage of participating students who report binge drinking in the past 30-day period.

Status: Met. Outcomes for all program groups meet or exceed the goal. A 2.25 percentage point increase or less in binge drinking is needed to achieve this goal for LST. The pre-test to post-test change for LST Year 1 is a 0.8 percentage point decrease; the change for LST Year 2 is a 0.8 percentage point increase; and the change for LST Year 3 is a 2.4 percentage point decrease. A 3.65 percentage point increase or less in binge drinking is needed for TND; the change for TND is a 3.2 percentage point decrease.

Goal 3
Goal 3 is no change or an increase in the percentage of participating students who disapprove of alcohol use.

Status: Met. LST Years 1, 2, and 3 had increases from pre-test to post-test of 2.7, 1.1, and 1.8 percentage points, respectively; and TND had an increase of 2.3 percentage points.

Goal 4

Goal 4 is a 50% reduction in the anticipated year-to-year decrease in the percentage of participating students who believe alcohol is harmful to their health.

Status: Partially met. The 2008 IYS data did not show the anticipated decrease in perceived risk of harm: The LST comparison group showed no change and the TND comparison group showed a 0.3 percentage point increase. Outcomes for Years 1 and 2 of LST show increases in the percentage of participants who believe that alcohol is harmful to their health of 1.9 and 2.5 percentage points, respectively, thus exceeding the outcomes of the IYS groups. However, Year 3 of LST had a decrease in perceived risk of harm of 0.6 percentage point. The TND data show an increase in perceived risk of harm of 0.3 percentage point, matching the IYS data.

Goal 5

Goal 5 is no change or an increase in the percentage of students reporting parental disapproval of alcohol use.

Status: Partially met. Outcomes for the first and second year of LST have met this project goal, whereas outcomes for the third year of LST and for TND did not. LST Years 1 and 2 showed increases of 0.2 and 2.9 percentage points, respectively. LST Year 3 showed a 0.7 percentage point decrease, and TND showed a 1 percentage point decrease.

Goal 6

Goal 6 is a 25% reduction in the anticipated year-to-year increase in the percentage of participating students who report that obtaining alcohol is easy or very easy.

Status: Met. A 9.0 percentage point increase or less in ease of obtaining alcohol is needed to achieve this goal for LST: The change for LST Year 1 is a 1.7 percentage point increase; for LST Year 2, a 2.0 percentage point decrease; and for LST Year 3, a 3.6 percentage point decrease. A 7.0 percentage point increase or less is needed to achieve this goal for TND: The change is a 0.7 percentage point decrease.

Goal 7

Goal 7 is to demonstrate comprehensive alcohol prevention systems change in Jackson County.

Status: Met. All targeted activities were implemented during the first project year and continued through the third project year.

Goal 8

Goal 8 is to demonstrate local capacity to implement/sustain proven alcohol abuse prevention programs.

Status: Partially met. Program implementation occurred as planned, although not all schools will sustain programming after the grant period. The Maquoketa School District has adopted the LST program, and will continue LRP during the no-cost extension year.

Goal 9

Goal 9 is that 70% of students receiving substance abuse treatment services will successfully complete their treatment program.

Status: Met. Over the course of the project, 20 out of 27 students successfully completed treatment, yielding a 74% success rate.

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Appendices

Background

In May 2008, the Maquoketa School District in partnership with the Andrew, Bellevue, and Preston School Districts was awarded a three year Grant to Reduce Alcohol Abuse (GRAA) from the Department of Education. The purpose of this grant is to reduce alcohol use and abuse among secondary school students. Other partners in the grant are: The Area Substance Abuse Council (ASAC), to provide substance abuse prevention program implementation, technical assistance and substance abuse counseling; and the Iowa Consortium for Substance Abuse Research and Evaluation (Consortium), to conduct the project evaluation.

The Consortium conducts an outcome and process evaluation of the American Gothic Revisited – Jackson County Grant to Reduce Alcohol Abuse project. The outcome evaluation provides information regarding student alcohol use and beliefs about alcohol use, collected from pre- and post-tests. The process evaluation analyzes the development and implementation of the project as well as the degree of achievement of project goals and objectives. Tracking sheets, interviews with key informants, and a review of community meeting minutes supply data for the process evaluation.

The purpose of this report is to provide feedback to project implementers and stakeholders on the progress toward and accomplishment of goals of the American Gothic Revisited – Jackson County project. This report presents outcome and process data for the three-year grant period, July 1, 2008 through June 30, 2011. The Department of Education granted a no-cost extension for up to one year to continue project activities that were delayed during the regular funding period. A final report will be submitted at the end of the no-cost extension period.

Project Goals

There are nine goals for this project as set forth in the grant proposal. Goals 1 through 6 relate to substance abuse prevention program outcomes, Goals 7 and 8 are process goals, and Goal 9 is a substance abuse counseling goal. Data for each goal are included in this report. These goals include:

1. A 50% reduction in the anticipated year-to-year increase in the percentage of participating students who report alcohol consumption in the past 30-day period;
2. A 50% reduction in the anticipated year-to-year increase in the percentage of participating students who report binge drinking in the past 30-day period;
3. No change or an increase in the percentage of participating students who disapprove of alcohol use;
4. A 50% reduction in the anticipated year-to-year decrease in the percentage of participating students who believe alcohol is harmful to their health;
5. No change or an increase in the percentage of students reporting parental disapproval of alcohol use;
6. A 25% reduction in the anticipated year-to-year increase in the percentage of participating students who report that obtaining alcohol is easy or very easy;
7. Demonstrate comprehensive alcohol prevention systems change in Jackson County;

8. Demonstrate local capacity to implement/sustain proven alcohol abuse prevention programs; and
9. Seventy percent of students receiving substance abuse treatment services will successfully complete their treatment program.

Goals 3 and 5, as originally written, were problematic: Goal 3 was not measurable and Goal 5 was overly ambitious, given students' reports during the first six months of the project. The goals were revised and the revisions were approved by the Project Oversight Committee and U.S. Department of Education in October 2008. The goals as stated above are the revised goals.

OUTCOME EVALUATION

Outcome Evaluation Design and Methodology

The outcome evaluation uses a matched pre- and post-test design. Outcome data are collected from the youth participating in each of the programs using a survey instrument created for this project that contains questions from the Government Performance and Results Act (GPRA) instrument, the Center for Substance Abuse Prevention's Core Measures, and the Iowa Youth Survey (IYS). The instrument contains questions that measure the project's six outcome goals: 1) reduce underage alcohol use among youth targeted by the prevention programs; 2) reduce binge drinking among youth targeted by the prevention programs; 3) increase the percentage of targeted youth who disapprove of alcohol abuse; 4) increase the percentage of targeted youth who believe that alcohol abuse is harmful to their health; 5) increase the percentage of targeted youth who believe their parents disapprove of alcohol use; and 6) reduce the percentage of targeted youth who believe that it is easy to obtain alcohol in their neighborhood or community. See Appendix 7 on page 70 for a copy of the survey instrument.

Outcome Data: School-Based Prevention Programs

One-thousand two-hundred eighty-five youth from the four school districts completed a pre-test through June 30, 2011. The pre-test was administered prior to the first program lesson. Of the 1285 youth, 549 are middle school aged youth participating in LifeSkills Training (LST), 677 are high school aged youth participating in Project Towards No Drug Abuse (TND), and 59 are high school aged youth participating in the Leadership and Resiliency Program (LRP). In addition, 377 middle school students completed a pre-test prior to the first program lesson of the second year of LST, and 167 middle school students completed a pre-test prior to the first program lesson of the third year of LST.

One-thousand two-hundred forty-four youth from the four school districts have completed a post-test. The post-test was administered after the last program lesson. Of the 1244 youth, 536 are middle school aged youth who participated in LST, 662 are high school aged youth who participated in TND, and 46 are high school aged youth who participated in LRP. In addition, 368 middle school aged youth completed a post-test after the last program session of the second year of LST, and 166 students completed a post-test after the last program session of the third year of LST.

As of June 30, 2011, 1237 youth have completed both a pre-test and post-test (a 96.3% completion rate). Of these youth, 535 are LST participants (mostly sixth grade students), 656 are TND participants (mostly ninth and tenth grade students), and 46 are LRP participants (mostly tenth and eleventh grade students). In addition, 367 LST students completed both a pre-test and post-test for the second year of the program, and 166 students completed both a pre-test and a post-test for the third year of the program. The figures throughout this report present outcome data on alcohol use for LST and TND; LRP has an insufficient sample size with which to report outcomes. The median number of days between the pre-test and the post-test was 47 for the first year of LST (Minimum = 13; Maximum = 196), 98 for TND (Minimum = 9 days; Maximum = 125 days), 170 for LRP (Minimum = 49; Maximum = 244); 29 for the second year of LST (Minimum = 11; Maximum = 105); and 35 for the third year of LST (Minimum = 16; Maximum = 104).

Outcome data related to alcohol use are provided here for four program groups (participant is each of the three years of LST, and participants in TND). Outcome data related to tobacco and marijuana use for the four program groups are provided in Appendix 1, pages 31 through 36. Outcome data for the full program of LifeSkills Training (participants completing all three curriculum years) are provided in Appendix 2, pages 37 through 40.

Figures 1 and 2 on pages 5 and 6 compare the pre-test to post-test change in past 30-day use of alcohol, binge drinking, and perceived risk of harm from alcohol abuse to the average yearly change in these three measures based on the 2008 Iowa Youth Survey (IYS) data from Jackson County, Iowa. The average yearly change was calculated by dividing the difference between the figures for each grade by the number of years between grades. This was done using sixth and eighth grade IYS data to provide a reference for LifeSkills Training program outcomes, and using eighth and eleventh grade IYS data to provide a reference for Project Towards No Drug Abuse outcomes. These average yearly change figures serve as a realistic point of reference when examining the programs rather than comparing to zero, or no change. It is an estimate of the change one might expect to see among youth in Iowa's general population over the course of one year. Therefore, based on natural progression as reflected in the 2008 Iowa Youth Survey data, past 30-day use of alcohol is estimated to increase 6.5 percentage points each year for middle school students and 6.3 percentage points for high school students. Similarly, binge drinking is estimated to increase 4.5 and 7.3 percentage points for middle school and high school students, respectively. Perceived risk of harm from alcohol abuse is estimated to remain unchanged for middle school students and increase 0.3 percentage points for high school students. The comparisons of pre-test to post-test change for past 30-day alcohol use, binge drinking, and perceived risk of harm from alcohol abuse found in Figures 1 and 2 are measures of project Goals 1, 2, and 4.

Goal 1

Goal 1 calls for a 50% reduction in the anticipated year-to-year increase in the percentage of participating students who report alcohol consumption during the past 30-days. A 3.25 percentage point increase or less in alcohol consumption is needed to achieve this goal for LST. Outcomes for all years of LST exceed this goal. The pre-test to post-test change for LST Year 1 is a 0.4 percentage point increase; the change for LST Year 2 is a 2.5 percentage point increase; and the change for LST Year 3 is a 2.4 percentage point decrease. A 3.15 percentage point increase or less is needed to achieve this goal for TND. Outcomes for TND also exceed this goal. The change for TND is a 1.9 percentage point decrease.

Goal 2

Goal 2 calls for a 50% reduction in the anticipated year-to-year increase in the percentage of participating students who report binge drinking in the past 30 days. A 2.25 percentage point increase or less in binge drinking is needed to achieve this goal for LST. Outcomes for all three years of LST exceed this goal. The pre-test to post-test change for LST Year 1 is a 0.8 percentage point decrease; the change for LST Year 2 is a 0.8 percentage point increase; and the change for LST Year 3 is a 2.4 percentage point decrease. A 3.65 percentage point increase or less in binge drinking is needed for TND. Outcomes for TND also exceed this goal. The change for TND is a 3.2 percentage point decrease.

(Goals 1, 2, and 4 are presented together here because their outcomes contain IYS comparison data. The results of Goal 3 are presented on pages 6 and 7 since IYS comparison data are not available for that goal.)

Goal 4

Goal 4 calls for a 50% reduction in the anticipated year-to-year decrease in the percentage of participating students who believe alcohol is harmful to their health. Achievement of this goal as currently written is not measurable, since the 2008 IYS data did not show the anticipated reductions in perceived risk of harm. The 2008 IYS had no change in perceived risk from sixth to eighth grade students (the groups used to generate the estimate for LST). However, the first two years of LST had increases in the percentage of participants who believe that alcohol is harmful to their health, of 1.9 and 2.5 percentage points, respectively. LST Year 3 had a decrease in perceived risk of harm of 0.6 percentage point, so this outcome is not as positive compared to the IYS data. The 2008 IYS data showed an increase of 0.3 percentage point among eighth to eleventh grade students (the groups used to generate the estimate for TND). The TND data show an increase in perceived risk of harm of 0.3 percentage point, so the outcome for TND matches the IYS data.

Figure 1. Life Skills Training Outcome Data and 2008 6th and 8th Grade Iowa Youth Survey Data: Past 30-Day Use; Binge Drinking; and Perceived Risk of Harm

Change in the Percentage of Youth Reporting Past 30-Day Use of Alcohol, Binge Drinking, and Perceived Risk of Harm from Alcohol Abuse

	LST (Year 1)	LST (Year 2)	LST (Year 3)	2008 IYS
Past 30-Day Use	0.4	2.5	-2.4	6.5
Binge Drinking	-0.8	0.8	-1.2	4.5
Perceived Risk of Harm	1.9	2.5	-0.6	0.0
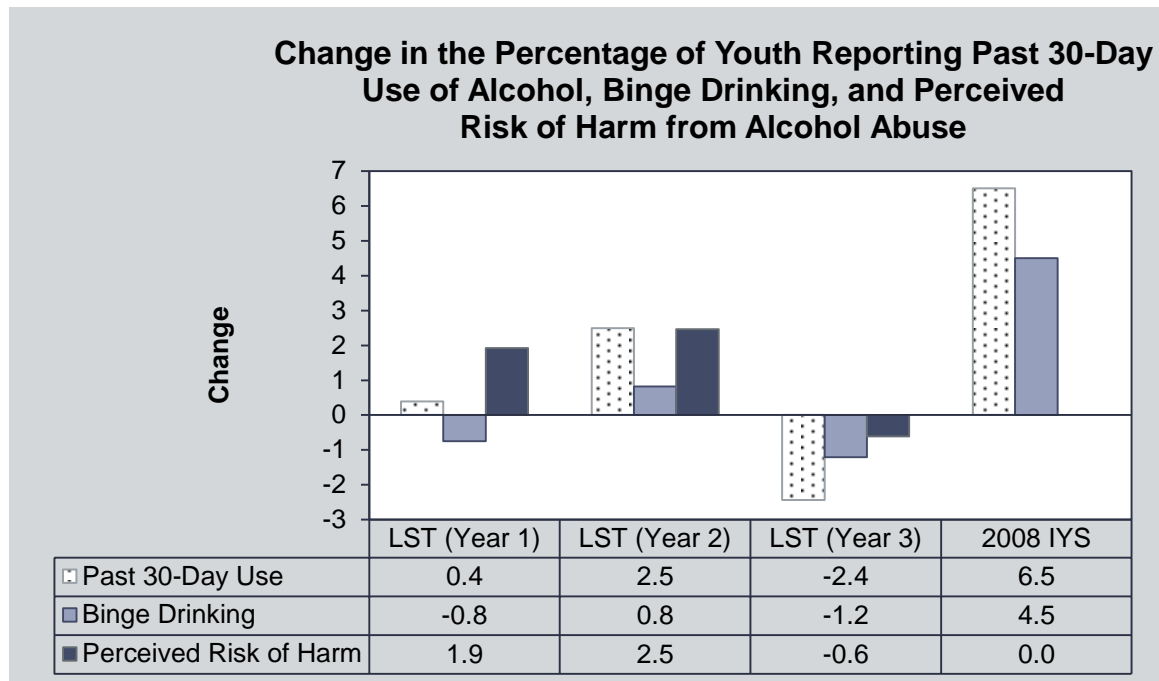
Notes: [1]The median number of days between pre- and post-tests was 47 for the first year of LST, 29 for the second year, and 35 for the third. IYS data are reported as an annual change estimate.
[2]Pre-test percentages for LST (Year 1) were: Alcohol, 8.2%; binge drinking, 2.1%; and perceived risk of harm, 95.2%. For LST (Year 2): Alcohol, 8.8%; binge drinking, 2.5%; and perceived risk of harm, 94.2%. For LST (Year 3): Alcohol, 20.1%; binge drinking, 7.9%; and perceived risk of harm, 95.7%.

Figure 2. Project Towards No Drug Abuse Outcome Data and 2008 8th and 11th Grade Iowa Youth Survey Data: Past 30-Day Use; Binge Drinking; and Perceived Risk of Harm

Change in the Percentage of Youth Reporting Past 30-Day Use of Alcohol, Binge Drinking, and Risk of Harm from Alcohol Abuse

	TND	2008 IYS
▫ Past 30-Day Use	-1.6	6.3
▫ Binge Drinking	-2.6	7.3
■ Perceived Risk of Harm	0.3	0.3
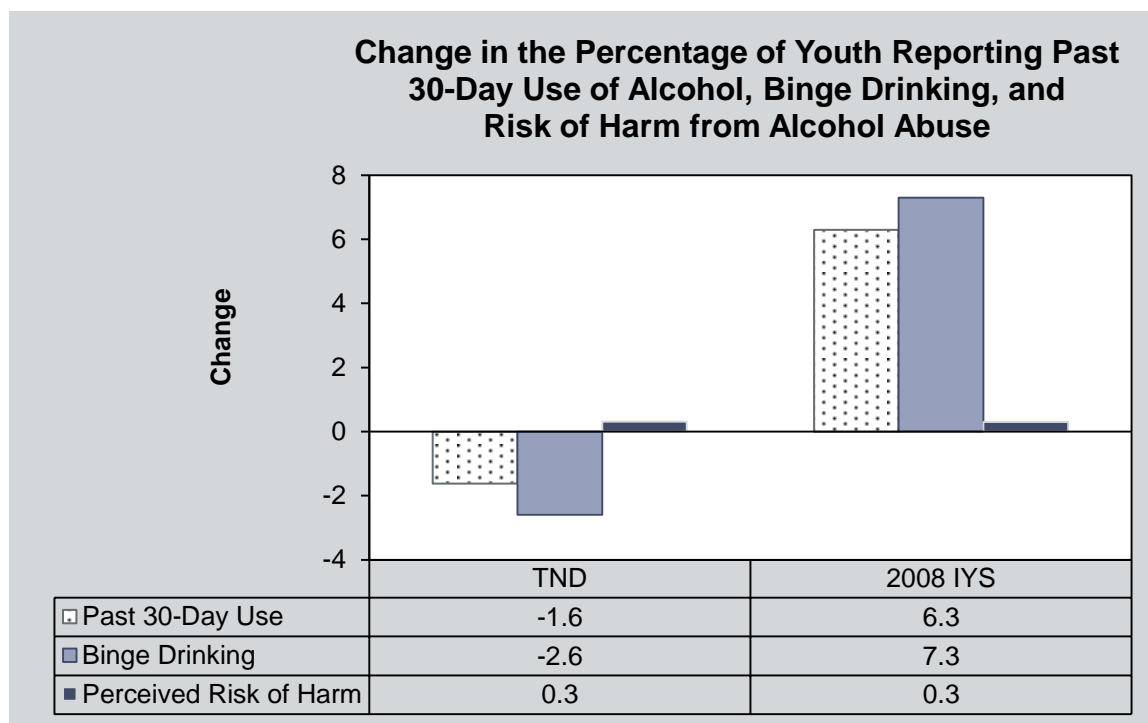
Notes: [1]The median number of days between pre- and post-tests was 98 for TND. IYS data are reported as an annual change estimate.
[2]Pre-test percentages for these items were: Alcohol, 35.2%; binge drinking, 19.3%; and perceived risk of harm, 94.9%.

Goal 3

Goal 3 is no change or an increase in the percentage of participating students who disapprove of alcohol use. (Note: There is no equivalent question on the Iowa Youth Survey, therefore no IYS comparison data is provided for student disapproval of alcohol use.) Outcomes for LST and for TND have met this goal: both programs show increases from pre-test to post-test in the percentage of participants who disapprove of alcohol use. Figure 3 on page 7 shows the percentage of participants at pre-test who disapprove of near-daily alcohol use by someone their age, and the percentage change from pre-test to post-test.

Figure 3. Percentage of Youth Reporting Disapproval of Alcohol Use

	LifeSkills Training First Year (N = 417)		LifeSkills Training Second Year (N = 211)		LifeSkills Training Third Year (N = 83)		Project Towards No Drug Abuse (N = 501)	
	Pre-Test	Change	Pre-Test	Change	Pre-Test	Change	Pre-Test	Change
Percentage of youth reporting that they either disapprove or strongly disapprove of someone their age drinking one or two drinks of alcohol nearly every day.	90.11	**+2.67**	92.33	**+1.09**	80.49	**+1.83**	73.85	**+2.30**

Figure 4 on page 8 shows outcomes by program for participants' attitudes about alcohol use, presenting the percentages of participants with favorable and unfavorable outcomes for each program group. (Note: Figures 19 through 22 in Appendix 1 show change in individual attitudes from the pre-test to the post-test by program for tobacco and marijuana.) Favorable outcomes mean that attitudes changed in the desired direction from pre-test to post-test (e.g., respondent did not disapprove of alcohol use at pre-test but disapproved at post-test) or remained the same and were negative toward alcohol use. Unfavorable outcomes mean that attitudes did not change in the desired direction from pre-test to post-test (i.e., respondent felt alcohol use was a little wrong at pre-test and not wrong at all at post-test) or that the pre-test and post-test responses remained the same and were positive toward alcohol use.

Figure 4. Participant Attitudes Toward Alcohol Use

Do you disapprove of someone your age drinking one or two drinks of alcohol nearly every day?

	LST (Year 1)	LST (Year 2)	LST (Year 3)	TND
■ Favorable	84.8	84.4	75.0	66.9
□ Unfavorable	15.2	15.6	25.0	33.1

Percentage of Respondents (y-axis)

Figure 5 on page 9 shows outcomes by program for participants' perceptions of the risk of harm from alcohol use, presenting the percentages of participants with favorable and unfavorable outcomes for each program group. As described above, outcomes were either: 1) favorable, meaning that perceived risk changed in the desired direction from pre-test to post-test (e.g., respondent felt alcohol use posed little risk at pre-test but moderate or great risk at post-test) or remained the same and was negative toward alcohol use; or 2) unfavorable, which means that perceived risk did not change in the desired direction from pre-test to post-test (i.e., respondent felt alcohol use posed moderate risk at pre-test but only slight risk at post-test) or that the pre-test and post-test responses remained the same and were positive toward alcohol use (did not see it as posing much or any risk).

Figure 5. Participant Perceptions of Risk of Harm from Alcohol Use

How much do you think you risk harming yourself if you drink three or more drinks of alcohol nearly every day?

Percentage of Respondents

	LST (Year 1)	LST (Year 2)	LST (Year 3)	TND
■ Favorable	81.2	83.0	76.8	72.2
□ Unfavorable	18.9	17.0	23.2	27.8

Goal 5

Goal 5 is no change or an increase in the percentage of students reporting parental disapproval of alcohol use. Outcomes for the first and second year of LST have met this project goal, whereas the third year of LST and TND did not. Figure 6 shows the percentage of participants at pre-test who report that their parents would disapprove of their alcohol use, and the change in percent from pre-test to post-test.

Figure 6. Percentage of Youth Reporting Parental Disapproval of Alcohol Abuse

	LifeSkills Training First Year (N = 376)		LifeSkills Training Second Year (N = 200)		LifeSkills Training Third Year (N = 73)		Project Towards No Drug Abuse (N = 459)	
	Pre-Test	Change	Pre-Test	Change	Pre-Test	Change	Pre-Test	Change
Percentage of youth reporting that their parents feel it would be wrong or very wrong for them to drink beer, wine, or hard liquor.	95.82	+ 0.22[a]	91.76	+ 2.94[a]	88.03	- 0.70	80.36	- 0.99

[a] A positive change value indicates the most desirable change for these questions.

Figures 7 and 8 show outcomes for participants' perceptions of adult attitudes toward their alcohol use, presenting the percentages of participants with favorable and unfavorable outcomes for each program group. Figure 7 shows participants' perceptions of their parents' attitudes toward their alcohol use; Figure 8 shows participants' perceptions of the attitudes of other adults in their neighborhood. Favorable outcomes mean that perceptions toward alcohol use grew more negative (e.g., respondents reported that their parents would feel alcohol use was wrong at pre-test and very wrong at post-test) or that the pre- and post-test responses remained the same and were negative toward alcohol use. Unfavorable outcomes mean that perceptions grew more positive toward alcohol use from pre-test to post-test (i.e., respondents reported that adults in their neighborhood would feel alcohol use was wrong at pre-test and not wrong at post-test) or that the pre- and post-test responses remained the same and were positive toward alcohol use.
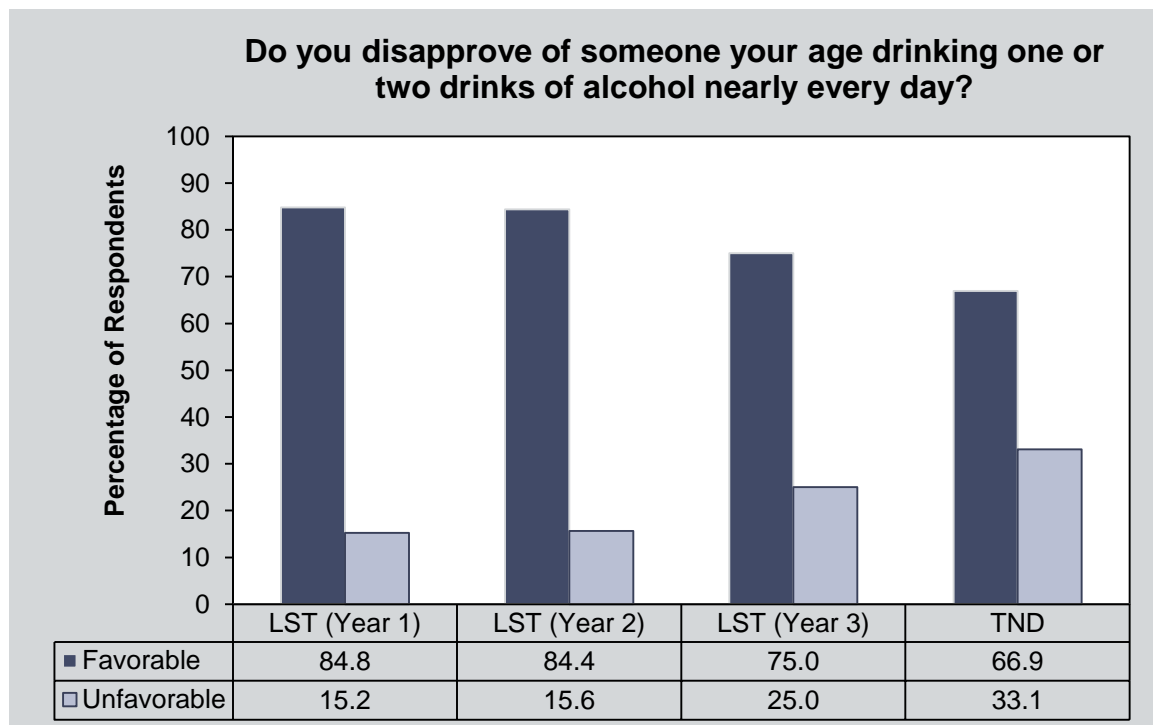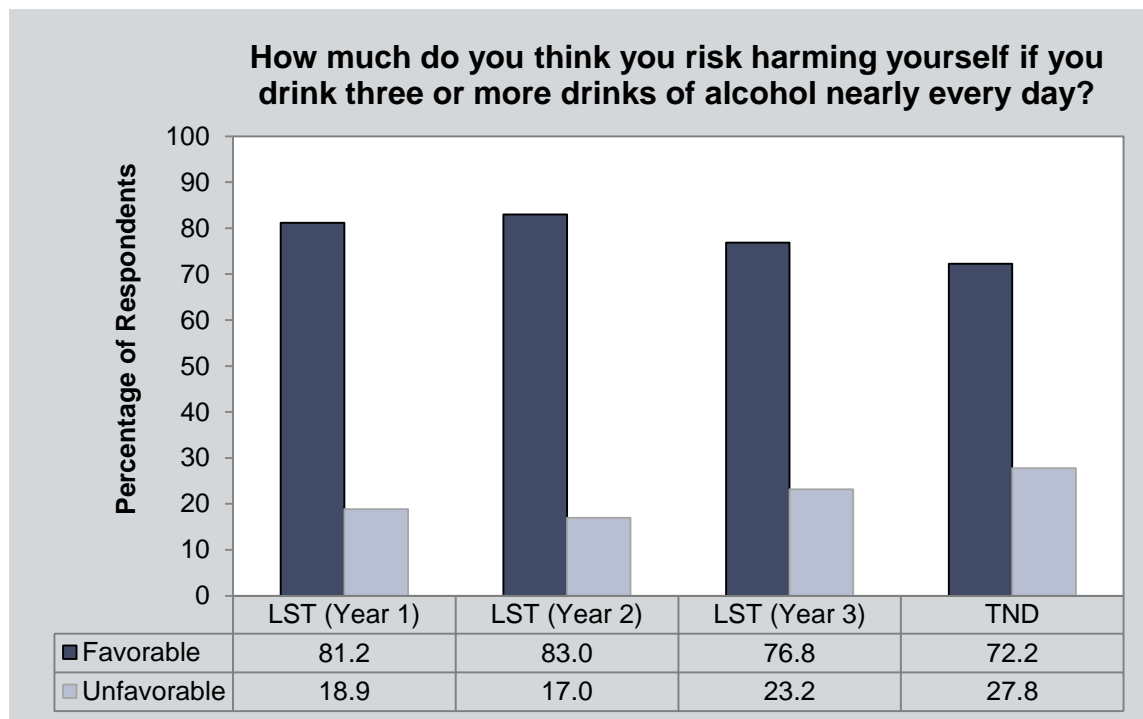
Figure 7. Participant Perceptions of Parental Attitudes Toward Child's Use of Alcohol

How wrong would your parents feel it would be
for you to drink beer, wine, or hard liquor?

	LST (Year 1)	LST (Year 2)	LST (Year 3)	TND
■ Favorable	89.8	86.8	78.2	68.7
□ Unfavorable	10.2	13.2	21.8	31.4
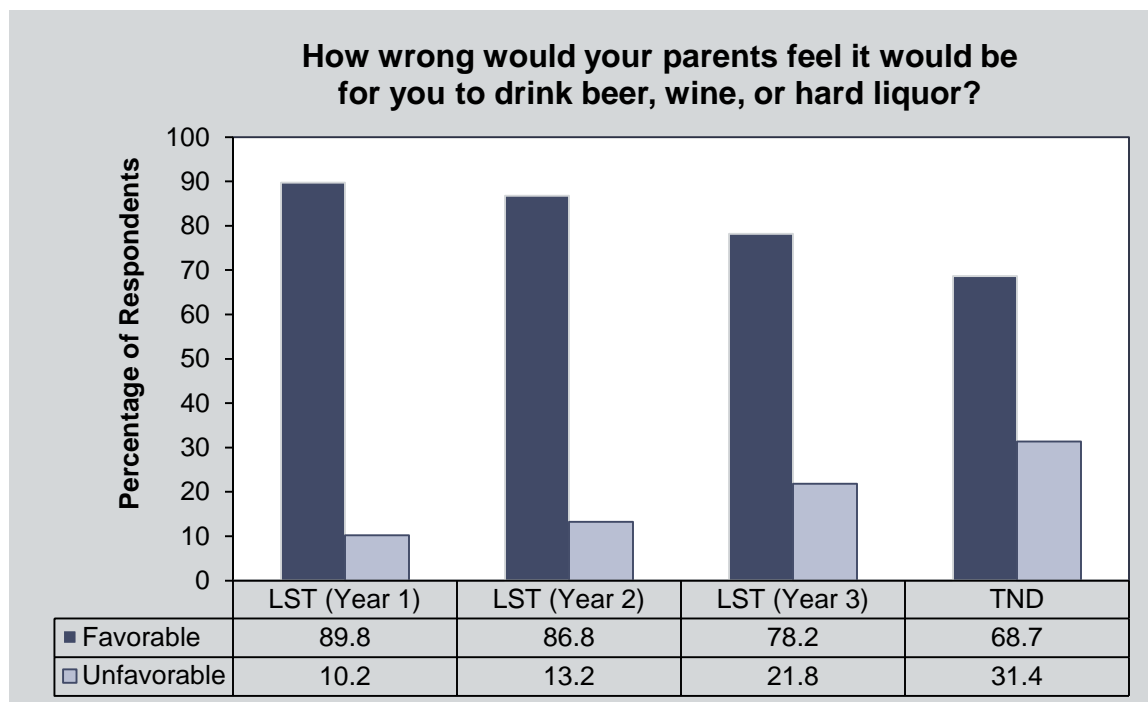
Figure 8. Participant Perceptions of Adult Neighbor Attitudes Toward Child's Use of Alcohol

How wrong would most adults in your neighborhood and/or community feel it would be for you to drink alcohol?

	LST (Year 1)	LST (Year 2)	LST (Year 3)	TND
■ Favorable	82.6	80.9	76.3	56.3
□ Unfavorable	17.4	19.1	23.7	43.7

Percentage of Respondents (y-axis: 0–100)
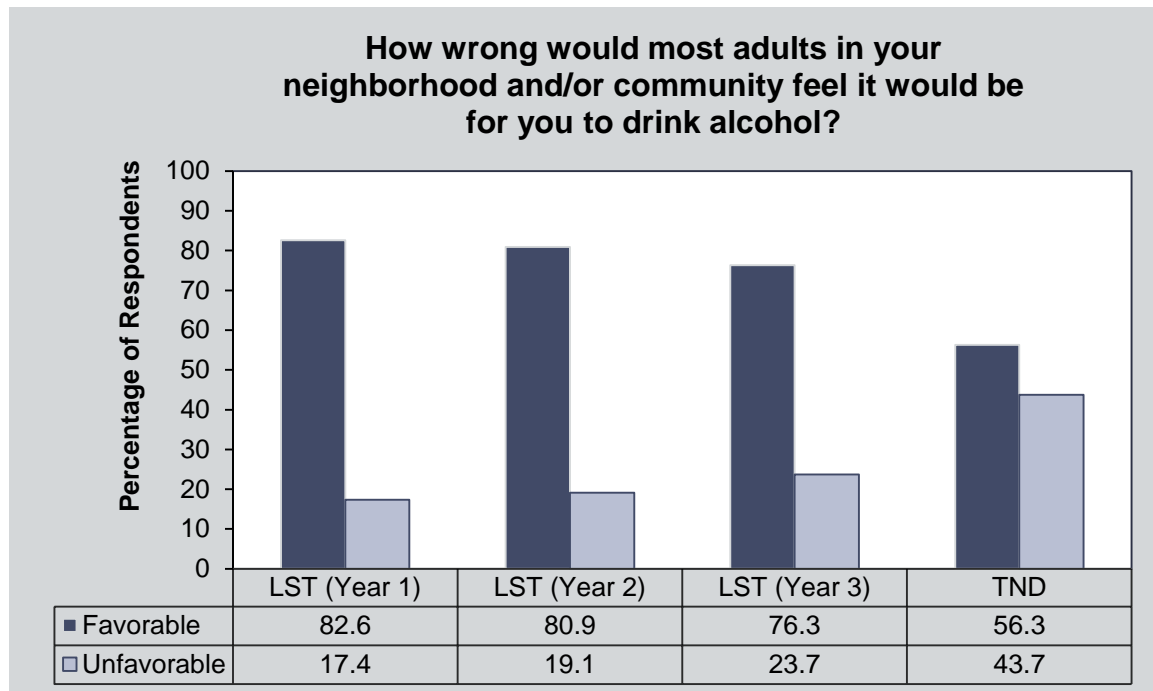
Goal 6

Goal 6 is a 25% reduction in the anticipated annual increase in participants who report that obtaining alcohol is easy for someone their age. The targets are a 9.0 percentage point increase or less in alcohol availability for LST and a 7.0 percentage point increase or less for TND. Both LST and TND data exceed the projected outcome for this goal. Figure 9 on page 12 and Figure 10 on page 13 present the pre-test to post-test percentage change in perception of alcohol availability for LST and TND program participants, respectively, and the estimated average yearly change based on the 2008 IYS data from Jackson County.

Figure 9. Life Skills Training Outcome Data and 2008 6th and 8th Grade Iowa Youth Survey Data: Perceived Alcohol Availability

Change in the Percentage of Youth Reporting Ease for a Kid Their Age to Get Alcohol

	LST (Year 1)	LST (Year 2)	LST (Year 3)	2008 IYS
■ Ease of Getting Alcohol	1.7	-2.0	-3.6	12.0
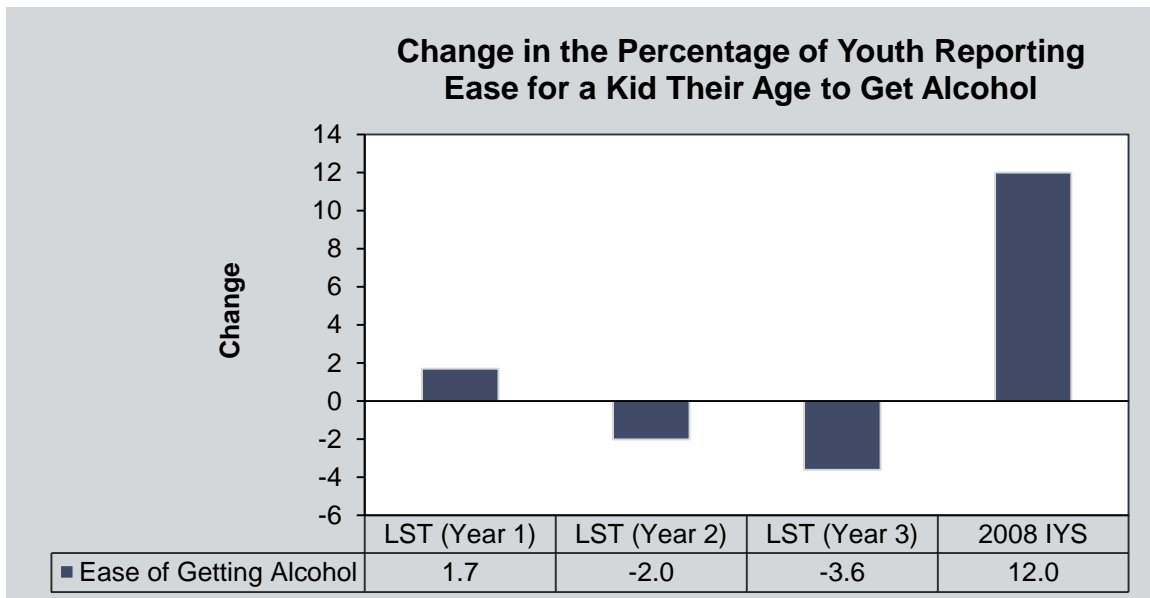
Notes: [1]The median number of days between pre- and post-tests was 47 for the first year of LST, 29 for the second year, and 35 for the third. IYS data is reported as an annual change estimate.
[2]"Don't know" responses were combined with missing responses and were not included in the total when calculating the percentages.
[3]Pre-test percentages for ease of obtaining alcohol were 21.5% for LST (Year 1), 38.3% for LST (Year 2), and 50.0% for LST (Year 3).

Figure 10. Project Towards No Drug Abuse Outcome Data and 2008 8th and 11th Grade Iowa Youth Survey Data: Perceived Alcohol Availability

Change in the Percentage of Youth Reporting Ease for a Kid Their Age to Get Alcohol

	TND	2008 IYS
■ Ease of Getting Alcohol	-0.7	9.3
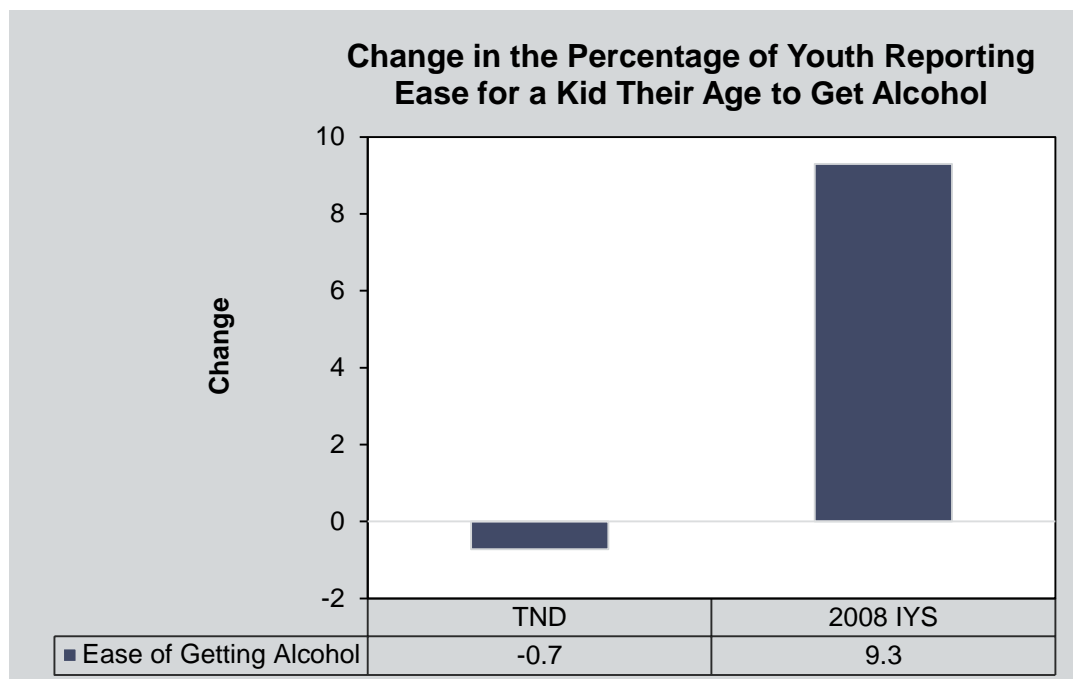
Notes: [1]The median number of days between pre- and post-tests was 98 for TND. IYS data is reported as an annual change estimate.
[2]"Don't know" responses were combined with missing responses and were not included in the total when calculating the percentages.
[3]The percent of respondents reporting ease of getting alcohol at pre-test was 75.0% for TND.

Figures 11, 12, and 13 on pages 14 and 15 present outcomes for school enjoyment, school performance, and support from an adult at school, presenting the percentages of participants with favorable and unfavorable outcomes for each program group. Favorable outcomes mean that school enjoyment or performance increased (e.g., respondents enjoyed being in school more at post-test than at pre-test) or that pre-test and post-test responses remained the same and were favorable regarding school enjoyment or performance. Unfavorable outcomes mean that school enjoyment or performance decreased from pre-test to post-test (e.g., respondents tried to do their best in school less at post-test than at pre-test), or that pre-test and post-test responses remained the same and were unfavorable regarding school enjoyment or performance.

Figure 11. School Enjoyment

Thinking back over the past year in school, how often did you enjoy being in school?

	LST (Year 1)	LST (Year 2)	LST (Year 3)	TND
■ Favorable	77.2	80.0	83.5	78.9
□ Unfavorable	22.8	20.0	16.5	21.1
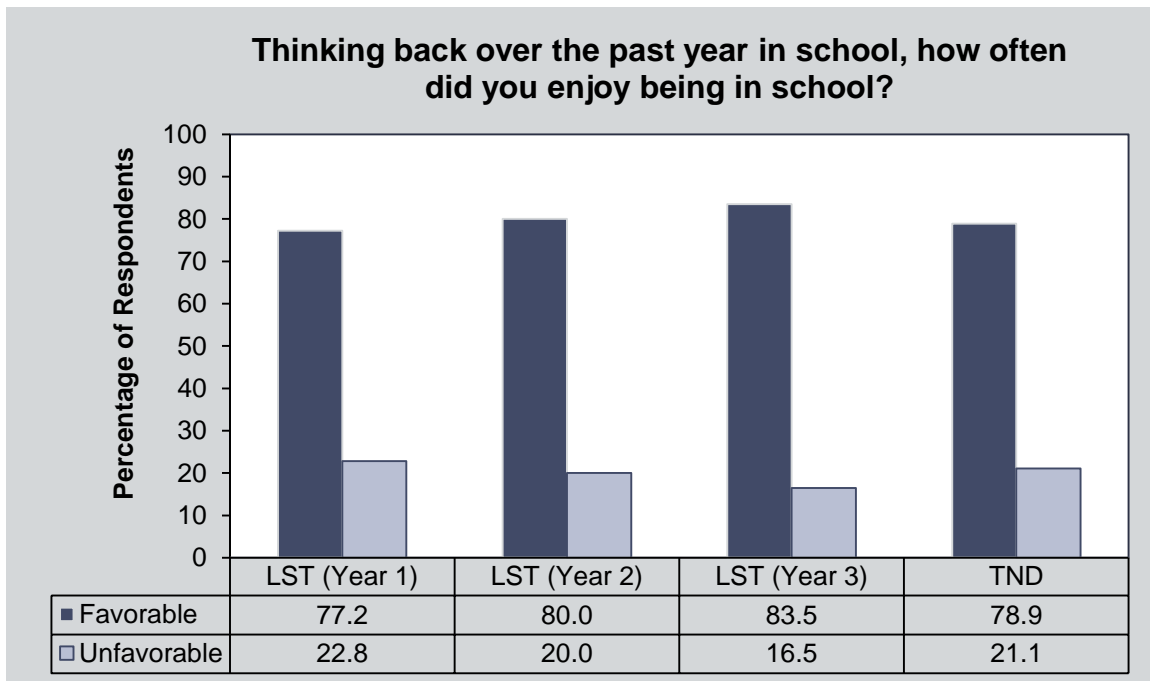
Figure 12. School Performance

Thinking back over the past year in school, how often did you try to do your best in school?

	LST (Year 1)	LST (Year 2)	LST (Year 3)	TND
■ Favorable	85.4	83.5	88.4	80.4
□ Unfavorable	14.6	16.5	11.6	19.6
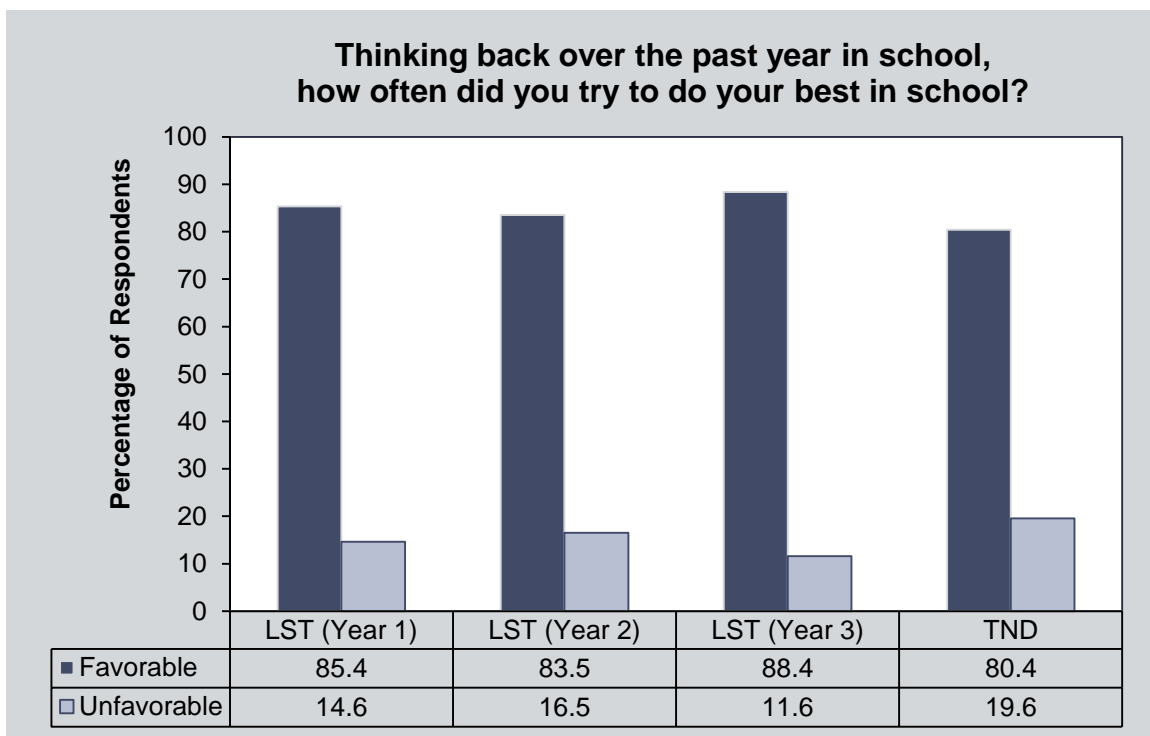
Figure 13. Support from Adult at School

There is at least one adult at school that I could go to for help with a problem.

	LST (Year 1)	LST (Year 2)	LST (Year 3)	TND
■ Favorable	83.1	76.9	75.5	75.0
□ Unfavorable	16.9	23.1	24.5	25.0

Y-axis: Percentage of Respondents (0–100)
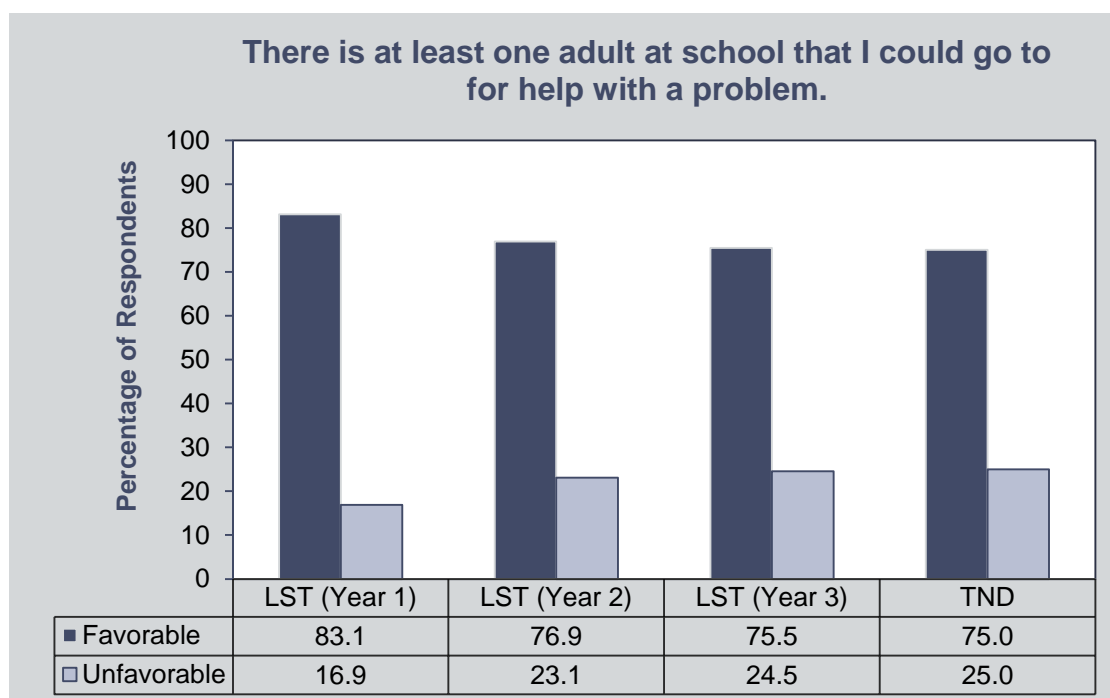
PROCESS EVALUATION

Process Evaluation Design and Methodology

The process evaluation provides insight into the degree of achievement of program goals. Evaluation methods include: Analysis of the project action plan, committee meeting participation, and documentation of Communities Mobilizing for Change on Alcohol (CMCA) activities; review of prevention program tracking sheets; process interviews; and review of counseling data.

Process data on the school-based prevention programs are collected using tracking sheets completed by Area Substance Abuse Council (ASAC) Prevention Specialists. One tracking sheet is completed for all LRP groups and another is completed for all LST and TND groups. These forms are used to monitor program implementation, dosage and fidelity by documenting the type of program, the school where the program is implemented, the grade level(s) of the youth participating, the number of youth completing the pre-test and post-test, the number of lessons and program activities implemented, and the frequency of program sessions.

Action Plan Analysis

During the first project year, project staff followed the Action Plan submitted in the grant proposal. Many of the items in that action plan were directed toward project start-up,

such as hiring and training staff, and were accomplished during Year 1. Project staff re-evaluated the Action Plan at the end of Year 1 and elected to use the Logic Model to guide Year 2 and Year 3 actions. See Appendix 3 on page 39 for the Year 1 Project Action Plan; see Appendix 4 on page 45 for the Logic Model/Year 2-3 Project Action Plan. Please note: The inclusion of Reconnecting Youth in the Action Plan was an error: Reconnecting Youth was never intended to be implemented as part of this project. A progress update for each activity in the action plan is provided below.

Project Oversight Committee

As set forth in the grant application, the Project Oversight Committee met quarterly to review activities, student participation levels, and evaluation data. The Project Oversight Committee also provided feedback, support, and decision-making for project implementation. The Project Oversight Committee is comprised of nine members including the four School District Superintendents, the Project Coordinator (ASAC), the Project Assistant (ASAC), the Assistant Director of Prevention Services (ASAC), two Prevention Specialists (ASAC), one Substance Abuse Counselor (ASAC), and the Evaluator (Consortium). District Superintendents who are unavailable send a proxy, often a Principal, in their stead.

The Project Oversight Committee met on August 12 and November 7, 2008; January 31, April 17, June 19, and September 18, 2009; January 15, April 30, September 16, and December 10, 2010; and March 11 and June 7, 2011. The majority of members attended the meetings. During these meetings, presentations and discussions occurred regarding: 1) program trainings; 2) the implementation and sustainability of prevention programs in the schools; 3) the number of youth referred to counseling and seen on a regular basis; 4) CMCA implementation progress; 5) evaluation progress updates; 6) ways to make best use of prevention funding; and 7) grant administration issues including budget revisions, submission of billing claims, and application for a no-cost extension of some project activities.

Program Trainings

Initial trainings for the four research-based prevention programs implemented during this project were held within the first six months of the project. The trainings for school-based prevention programs were provided as follows: LifeSkills Training program training on September 5, 2008, and August 11, 2009; Leadership and Resiliency Program training on September 16-18, 2008, and October 20-22, 2009; and Project Towards No Drug Abuse training on September 8 and 9, 2008. A second LifeSkills Training program training occurred on August 10, 2010. Figure 14 on page 17 shows the number of people trained to implement each school-based prevention program, by community. Other trainings include Communities Mobilizing for Change on Alcohol in November 2008, with 22 community members attending, and a *Shoulder to Shoulder* Train the Trainers seminar in April, 2011, with five ASAC staff persons attending.

Figure 14. Number of People Trained in Each Program through 6/30/11

Number of People Trained in Each Program			
School	Program		
	LST	TND	LRP
Maquoketa	2	2	4
Andrew	6	2	-
Bellevue	7	2	2
Preston	3	2	-
ASAC/GRAA Staff	4	4	4
Project Total	22	12	10
Program Key LST Life Skills Training TND Project Towards No Drug Abuse LRP Leadership and Resiliency Program			

Communities Mobilizing for Change on Alcohol (CMCA)

Project staff and community members were trained to implement CMCA in November, 2008, and the CMCA group began meeting that month. Project staff and volunteers conducted 102 one-on-one interviews with community members to assess perceptions of alcohol problems in the county and what should be done about them, and to encourage involvement in the community coalition or other CMCA activities. Figure 15 at the end of this section (page 25) shows the number of interviews conducted in each community, by community sector.

In addition, project staff have led a CMCA kick-off event, 22 community coalition meetings, four town hall meetings, and hosted and participated in numerous community events in several towns across Jackson County. The local media have provided extensive coverage of CMCA events and activities, and the local radio talk show has hosted Jackson County GRAA staff and featured project events on numerous occasions.

One variance from the project action plan is that a CMCA group was not formed in each district. Rather, one CMCA group for the entire county was formed, due to the small size of some of the districts and a lack of initial interest in the project within some districts. This group was designed to include representatives from across Jackson County, with the possibility of splitting the group into smaller community groups as the project progressed. Despite project staff's consistent efforts, community member interest in coalition work was slow to develop. However, during the second half of the second project year, the coalition began to see an increase in interest and attendance from parents in the community. In addition, a local acting company, the Peace Pipe Players, began collaborating with the group to enhance events by adding dramatizations.

A comprehensive action plan for the county was developed by project staff shortly after the CMCA training. As discussed above, this plan was followed during the first project year, but during the second project year staff decided to focus on issues and goals outlined in the CMCA Logic Model. The CMCA logic model and action plan target four major areas: 1) reduce minors' access to alcohol; 2) change perceptions of the consequences of alcohol use; 3) modify policies to ensure consistent enforcement; and 4) increase education and change perceptions of underage alcohol use. The coalition began implementing actions during the latter half of the first project year, and has continued to do so during the first half of the third project year. Actions taken for each target area include:

<u>Reduce Minors' Access to Alcohol</u>

- Alcohol Server Trainings

  Two community representatives were trained to teach Training for Intervention Procedures (TIPS) in July 2009. Since then, two alcohol server trainings have been held, both of which were for off-site vendors (where alcohol is sold for consumption off site, such as grocery and convenience stores). A total of eight employees were certified, representing two businesses. The participating businesses received a TIPS completion certificate and public recognition through a newspaper article about the training. Project staff contacted other vendors about trainings, but there did not appear to be sufficient incentive for them to participate.

- Alcohol Compliance Checks

  Project staff has approached the law enforcement sector about conducting alcohol compliance checks; however, law enforcement staff has not implemented checks due to time and staffing limitations. The project staff is investigating other sources of funding for compliance checks, including the Enforcing Underage Drinking Laws (EUDL) program through the Office of Juvenile Justice and Delinquency Prevention (U.S. Department of Justice).

- Project SAFER (Safety Assessments for Events Remediation)

  Two signs were purchased for use at the Jackson County Fairgrounds, which state that persons wishing to purchase alcohol must be 21. The intent in purchasing and displaying these signs is to reduce youth access to alcohol at the fairgrounds. The coalition purchased an ID scanner in November 2009, which is also intended to help reduce the number of illegal sales to minors at community events. The scanner has been used at the 2010 Jackson County Fair, Bellevue Heritage Days, Timber City Days, and for two weddings held at the Jackson County Fairgrounds.

- Signs for Alcohol Outlets (Window Clings)

  In April 2010, coalition members and project staff distributed 100 window clings to alcohol retail outlets throughout Jackson County. These clings remind patrons that it is illegal to purchase alcohol under the age of 21 and that IDs will be checked.

- Project Sticker Shock

   Project Sticker Shock is an activity designed to help reduce sales to minors. The activity consists of a group of students entering local alcohol outlets and placing bright stickers on cases of alcohol that remind buyers that purchasing alcohol for minors is against the law. Thirteen students and nine adults implemented Project Sticker Shock in April 2009. Approximately 1,500 stickers were placed in 17 businesses (13 convenience stores and four grocery stores) in seven Jackson County communities. Project Sticker Shock was implemented again in September and October of 2009, involving students from Maquoketa and Bellevue High Schools.

Change Perception of Consequences of Alcohol Use

- Media Campaign: Public Service Announcements (PSA), Letters to the Editor, and Guest Columns

   Project staff created five consequence-related PSAs that aired on the local radio stations. Two PSAs targeted youth at prom and graduation seasons, describing the legal and social consequences of alcohol use as a minor. Two PSAs targeted adults, emphasizing the legal and social consequences of providing alcohol to minors. And, one PSA targeted stores and servers that sell alcohol, outlining the legal and social consequences of selling alcohol to minors. This PSA also encouraged establishments wanting to reduce their dram shop insurance to contact the CMCA Coordinator to arrange alcohol server training. One of the PSAs also promoted an upcoming town hall meeting. All PSAs encouraged people to contact the Area Substance Abuse Council if they are concerned about their own or others' drinking. A community member and a prevention specialist wrote articles that were published in three community newspapers during Alcohol Awareness Month, addressing alcohol use and the consequences of drinking.

- Stickers for Prom Flower Boxes and Graduation Cake Boxes

   The coalition distributed flower box inserts to area florists with a message encouraging students not to drink alcohol on prom night. Similarly, coalition members distributed cake box stickers to local bakeries encouraging students not to drink alcohol at graduation parties.

Modify Policies to Ensure Consistent Enforcement

- Social Host Ordinance

   The coalition made several efforts to enact a social host ordinance in each community and in the county. To help raise awareness of these efforts, the coalition distributed throughout the county 500 tote bags stuffed with flyers about the social host ordinance, the coalition, and a town hall meeting. However, no ordinance was passed as of June 30, 2011.

- Minors in Bars Ordinance
   (See "Social Host Ordinance" above)

- School District Good Conduct Policy Review and Revision

  Two school districts reviewed and updated their good conduct policies. Preston High School's policy now requires that students are referred to the substance abuse counselor if a substance use violation occurs. Preston High School also installed hallway monitoring cameras that were purchased with grant funds, and has seen a reduction in conduct violations since their installation.

Increase Education and Change Perception of Underage Alcohol Use

- Public Service Announcements/Media Campaign

  Local media outlets have been highly supportive of the project staff and Coalition's efforts. A total of 18 different Public Service Announcements were created for the project, and messages aired hundreds of times on the local radio station. In addition, Over 150 newspaper ads, articles, letters to the editor, and editorials pertaining to project and coalition activities, events, and community education were published in the local newspapers. Selected items are highlighted here.

  The "Got A Minute?" campaign kicked off on June 24, 2009, with a community picnic. Messages encouraging parents to eat dinner with their children and talk with them about the risks of substance use began airing on the radio in June 2009.

  A 30-second PSA, "What's Lurking in Maquoketa?" aired on the local radio stations prior to the March 2010 Maquoketa Town Hall Meeting. The PSA provided statistics on Jackson County youths' perceptions of drinking and ease of obtaining alcohol.

  The Maquoketa newspaper published a letter to the editor in 2010 written by the project coordinator, which promoted the successes of the school-based prevention programs funded by the grant and the involvement of school teachers in those programs. Three area newspapers published an article featuring the work of the grant's CMCA Coordinator and the community coalition. The Maquoketa newspaper published a 10-page section about Red Ribbon Week that featured students' descriptions of the reasons they choose to be substance free.

- Parent-to-Parent Pledges

  A Parent-to-Parent Pledge program was initiated in 2009. The pledge is for parents to commit to providing an alcohol-free, supervised environment for their children and their children's friends who visit, and to welcome telephone calls from the parents of their children's friends. A pledge drive was initially held in August 2009 for the 2009 – 2010 School Year. Eleven parents signed the pledge in the initial implementation, which was an insufficient number to justify the cost of printing the parent handbooks. Program staff asked those parents for suggestions of other parents to contact, and a second pledge drive was held in September 2010 at the Maquoketa High School Parent-Student Forum. That forum yielded 13 additional signed pledges.

The Jackson County Prevention Coalition added the pledge form to its website in January 2011, and the Andrew School added a link to that website on its home page. Project staff, coalition members, and students distributed information about the pledge and the online pledge form verbally and through email, asking recipients to sign the pledge, talk to parents, and to distribute information about the program to others. The LRP student group handed out parent pledges at volleyball and football games. In addition, opportunities to sign the pledge were provided at the *Shoulder to Shoulder* Training, the Farm & Home Show and the SADD Carnival. Parent Handbooks were mailed to participants in May 2011. At that time, parents had signed pledges for 50 students representing 20 families.

- Alcohol-Free Graduation Signs

  Project staff re-evaluated this approach after the signs implemented in Year 1 did not appear to have the desired effect in the community. The staff, coalition, and students developed a similar approach in Year 3, using a different message (see "Be The Wall Campaign" on p. 23).

- Post-It Notes

  Project staff and coalition members distributed 5000 Post-It Note packs to parents of middle- and high-school age youth. The notes had lines for location, time, contact number, and additional information to help parents have a better idea of their children's whereabouts and activities.

- Let's Talk Boxes

  Let's Talk boxes are designed for families to help parents start conversations with their children on key issues. Each box contains suggestions for starting conversations on various topics including substance use, responsibility, and decision-making. The project staff distributed approximately 320 boxes at various events in the participating communities.

- Hidden in Plain Sight

  Presenters from St. Joseph's Mercy Health System in Detroit Michigan conducted a "Hidden in Plain Sight" program at the Maquoketa High School in October 2010. The program, designed for parents, centers around a mock teenager's room that contains evidence of teen substance abuse. The presentation consists of a viewing of the room, discussion of the signs in the room indicating substance use, and distribution of materials containing additional information on what to look for and how to address the issue with one's child. Twenty-four parents participated. Survey results indicated that parents found the event very informative and helpful.

- X-Treme Leadership Conference

  Project staff planned to host a summer youth conference in 2010, but cancelled plans after learning of a youth leadership conference, the "X-Treme Leadership Conference," already planned in a neighboring county for October 2010. GRAA project staff collaborated with the conference coordinators, and the GRAA

Project Coordinator, CMCA Coordinator, and the Prevention Specialist conducted a break-out session on family communication and introduced the new campaign theme for 2011: "Be The Wall". Forty-four youth from Jackson County participated in the conference (seven from Andrew, 29 from Bellevue, and eight from East Central School Districts), and project funds paid for their transportation to the event.

- Red Ribbon Walk

  Preston students participated in a Red Ribbon Walk in October 2010 to promote awareness of issues surrounding youth drinking. Students earned points for each lap walked, and the class with the most points won a pizza party.

- Red Ribbon Christmas Tree

  The Jackson County Prevention Coalition and project staff members sponsored a Red Ribbon Tree at the Festival of Trees in Maquoketa to promote information about the positive aspects of being alcohol and drug free.

- Celebrate With Care

  Project staff and coalition members distributed hot cocoa packets around the county which contained a message encouraging adults to provide positive role modeling regarding alcohol consumption around the holidays. Volunteers distributed over 300 packets to patrons at a Maquoketa grocery store, and also distributed packets to banks across Jackson County.

- Communication and Collaboration with Other Community Organizations

  Project staff members collaborated with several community organizations to provide education and additional services to youth and adults in Jackson County. The CMCA Coordinator also became actively involved with Community Partnerships for Protecting Children, the Prevention of Child Abuse Coalition, and Jackson County Planners, and had information on substance abuse and available services placed in guides, calendars, and other materials disseminated by those organizations.

- *Shoulder to Shoulder* Parent Training

  The Center for Substance Abuse Prevention's Central Center for the Application of Prevention Technologies (CAPT) conducted a *Shoulder to Shoulder* parent training seminar in Maquoketa in April, 2011. Project staff and coalition members performed Public Service Announcements for the seminar, and the CMCA Coordinator distributed fliers to Coalition members and to students to take home to parents. Information was also posted on the cable access channels in Maquoketa and Bellevue and advertised in the local newspapers. The same seminar was also scheduled to be held in Bellevue, however there was insufficient interest to hold the training. GRAA project funds were used to provide a meal and door prizes as incentives for participants. Door prizes included items created by the project, such as Let's Talk Boxes, Student Post It Notes, other handouts and resources, community prevention coalition calendars, and candy.

Five Area Substance Abuse Council staff attended a Train the Trainers session and are now able to provide *Shoulder to Shoulder* trainings around the county.

- "Be the Wall" Campaign

  The Maquoketa LRP (Leadership and Resiliency Program) students started a community awareness campaign in the Fall of 2010 called "Be the Wall." The message encourages parents to be firm, fair, and consistent with their children. The student group planned to make a giant moving wall with the pledges on it to display around the town. The LRP students handed out parent pledges and cheerleaders tossed out stress balls containing the campaign message at high school sporting events. The student group and project staff designed coasters and placemats for restaurants around Jackson County, and yard signs for community members to display. These items contained the campaign information and logo as well as information about the Jackson County Prevention Coalition, with a brick wall background. Several businesses across Jackson County, including a winery and a bowling alley, placed orders totaling 3100 coasters and 7250 placemats. The student group had 100 yard signs printed, which were distributed by the students, school staff, coalition members, project staff and Area Substance Abuse Council staff. School administrators were encouraged to support the effort by placing signs in their yards. A sample sign was also displayed at the Farm and Home Show where attendees could order signs. In addition, parent signatures were written on individual bricks which made up a wall that was displayed at the SADD Carnival.

- Farm and Home Show

  Jackson County Prevention Coalition members and project staff hosted a booth at the KMAQ Farm and Home Show February 9th and 10th, 2011. Members provided information about the coalition and the Jackson County Grant to Reduce Alcohol Abuse project and distributed several resources, including Let's Talk Boxes, post-it notes, bookmarks, brochures, and educational parent packets to attendees. Volunteers also provided information on the *Shoulder to Shoulder* parent training, Parent to Parent Handbook, and the "Be the Wall" promotional campaign. Those manning the booth indicated that there was a good deal of interest by attendants and that many took the resources that were provided.

- SADD Carnival Fundraiser

  The GRAA Prevention Specialist assisted the Maquoketa SADD (Students Against Destructive Decisions) group to host a carnival fundraiser at the Maquoketa Middle School on April 30th. The event raised $535. As mentioned above, the brick wall containing parent signatures, which was created under the "Be the Wall" campaign, was displayed at the carnival.

Community Member Recruitment

- Project staff met with local groups to introduce CMCA and to discuss upcoming CMCA actions. Thirty-one meetings were held with a variety of groups and clubs including, but not limited to, the City Council, Rotary Club, Optimists Club, School Board, and Chamber of Commerce.

- A total of 102 one-on-one interviews with community members were completed during the first half of the project (eight in Andrew, 19 in Bellevue, 61 in Maquoketa, and 14 in Preston). These interviews included representatives from most community sectors (see Figure 15 on page 25 for the full list of interviews by community and sector). The sectors with the highest number of interviews were business, faith, and education; the sectors with the fewest interviews included senior citizens and social services.

- Project staff distributed 500 tote bags at grocery stores in Maquoketa, Preston, Bellevue, and Andrew in March 2010. The tote bags contained information about the coalition and an upcoming town hall meeting.

- Project staff and coalition members created a webpage in July 2009 entitled Coalition Connections (http://www.coalitionconnections.com/jackson-coalitions.php), which contains information about the coalition and CMCA activities.

- The CMCA Coordinator and a coalition member set up a Facebook page with information on the coalition and recent activities, such as "Hidden in Plain Sight."

- Two community members joined the coalition as a result of the "Hidden in Plain Sight" presentation.

- The CMCA Coordinator created PSAs for Coalition recruitment.

All project goals for the Coalition have been met. There will be no carryover money available for the Jackson County Prevention Coalition from the GRAA. The Substance Abuse Free Environment (SAFE) committee will become the governing board for the Coalition, which may be funded under the Strategic Prevention Framework State Incentive Grant (SPF SIG).

Figure 15. **One-On-One Interviews by Community and Sector through 6/30/11**

Sector	One-on-One Interviews by Community and Sector				
	Community				
	Andrew	Bellevue	Maquoketa	Preston	Total
Senior Citizens	0	0	0	0	0
Business	4	7	16	3	30
Media	0	1	2	1	4
Civic Groups	0	1	5	0	6
Government	1	2	6	2	11
Faith	0	2	6	3	11
Law Enforcement	0	1	4	1	6
Youth	1	0	6	0	7
Parents/Families	1	3	0	1	5
Health Care Providers	0	1	9	0	10
Education	1	1	7	3	12
Social Services	0	0	0	0	0
Unknown	0	0	0	0	0
Total	8	19	61	14	102

School-Based Prevention Programs

Implementation of the school-based prevention programs is as follows:

Life Skills Training (LST)

The implementation of the LifeSkills Training program was on target with the action plan. The LST Core Program was completed with four groups of sixth grade students in the Andrew School District, six groups of sixth grade students in the Bellevue School District, 15 groups of sixth grade students in the Maquoketa School District, and eight groups of seventh grade students in the Preston School District. The sixth or seventh grade level is the appropriate target population for the LST Core Program. Fidelity requires that a minimum of 15 LST lessons be implemented one to five times per week. LST was implemented with dosage fidelity for all groups.

The first year of the LST Booster Program was completed in several class groups in all four school districts. With the exception of students who had moved away, the first year booster lessons were taught to all seventh graders who had participated in the LST Core Program in sixth grade in the Andrew, Bellevue, and Maquoketa School Districts, and with all eighth graders who had participated in the LST Core Program in the Preston

School District. The seventh and eighth grade levels are the appropriate target population for the first year of the booster program. Fidelity requires that a minimum of eight lessons be implemented one to five times per week. The first year LST Boosters were implemented with dosage fidelity for all groups. The second year of the LST Booster Program was completed in ten eighth grade class groups in Andrew, Bellevue, and Maquoketa schools, and in one ninth grade group in the Preston School District. Fidelity for the second year booster requires a minimum of five lessons be implemented one to five times a week. The second year LST Boosters were implemented with dosage fidelity for all groups.

Project Towards No Drug Abuse (TND)

The implementation of Project Towards No Drug Abuse was on target with the implementation plan. TND was completed with five groups of tenth grade students in the Maquoketa School District, one group of tenth grade students and one group of ninth grade students in Andrew, three groups of ninth grade students in Bellevue, and three groups of ninth grade students in Preston.

The ninth or tenth grade level is the appropriate target population for this program. Fidelity requires twelve lessons to be taught at a frequency of two to four times per week. TND was not implemented with complete fidelity in six of the groups. The required number of lessons was taught in all groups, but sessions were conducted with less than the required frequency: sessions were conducted an average of once per week in four groups in Maquoketa, one group in Andrew, and one group in Preston.

Leadership and Resiliency Program (LRP)

The implementation of the Leadership and Resiliency Program was delayed during the first project year but was on schedule in the second project year. The implementation of LRP varied from the implementation plan in the third project year. LRP was implemented with high school students (mixed grade levels) in the Maquoketa and Bellevue School Districts during the first two years of the project. However, the Bellevue School District lost its trained facilitator and did not implement the program the third year. The federal Project Officer granted permission for those funds to be transferred to the Maquoketa School District to expand LRP implementation.

The Leadership and Resiliency Program was implemented in two groups in the Bellevue School District and three groups in the Maquoketa School District. The high school level is the appropriate target population for this program. The optimal delivery to ensure fidelity to the original research model is that process groups be held one time per week, adventure activities one time per month, and community service projects one time per month. During each project year, the LRP groups in both school districts met once per week for process group, however the Bellevue group missed two community service activities and three adventure activities because the school and the targeted service locations lacked sufficient resources to supervise or accommodate the groups.

Appendix 6 on pages 63-69 contains program implementation data, including the number and grade of class groups served and the number of lessons implemented in each program for all four school districts, by project year.

Process Interviews

Final key informant process interviews were conducted in May 2011. Interviews were conducted with four of the nine of the eligible stakeholders. Eligible people included school district superintendents, the project coordinator, the project assistant, the counselor, and program implementation staff. Interview participants were provided with the list of questions prior to the scheduled interview and were given as much time as they thought they needed to prepare for them. Questions for this round of interviews differed from those for previous interviews as this is the end of the three-year funding period. Interviews were conducted by telephone and lasted between 10 and 30 minutes. Participation was voluntary and there were no anticipated risks associated with interview completion. Interview participants were cooperative and provided constructive feedback regarding the project. Responses were kept confidential using the following methods: 1) data collected from the interviews was reported in aggregate form without any identifying information; 2) notes are kept in a locked file cabinet in a locked office until this report is finalized, then all written notes are destroyed; and 3) electronic reports are maintained on a secure database and all individual responses are destroyed once this report is finalized. Responses to each question were synthesized and are provided below. Summaries of previous interviews may be found in Appendix 5, pages 46 through 62.

1. What, from your perspective, has been the greatest positive outcome/result of the Jackson County Grant to Reduce Alcohol Abuse Project? Second greatest?

   - Three of the four respondents stated that increased community awareness of the problem and of the efforts to address it was the greatest positive outcome of the project. One respondent stated that the change in the attitudes and character of the Leadership and Resiliency Program participants was the greatest positive outcome.

   - Respondents indicated that increased interest and involvement on the part of community members has been the second greatest positive outcome.

2. What has been the greatest problem or disappointment? Second greatest? To what do you attribute this?

   - Two of the respondents stated that the lack of full support and buy-in from some of the schools was the greatest problem or disappointment. One respondent indicated that the materials used in the prevention programs were the greatest problem, that the information was outdated and no longer appropriate for the students. One respondent cited the lack of involvement by community members as the greatest problem.

   - Three respondents indicated that lack of support from key community sectors and many community members not caring about the issue was the second greatest problem or disappointment. One respondent indicated that some schools not sustaining the prevention programs was the second greatest problem/disappointment.

3. On a scale of 1 to 10, with 1 being least and 10 being greatest, to what extent have the community-based strategies (programs, events, media campaigns, etc.) had the desired effect on the community? (I.e., community sees underage drinking as more of a problem than it did three years ago and is more willing to take or support actions to reduce underage drinking.)

   - Responses to this question varied greatly: Two respondents gave a rating of 7-8; one respondent gave a rating of 5-6, and one gave a rating of 2.

4. In hindsight (knowing what you know now), do you see anything that might have been done differently to increase the success of the project?

   - Respondents stated that, in hindsight, the following may have helped increase the success of the project: greater efforts to lay groundwork with the schools to increase each party's understanding of the other's perspective and to clarify expectations; more aggressive efforts to obtain school buy-in for counseling services; and more aggressive efforts in the smaller communities to enlist community and school involvement. Respondents also indicated that a longer grant funding period is needed to change long-standing attitudes and beliefs.

5. Have any deviations from the implementation plan occurred since January 1 of this year (2011)? If so, what led to the deviations and what effect did this have on the project?

   - The only stated deviation was that the counseling services were not offered through the end of the school year as the counselor had left the project prior to the end of the school year.

6. Since the last Oversight Committee meeting, have any additional resources been found to sustain prevention programming beyond the grant?

   - One school lost its trained LifeSkills Training (LST) teacher, but will have an LST trained counselor from another school teach the program.

Degree of Achievement of Process Goals

Goal 7

Goal 7 is to demonstrate comprehensive, county-wide alcohol prevention system change. In order to achieve Goal 7, project staff integrated research-based prevention programs county-wide at the middle school, high school, and community levels. The baseline measure for this goal is limited implementation of research-based prevention programs. Prior to the start of this project, research-based prevention programs had not been implemented with fidelity in any of the participating school districts. This goal has been achieved.

Goal 8

Goal 8 is to demonstrate local capacity to implement and sustain research-based prevention programs. In order to achieve Goal 8, project staff implemented all three steps of the project's sustainability plan[1]. During the first project year, the first step of the sustainability plan was implemented. In several classrooms, ASAC prevention specialists led program implementation while school staff observed and were trained in the programs. In the remaining classrooms, school staff who had previous implementation experience led program implementation with ASAC prevention specialists providing technical assistance. During the second and third project year, the majority of program implementation was lead by school personnel with limited support from ASAC prevention specialists, with the exception of LRP. The Maquoketa School District has adopted the LST program, and will continue LRP during the no-cost extension period of this project (1 year).

Degree of Achievement of Counseling Goal

Goal 9

The ninth project goal is a 70% successful completion rate of students receiving substance abuse treatment services. Counseling services were provided by a trained substance abuse counselor as part of this project. One counselor served students from all four school districts. The counselor assessed 43 students and provided extended outpatient counseling (EOC) to 41 students. At the end of the project year, 27 students had been discharged from counseling services. Of these 27 students, 20 successfully completed treatment, yielding a 74% success rate. This goal has been met. During the no-cost extension, school-based substance abuse counseling services will be provided up to four hours per week.

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[1]Step 1: During the first project year, ASAC prevention specialists have the lead role in program implementation and school staff has an observation/limited teaching role and receive training in the programs.
Step 2: During the second project year, school staff take the lead role and ASAC prevention specialists provide technical assistance.
Step 3: During the third project year, school staff have the lead role with minimal support from ASAC prevention specialists.

CONCLUSION

The American Gothic Revisited – Jackson County project, a Grant to Reduce Alcohol Abuse from the U.S. Department of Education, has had positive effects within the county. Of the six substance abuse prevention program goals, the project met or exceeded the target for four goals in all program groups (three years of LST, and TND) and exceeded the other two goals for two and three of the four program groups. Substance abuse prevention program outcomes exceed the goals for alcohol use, binge drinking, disapproval of alcohol use, and alcohol availability for all program groups. Program outcomes exceeded the goals for perceived risk of harm from alcohol use and students reporting parental disapproval of alcohol use for LifeSkills Training Years 1 and 2.

The project met the goal of implementing proven alcohol abuse prevention programs in all four school districts, although not all schools will sustain programming after the grant period. The Maquoketa School District has adopted the LST program, and will continue LRP during the no-cost extension year.

The project exceeded the substance abuse counseling goal, with 74% of students successfully completing treatment.

While community coalition (Communities Mobilizing for Change on Alcohol group) development did not occur as planned due to the small size of some of the districts and a lower than anticipated level of readiness within some communities, interest and involvement in coalition activities and project events increased during the third year of the project, and the project met the comprehensive alcohol prevention systems change goal.

Results of key stakeholder interviews indicate that community awareness of the problem and community involvement in prevention efforts increased as a result of the efforts of this project. However, interviews also indicated that a lack of concern about the problem among community members, and in particular among key community sectors, remains an issue. While stakeholders indicated that in hindsight more groundwork may have helped, most stakeholders shared repeatedly that a longer grant funding period is needed to change the long-standing attitudes and beliefs in their communities.

Appendix 1
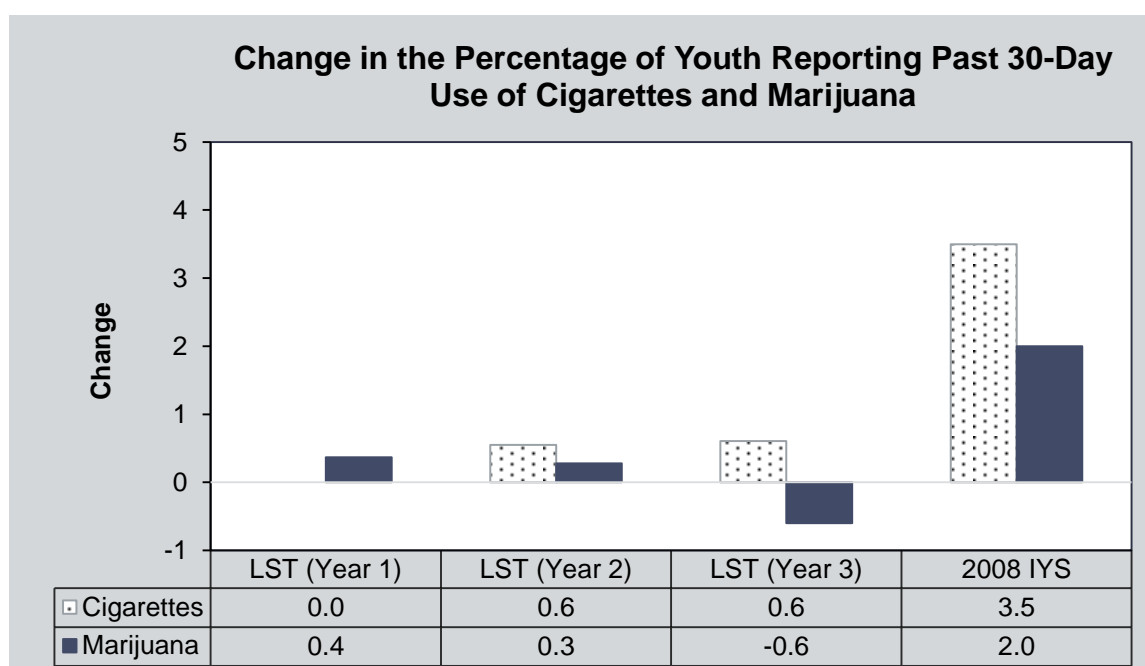

Outcome Data:
Other Substances

Figures 16 through 21 present data on participants' use of, attitudes toward, and perception of risk of harm from cigarettes and marijuana, and 2008 Iowa Youth Survey (IYS) comparison data.

Tobacco and Marijuana Use by Program Group

As shown in Figure 16, all years of LifeSkills Training (LST) had a positive effect on cigarette and marijuana usage. All years of LST show no change or increases in cigarette use of less than 1 percentage point, whereas the IYS data show an estimated yearly increase of 3.5 percentage points. Years 1 and 2 of LST also show increases of less than 1 percentage point for marijuana use, and Year 3 of LST shows a decrease in marijuana use. The IYS data show an estimated yearly increase in marijuana use of 2 percentage points.

Figure 16. Life Skills Training Outcome Data and 2008 6th and 8th Grade Iowa Youth Survey Data: Past 30-Day Use of Cigarettes and Marijuana

Change in the Percentage of Youth Reporting Past 30-Day Use of Cigarettes and Marijuana

	LST (Year 1)	LST (Year 2)	LST (Year 3)	2008 IYS
▫ Cigarettes	0.0	0.6	0.6	3.5
■ Marijuana	0.4	0.3	-0.6	2.0

Notes: [1]The median number of days between pre- and post-tests was 47 for the first year of LST, 29 for the second year, and 35 for the third. IYS data are reported as annual change estimates.
[2]A negative value or value lower than the IYS value is a favorable outcome.
[3]Pre-test percentages for LST (Year 1): cigarettes, 1.5%; and marijuana, 0.4%. For LST (Year 2): cigarettes, 1.1%; and marijuana, 0.8%. For LST (Year 3): cigarettes, 4.8%; and marijuana, 4.2%.

As shown in Figure 17, Project Towards No Drug Abuse (TND) had a positive effect on cigarette use. Specifically, for past 30-day use of cigarettes, there is a 1.8 percentage point increase from pre-test to post-test, which is less than the 2008 IYS estimate of a 3.3 percentage point increase. Marijuana use increased by 0.9 percentage points, which is close to the estimated change for the IYS data.

Figure 17. Project Towards No Drug Abuse Outcome Data and 20088th and 11th Grade Iowa Youth Survey Data: Past 30-Day Use of Cigarettes and Marijuana

Change in the Percentage of Youth Reporting Past 30-Day Use of Cigarettes and Marijuana

	TND	2008 IYS
▫ Cigarettes	1.8	3.3
■ Marijuana	0.9	1.0
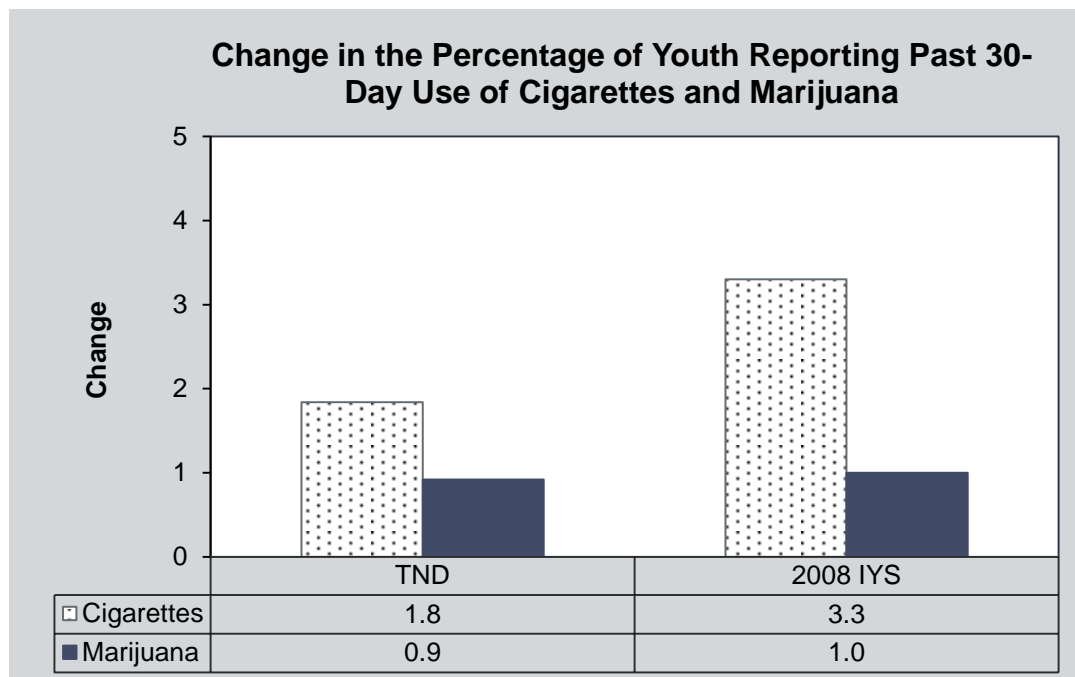
Notes: [1]The median number of days between pre- and post-tests was 98 for TND. IYS data are reported as annual change estimates.
[2]A negative value or value lower than the IYS value is a favorable outcome.
[3]Pre-test percentages for these items were: cigarettes, 11.6%; marijuana, 6.7%.

Attitude and Perceived Risk of Harm from Cigarette Use by Program Group

Figures 18 and 19 show outcomes for individual attitudes and perceived risk of harm from cigarette use by program, presenting the percentages of participants with favorable and unfavorable outcomes for each program group. Favorable outcomes mean that attitudes changed in the desired direction (grew more negative toward cigarette use, e.g., respondent disapproved of cigarette use at pre-test and strongly disapproved at post-test), or that the pre- and post-test responses remained the same and were negative toward cigarette use. Unfavorable outcomes mean that attitudes did not change in the desired direction from pre-test to post-test (grew more positive toward cigarette use, e.g., respondent felt cigarette use posed moderate risk at pre-test and no risk at post-test) or that the pre- and post-test responses remained the same and were positive toward cigarette use.

Figure 18. Attitudes Toward Cigarette Use

Do you disapprove of someone your age smoking one or more packs of cigarettes per day?

	LST (Year 1)	LST (Year 2)	LST (Year 3)	TND
■ Favorable	90.3	92.1	90.2	79.3
□ Unfavorable	9.7	7.9	9.8	20.7

Figure 19. Perceived Risk of Harm from Cigarette Use

How much do you think you risk harming yourself if you smoke cigarettes every day?

	LST (Year 1)	LST (Year 2)	LST (Year 3)	TND
■ Favorable	89.3	90.6	84.2	84.4
□ Unfavorable	10.7	9.4	15.9	15.6

Attitude and Perceived Risk of Harm from Marijuana Use by Program Group

Figures 20 and 21 show outcomes for individual attitudes and perceived risk of harm from marijuana use by program, presenting the percentages of participants with favorable and unfavorable outcomes for each program group. Favorable outcomes mean that attitudes changed in the desired direction (grew more negative toward marijuana use, e.g., respondent disapproved of marijuana use at pre-test and strongly disapproved at post-test), or that the pre- and post-test responses remained the same and were negative toward marijuana use; unfavorable outcomes mean that attitudes grew more positive toward marijuana use from pre-test to post-test (e.g., respondent strongly disapproved of marijuana use at pre-test and didn't disapprove at post-test), or that the pre- and post-test responses remained the same and were positive toward marijuana use.
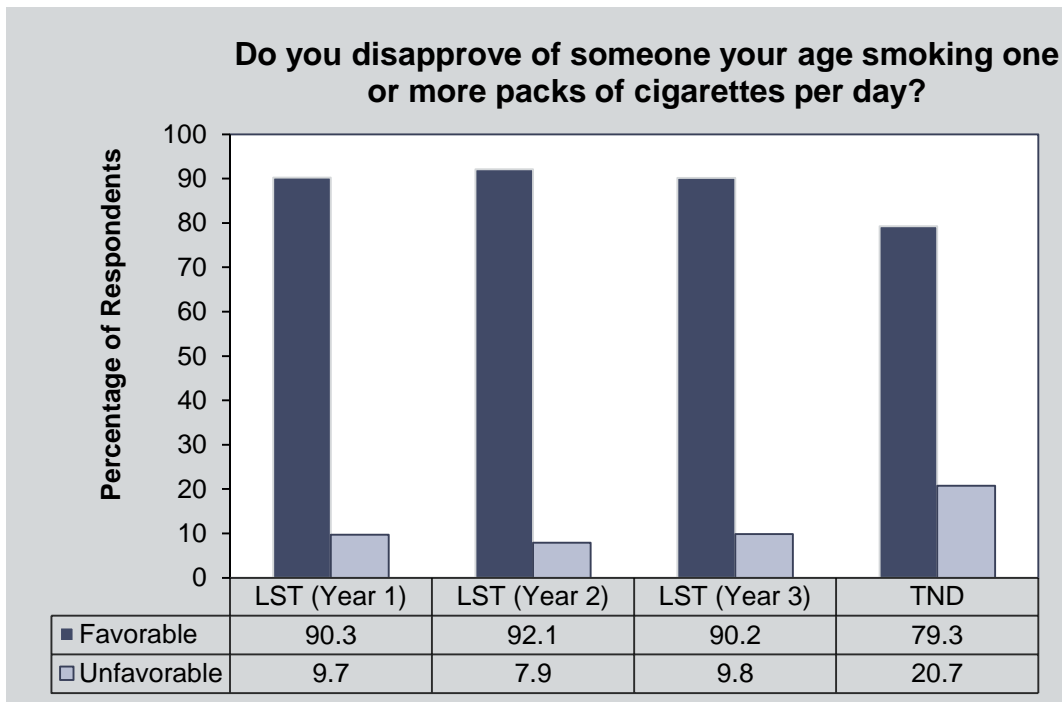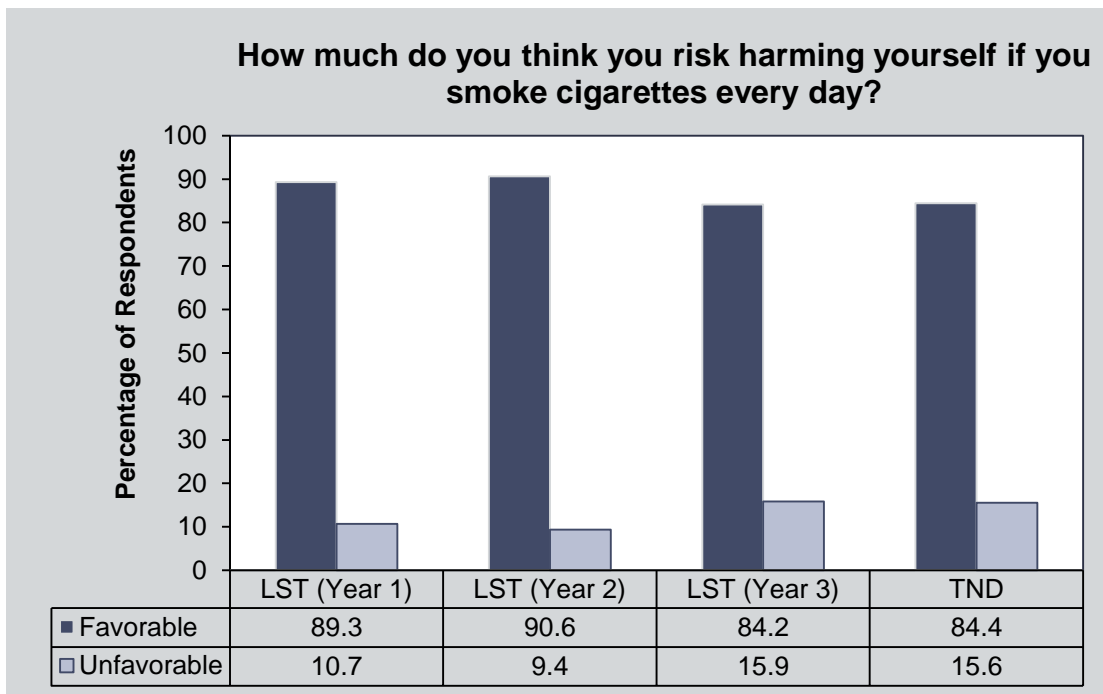
Figure 20. Attitudes Toward Marijuana Use

Do you disapprove of someone your age smoking marijuana regularly?

	LST (Year 1)	LST (Year 2)	LST (Year 3)	TND
■ Favorable	92.2	93.1	91.4	76.8
□ Unfavorable	7.8	6.9	8.6	23.2
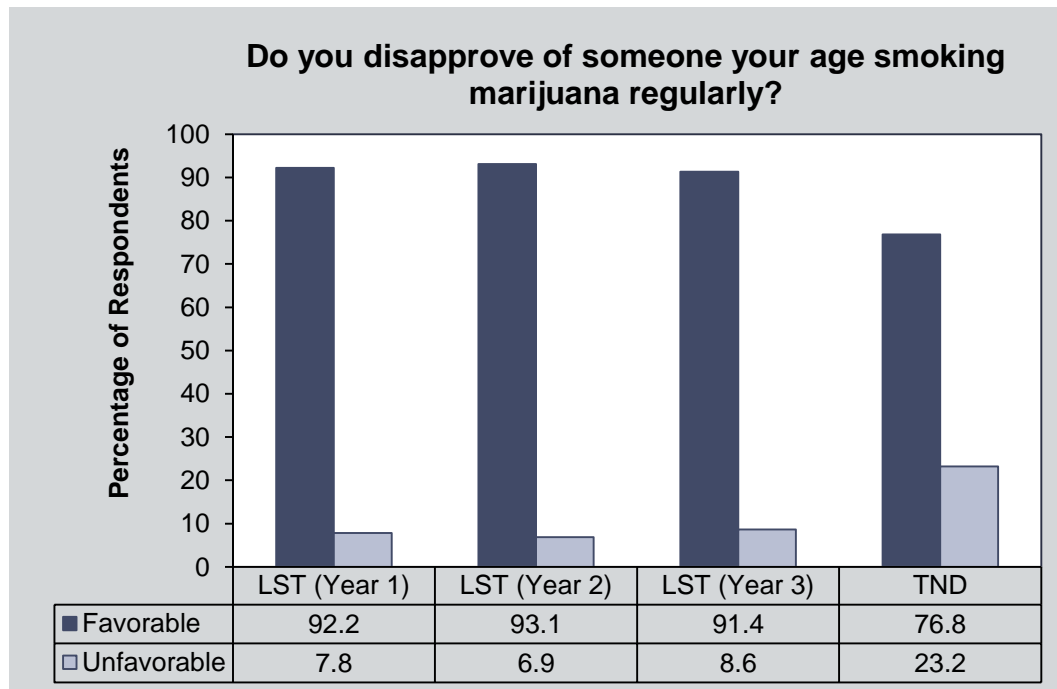
Figure 21. Perceived Risk of Harm from Marijuana

How much do you think you risk harming yourself if you smoke marijuana once a week?

	LST (Year 1)	LST (Year 2)	LST (Year 3)	TND
■ Favorable	87.4	88.8	79.0	74.8
□ Unfavorable	12.7	11.2	21.0	25.2
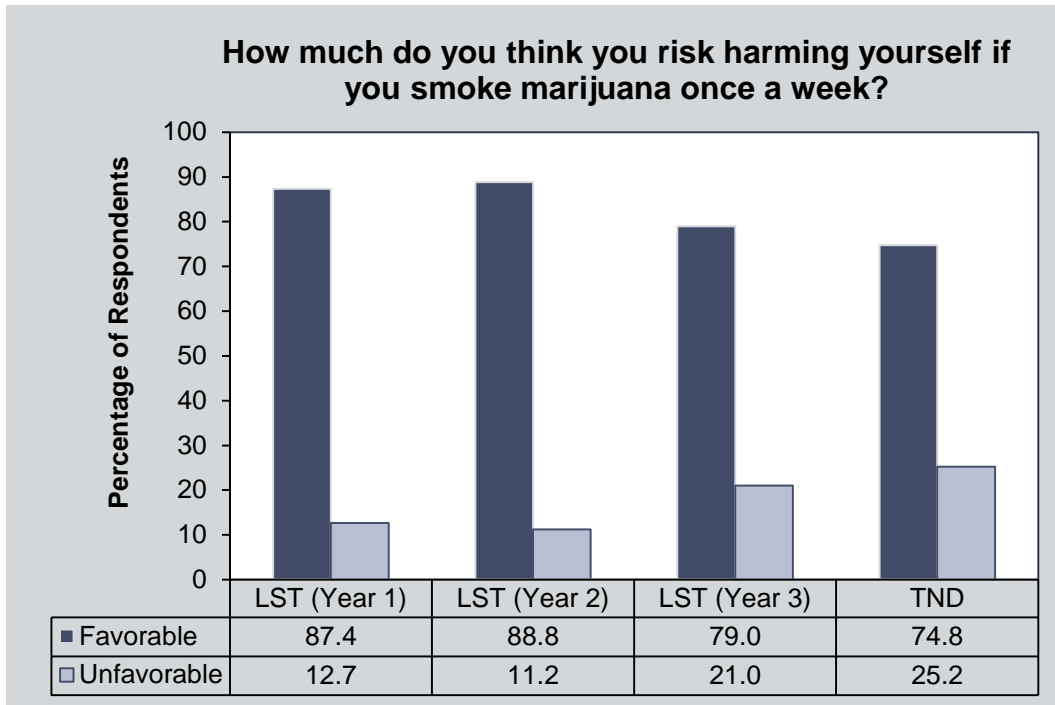
Appendix 2

# LifeSkills Training
Full Program Data

Figures 22 through 24 show data for youth who completed all three years of LifeSkills Training (LST). Data collected during the students' sixth grade year (pre-test) were compared to data collected during their eighth grade year (post-test). The Iowa Youth Survey (IYS) comparison differs in this appendix from the rest of the report, as the LST program spanned two calendar years. The IYS values reported here are the differences between sixth and eighth grade percentages from the 2008 IYS.

Alcohol Use, Binge Drinking, and Perceived Risk of Harm from Alcohol Use

Figure 22 shows that LST had a positive effect on binge drinking. The percent change in the incidence of binge drinking among Jackson GRAA LST participants was just over half that among IYS respondents. LST participants show a slightly greater increase than the IYS in the percent of youth reporting past 30-day use of alcohol. And, LST participants show a decrease in perceived risk of harm from alcohol use, whereas the IYS data show no change.

Figure 22. Life Skills Training Full Program Outcome Data and 2008 6th and 8th Grade Iowa Youth Survey Data: Past 30-Day Use; Binge Drinking; and Perceived Risk of Harm

Change in the Percentage of Youth Reporting Past 30-Day Use of Alcohol, Binge Drinking, and Perceived Risk of Harm from Alcohol Abuse

	LST 3 Years	2008 IYS
■ Past 30-Day Use	13.7	13.0
□ Binge Drinking	4.8	9.0
□ Perceived Risk of Harm	-1.6	0.0
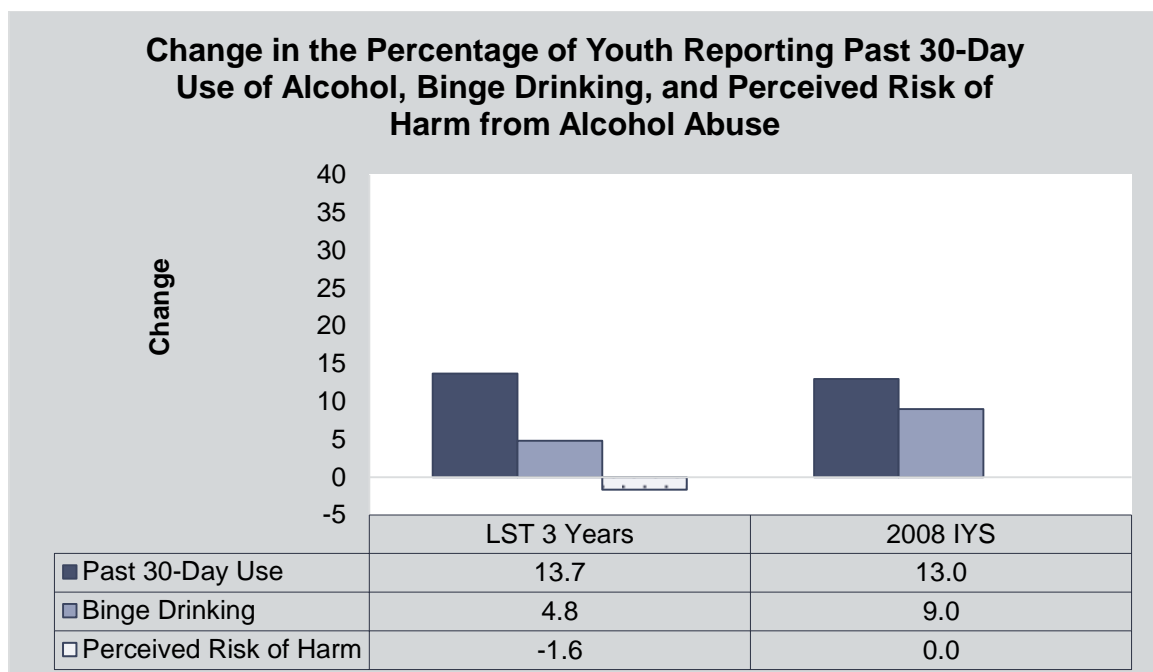
Notes: [1]The median number of days between pre- and post-tests was 797 for the full LST program. IYS data is reported as the difference between sixth and eighth grades in the 2008 Iowa Youth Survey data.
[2]The percents of respondents reporting use and perceived risk from alcohol use at pre-test were as follows: past 30-day alcohol use, 6.5%; binge drinking: 2.4%; and perceived risk of harm: 96.7%.

Alcohol Availability

Figure 23 presents the pre-test to post-test change in perception of alcohol availability for LST and the change in perception of alcohol availability based on the 2008 IYS data. LST showed a greater increase in the percentage of youth saying it would be easy to obtain alcohol than we would expect to see from sixth to eighth grade, based on 2008 IYS data.

Figure 23. Life Skills Training Full Program Outcome Data and 2008 6th and 8th Grade Iowa Youth Survey Data: Perceived Alcohol Availability

Change in the Percentage of Youth Reporting Ease for a Kid Their Age to Get Alcohol

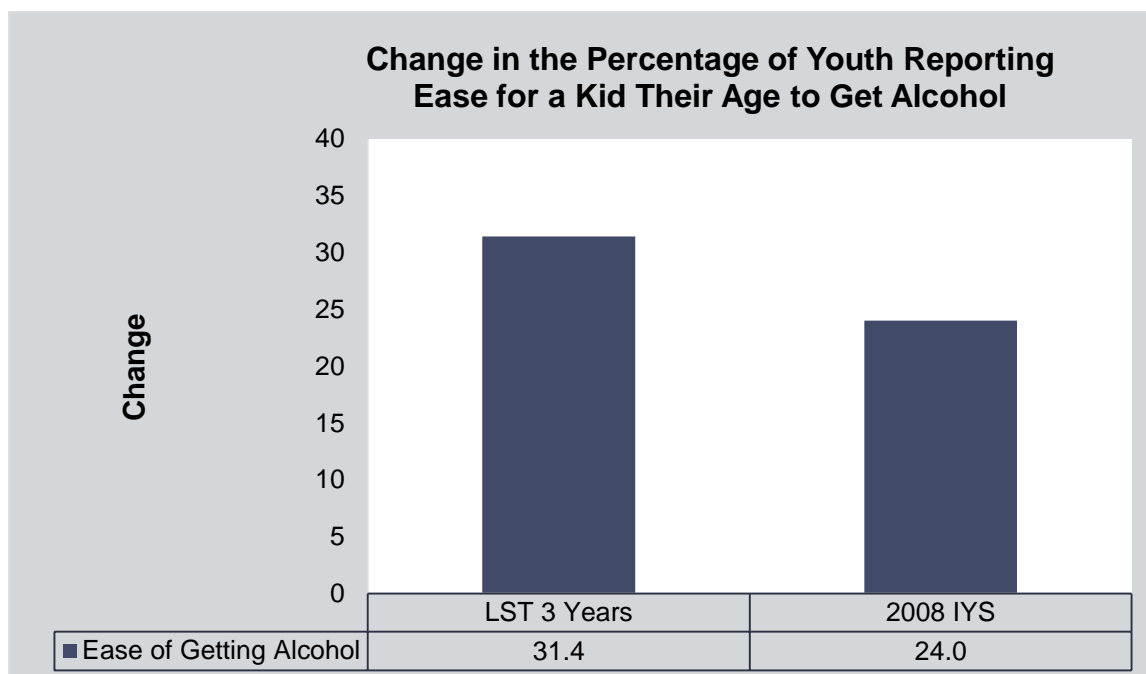|	LST 3 Years	2008 IYS
■ Ease of Getting Alcohol	31.4	24.0

Notes: [1]The median number of days between pre- and post-tests was 797 for the full LST program. IYS data is reported as the difference between sixth and eighth grades in the 2008 Iowa Youth Survey data.
[2]"Don't know" responses were combined with missing responses and were not included in the total when calculating the percentages.
[3]The percent of respondents reporting ease to get alcohol for LST at pre-test was 19.8%.

Cigarette and Marijuana Use

As shown in Figure 24, LST had a positive effect on cigarette and marijuana usage. Specifically, for past 30-day use of cigarettes, there is an increase of 4 percentage points from pre to post; which is lower than the 2008 increase of 7 percentage points. And, for past 30-day use of marijuana, there is an increase of 3.2 percentage points; which is less than the 2008 IYS increase of 4 percentage points.

Figure 24. Life Skills Training Full Program Outcome Data and 2008 6th and 8th Grade Iowa Youth Survey Data: Past 30-Day Use of Cigarettes and Marijuana

Change in the Percentage of Youth Reporting Past 30-Day Use of Cigarettes and Marijuana

	LST 3 Years	2008 IYS
■ Cigarettes	4.0	7.0
■ Marijuana	3.2	4.0

Notes: [1]The median number of days between pre- and post-tests was 797 for the full LST program. IYS data is reported as the difference between sixth and eighth grades in the 2008 Iowa Youth Survey data.
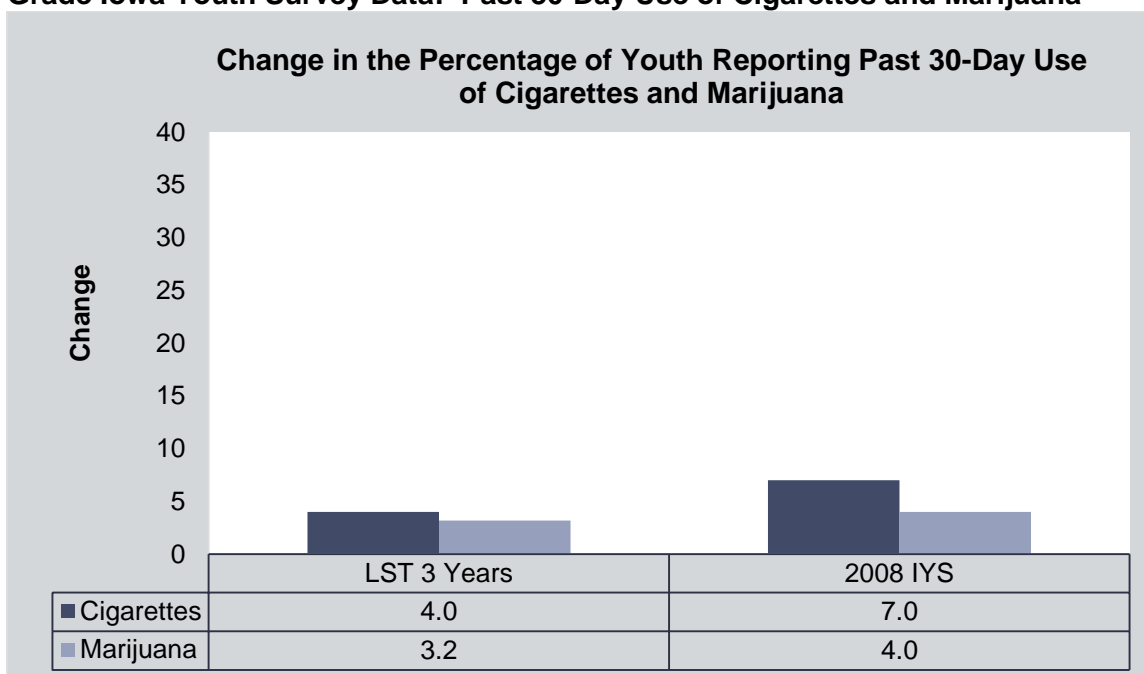[2]The percents of respondents reporting use at pre-test were as follows: cigarettes, 1.6%; and marijuana, 0%.

Appendix 3

Project Action Plan Year 1
September 1, 2008 – August 31, 2009

Program Elements and Action Steps — Year 1 Timeline:	Se	Oc	No	De	Ja	Fe	Ma	Ap	My	Jn	Jl	Au
Advertise/Hire Maquoketa, ASAC & Consortium Staff[1]	♦	♦										
Form Project Oversight Committee & Meet Quarterly[1]		♦		♦			♦			♦		
Travel to Grantor TA, Project Director and OSDFS conferences[1, 2]	As scheduled by OSDFS											
CMCA Element Action Steps [2, 3, 5]:												
Form Local CMACA Committees in each district	♦	♦	♦									
Identify access/systems change priorities; Examples include:		♦	♦									
♦ Retailer/Server trainings												
♦ Increase Compliance Checks & Law enforcement												
♦ Parental commitments to not providing to minors												
♦ Social marketing campaigns on risks of providing to minors				♦	♦	♦	♦	♦	♦	♦		
Implement identified CMCA strategies, including one-on-ones											♦	♦
Evaluate results & modify PY2 action plan												
LST Elements Action Plan [4, 6],												
Identify middle schools teachers who will teach LifeSkills	♦											
Obtain Materials & train ASAC Staff and teachers on LST	♦	♦										
				♦	♦	♦	♦	♦	♦	♦			
Initiate LST at middle schools using these models									♦	♦	♦	
Evaluate results & modify PY2 action plan										♦	♦	♦
Identify in-service school staff to co-teach in PY2												
PTNDA Element Action Plan [4, 6],												
Obtain PTNDA materials & Train ASAC staff & Teachers		♦	♦									
Initiate PTNDA program with 9th graders				♦	♦	♦	♦	♦	♦			
Evaluate results & modify PY2 action plan									♦	♦	♦	
Identify teachers to co-teach PTNDA in year 2									♦	♦		
In-service school staff to co-teach PTNDA in Year 2										♦	♦	

(Table continued on next page)

Task												
Leadership and Resiliency Program Element Action Plan [4,6]	♦	♦										
Obtain LRP program materials & Train ASAC staff and teachers		♦	♦	♦	♦	♦	♦	♦	♦			
Recruit HS students & initiate LRP program								♦	♦	♦		
Evaluate results & modify PY2 action plan									♦	♦	♦	
In-service HS staff to co-facilitate LRP Program in PY 2										♦	♦	♦
Reconnecting Youth Element Action Plan [4,6]	♦	♦										
Obtain RY program materials & Train ASAC staff & teachers		♦	♦	♦	♦	♦	♦	♦	♦			
Recruit HS students & initiate RY program								♦	♦	♦		
Evaluate results & modify PY2 action plan									♦	♦	♦	
In-service HS staff to co-facilitate RY Program in PY 2										♦	♦	♦
Evaluation Action Plan [1,2,7]												
Meet with evaluation consultant and finalize evaluation plan	♦	♦										
Collect & analyze process/outcome data with evaluator	♦	♦	♦	♦	♦	♦	♦	♦	♦	♦		
Share data with Oversight Committee for review/feedback				♦		♦			♦			
Develop annual project report &modify PY2 action plan											♦	♦

Responsibility: 1=Proj Director; **2=**CMCA Coordinator; **3=** Superintendents; **4=**School Staff; **5=**CMCA Groups; **6=**Prevention Specialists; **7=**Consortium

Appendix 4

CMCA Logic Model
Project Action Plan, Years 2 and 3
September 1, 2009 – June 30, 2011

Logic Model – Underage Drinking							
Theory of Change: Implementing multiple strategies to address underage drinking will likely delay use and use less.							
Problem Statement			Strategy	Activities	Outcomes		
Problem	**But why?**	**But why here?**			**Short Term**	**Intermediate**	**Long-Term**[1]
Too many of Jackson County's youth are drinking alcohol. 51% of JCSD's 11th graders have consumed at least one drink in the past 30 days.* 42% of JCSD's 11th graders have driven a motor vehicle after using any amount of alcohol or drugs in the past 30 days.*	Social norms tolerate and/or encourage underage drinking	Parents & adults condone the behavior (rite of passage). 24% of JCSD's 11th graders report that their parents view drinking alcohol as not wrong at all or a little wrong.*	Changing consequence.	Educate parents and youth of the consequences when caught drinking alcohol.	Material is written and published regarding consequences of underage drinking.	More parents and youth know the consequences of underage drinking.	By July 2011, 60% of JCSD's 11th graders will not have consumed any alcohol in the past 30 days. By July 2011, 90% of JCSD's 11th graders will report high or moderate risk when drinking alcohol. By July 2011, 90% of JCSD's 11th graders will report that their parents view underage drinking as very wrong or wrong. By July 2011, 60% of JCSD's 11th graders will report that their best friends would feel that drinking alcohol is very wrong or wrong. By July 2011, 75% of alcohol vendors will have wait staff trained in TIPS.
			Modify policies.	JCSD's will consistently enforce their policy on students caught drinking underage.	Recruit key members. Review local procedures.	Develop plan to address deficiencies. Implement plan. Evaluate the plan. Make appropriate changes.	
		Youth do not think drinking alcohol is dangerous. 19% of JCSD's 11th graders think that there is no risk or slight risk when drinking 3 or more alcoholic drinks/day.*	Changing consequence.	Develop a social marketing campaign targeted at youth on the dangers of underage alcohol use.	Recruit youth to develop social marketing campaign. Develop the campaign.	Implement campaign. Evaluate campaign. Modify changes as needed.	
		Youth report their peers condone drinking alcohol. 64% of JCSD's 11th graders report that their best friends would feel that drinking alcohol is not wrong at all or a little wrong.*	Perception change & Increase Education.	Develop a social marketing campaign to reduce acceptance of underage alcohol use.	Recruit youth. Develop campaign.	Implement campaign. Evaluate campaign.	
	Because alcohol is easy to obtain.	Jackson County has a high number of bars and retail outlets that sell alcohol. Jackson County has 94 active liquor licenses. ** 77% of JCSD's 11th graders Say that alcohol is either easy or very easy to get.*	Reduce access.	Offer TIPS training to all employees who sell alcohol.	Recruit alcohol vendors to participate in the TIPS program.	Alcohol vendors require alcohol sellers and cashiers to complete the TIPS training.	

* 2005 Iowa Youth Survey, Jackson County Community School Districts.
** State of Iowa, Alcoholic Beverages Division.

Appendix 5

Process Interview Summaries

1. What successes have you observed or experienced during the first six months of the Jackson County Alcohol Abuse Prevention/Reduction Project?

   - Four respondents stated that the project has received positive media coverage. Several respondents noted an increase in community awareness of and more discussions within the community about the underage drinking problem. Three respondents stated/indicated that the prevention programs had been implemented quickly and without any problems.

2. What problems have you encountered during the first six months of the project? How did you deal with these problems, or what solutions did you come up with to overcome these problems?

   - Six respondents stated that one problem was a lack of support. Four of these respondents noted a lack of support from school personnel for program implementation. Two respondents identified a lack of community support for the project. Suggested solutions included improving communications, promoting the project and prevention programs, and holding implementation meetings in each district.

   - Two respondents stated that LRP did not start as early as planned. These respondents stated that training was not provided soon enough and that it took longer to identify and recruit student participants. As a result, LRP was not implemented during the first semester of the first project year as planned. Two respondents identified problems interfacing the prevention programs and school rules. One stated that school rules required a letter grade be assigned for the prevention programming, but that it is difficult to assign letter grades when there are no assignments or tests (for instance, how to determine that someone earns an A versus a B). The other respondent indicated he/she had difficulty finding activities for students to do during survey time who did not have parental consent to take the survey. One respondent stated that inclement weather had been a barrier.

3. Do you need any technical assistance or clarification related to the project? If yes, please explain your specific needs.

   - All respondents except for one stated that additional technical assistance was not needed. The respondent who reported a need for technical assistance identified coalition development and increasing community support for LRP as the main areas of need. Two respondents noted that project staff has done a good job of disseminating information. One respondent questioned how long surveys and other grant documents should be saved.

4. What do you think the focus (or goal) of CMCA should be in your community?

- Six respondents stated that CMCA needs to affect underage drinking, but most of these respondents were not sure what form CMCA should take. Two respondents stated that they were not sure.

5. What has this project done for your community?

- Five respondents stated that the project has increased community awareness of the underage drinking problem. Some respondents also noted an increase in community awareness and support for the project. Two respondents stated that they were either not sure of the impact or that it was too early to notice any impact on the community. One respondent identified a positive response from school personnel in regards to the counseling component of the project.

6. How would you improve the project?

- Three respondents stated that more recruitment was needed for CMCA. Three respondents mentioned that more buy-in to the project was needed from law enforcement or school personnel. A respondent stated that more information from previous grant recipients would have helped. Another respondent suggested that meetings be held in each school district once a semester to help maintain communication and promote the project.

7. How closely did implementation match the plan? What deviations, if any, occurred? What led to the deviations and what was the impact on the project? (Answered by implementation staff and the project coordinator only.)

- All respondents stated that, overall, implementation has matched the plan with each respondent noting at least one deviation. Two respondents stated that the first year of LST was being implemented with seventh graders instead of sixth graders in one district. This was done to better integrate LST into the district. Two respondents identified changes to how LRP was being implemented; one stating that LRP was being implemented in two school districts rather than three, and the other noting that LRP did not start until the second semester of the first project year. One respondent stated that TND was being implemented with tenth graders rather than ninth graders in two districts. This change was due to how classes are scheduled in those districts. One respondent stated that the implementation of CMCA has not kept up with the plan because of initial struggles in scheduling meetings and recruiting members.

8. What activities have been initiated to sustain prevention programming beyond the grant? (Answered by superintendents, the project assistant, and the project coordinator only.)

- Almost all the respondents identified at least one thing being done to sustain the project. Some actions undertaken include: embedding programs into school plans and classroom curricula; training school personnel and community members to implement the programs; purchasing extra program materials; and actively promoting grant activities within the county.

9. What activities has the oversight committee undertaken to effect system-wide change? (Answered by superintendents, the project assistant, and the project coordinator only.)

- Two respondents stated that nothing had yet been done to effect system-wide change. Other responses included: good conduct policy review and revisions; promote prevention activities and the counseling services; and recruit a diverse and representative group for CMCA.

1. What successes have you observed or experienced during the first year of the Jackson County Alcohol Abuse Prevention/Reduction Project?

   - Four respondents stated that the project has received positive media coverage. Four respondents identified the counseling services as a success. These respondents noted that the number of referrals increased as the year progressed and more and more students and school personnel became aware of these services.

   - Three respondents identified that the prevention programs had been implemented quickly and without any problems. Two respondents stated that strong relationships have been formed between project staff and school personnel, as well as with other community groups, during the first project year.

2. What problems have you encountered during the first year of the project? How did you deal with these problems, or what solutions did you come up with to overcome these problems?

   - Four respondents stated that one problem was a lack of support from school personnel for program implementation. Suggested solutions included improving communications, promoting the project and prevention programs, and holding implementation meetings in each district. Two respondents stated that CMCA did not start as early as planned. These respondents stated that training was not provided as early as planned, and that recruitment and action planning took longer than had been anticipated.

3. What do you think the focus (or goal) of CMCA should be in your community?

   - Seven respondents stated that the focus should to reduce underage drinking. These respondents provided various suggestions as to how to reduce underage drinking, including: reducing youth access to alcohol; social norm change; educating parents; and increasing community involvement in prevention efforts.

4. What CMCA actions have had the greatest success?

   - Six respondents identified Project Sticker Shock as the most successful CMCA action. These respondents noted that Project Sticker Shock received positive media coverage, increased community awareness that providing alcohol to minors is illegal, was a positive experience for youth participants, and that it was well received by area businesses.

   Have any CMCA actions not met your expectations?

   - Five respondents reported that there were no CMCA actions that did not meet their expectations. Two respondents stated that project staff selected and implemented the CMCA actions they were most interested in; which was not necessarily reflective of community or CMCA group needs. One respondent noted that local CMCA groups were not formed so the CMCA actions implemented during the first project year were all county-wide actions.

What other actions would you like to implement as part of CMCA?

- A variety of other CMCA actions were identified by the respondents. These actions include: more one-on-one interviews; parent panels on underage drinking; alcohol-free graduation signs; alcohol server trainings; policy change; either create a CMCA group for each of the other three communities or add representatives from other communities to the existing CMCA group; and more youth advocacy.

5. What has this project done for your community?

- Six respondents stated that the project has increased community awareness of the underage drinking problem. Some respondents also noted an increase in community awareness and support for the project. One respondent identified an increase in student awareness of available counseling services.

6. How has your community responded to the project?

- Seven respondents stated that the response has been positive. One respondent reported that community members were in denial that there was an underage drinking problem, and that most community members feel that these problems occur in other communities but not their own.

7. How closely did implementation match the plan? What deviations, if any, occurred? What led to the deviations and what was the impact on the project? (Answered by implementation staff and the project coordinator only.)

- All respondents stated that implementation has matched the plan pretty closely with each respondent noting at least one deviation. Two respondents stated that CMCA was not implemented as planned. These respondents noted that the CMCA training was held much later than planned, which delayed a lot of the CMCA actions during the first project year. These respondents also identified the deviation from a CMCA group in each district to one county-wide CMCA group.

- Two respondents stated that the first year of LST was being implemented with seventh graders instead of sixth graders in one district. This was done to better integrate LST into the district. Two respondents reported that TND was being implemented with tenth graders rather than ninth graders in two districts. This change was due to how classes are scheduled in those districts. One respondent identified that LRP was being implemented in two school districts rather than three.

8. What activities have been initiated to sustain prevention programming beyond the grant? (Answered by superintendents, the project assistant, and the project coordinator only.)

- Almost all the respondents identified at least one thing being done to sustain the project. Some actions undertaken include: embedding programs into school plans and classroom curricula; training school personnel and community members to implement the programs; purchasing extra program materials; and developing relationships with neighboring districts and communities.

9. What activities has the oversight committee undertaken to effect system-wide change? (Answered by superintendents, the project assistant, and the project coordinator only.)

- Three respondents stated that the oversight committee has reviewed and helped to promote program implementation. Two respondents stated that nothing had yet been done to effect system-wide change. A respondent stated that the oversight committee shares resources and lessons learned. Another respondent stated that the committee re-allocated funds to maximize project impact.

1. What successes have you observed or experienced during the first half of the Jackson County Alcohol Abuse Prevention/Reduction Project?

   - Four respondents stated that community awareness about the project and the underage drinking issue has increased since the project first began. In addition, two respondents identified that the project has received positive media coverage.

   - Three respondents identified the counseling services as a success. These respondents noted that the counseling services really seemed to help the youth. Two respondents noted that school personnel assumed responsibility for implementing the prevention programs earlier than planned, and without any problems.

2. What problems have you encountered during the first half of the project? How did you deal with these problems, or what solutions did you come up with to overcome these problems?

   - Four respondents stated that one problem was a lack of community support for CMCA and the project in general. Suggested solutions included more membership drives, continued work with media partners to promote our actions, and continue to hold meetings. Three respondents noted that all school personnel are not fully aware of the services being offered as part of this project. These respondents stated that project staff should continue meeting with school personnel to inform them of the options this grant presents.

3. What CMCA actions have had the greatest success?

   - Five respondents identified Project Sticker Shock as the most successful CMCA action. These respondents noted that Project Sticker Shock received positive media coverage, increased community awareness that providing alcohol to minors is illegal, was a positive experience for youth participants, and that it was well received by area businesses. Other CMCA actions that were identified as great successes included: alcohol server trainings; town hall meetings; and Red Ribbon Week activities.

   Have any CMCA actions not met your expectations?

   - Five respondents stated that community support for CMCA has been lacking. These respondents identified this lack based on low attendance numbers at CMCA meetings and community events. Three respondents reported that there were no CMCA actions that did not meet their expectations.

   What other actions would you like to implement as part of CMCA?

   - A variety of other CMCA actions were identified by the respondents. These actions include: more recruitment efforts; more alcohol server trainings; social marketing campaign; replace Project Sticker Shock with a project placing stickers (encouraging youth not to drink) on corsage/boutonniere boxes at prom time; and more clearly

defining or describing what actions may be implemented as part of CMCA and this project.

4. Have you attended any local meetings or presentations associated with this project? If so, which ones? What worked well? What did not work as well as you would have liked? How can these be improved upon?

- Seven respondents stated that they had attended at least one meeting, including CMCA meetings, town hall meetings, Red Ribbon Week presentations, and panel discussions. Most of these respondents stated that the meetings themselves went well, with one respondent suggesting that agendas be streamlined so as to keep meetings and presentations within the allotted time frame. All of these respondents identified poor attendance as the only barrier, with one also noting that any subsequent community action was lacking.

5. What suggestions do you have for improving the project?

- Five respondents stated that more work must be done to increase community support for the project. One of these respondents identified parents and other school personnel as specific target populations to increase support. Three respondents noted that the project has been going well and that nothing else was needed. One respondent stated that a project attempting to alter community norms needed more than three years to achieve any lasting success.

6. How closely did implementation match the plan? What deviations, if any, occurred? What led to the deviations and what was the impact on the project? (Answered by implementation staff and the project coordinator only.)

- All respondents stated that implementation has matched the plan pretty closely, with two noting at least one deviation. One respondent stated that it has taken longer to create the CMCA coalition and to have it up and running. Another respondent identified that school personnel began implementing programs earlier in the project than planned.

7. What activities have been initiated to sustain prevention programming beyond the grant? (Answered by superintendents, the project assistant, and the project coordinator only.)

- Almost all the respondents identified at least one thing being done to sustain the project. Some actions undertaken include: embedding programs into school plans and classroom curricula; training school personnel and community members to implement the programs; and purchasing extra program materials.

8. What activities has the oversight committee undertaken to affect system-wide change? (Answered by superintendents, the project assistant, and the project coordinator only.)

- Three respondents stated that the oversight committee has not done much yet to effect system-wide change. One respondent stated that the oversight committee provided oversight to the good conduct policy review process. A respondent stated that the oversight committee shares resources and lessons learned. Another respondent stated that the committee worked to ensure that each district integrated programming into their curricula.

Year 2 Round 2
July 1, 2009 – June 14, 2010

1. What successes have you observed or experienced during the first half of the Jackson County Alcohol Abuse Prevention/Reduction Project?

- The most frequently cited success was that community and student awareness about the project and underage drinking issues has increased since the project began. Several also commented that the project has received positive media coverage and support.

- Several respondents indicated that the in-school prevention programs seem to have gone smoothly, that students are engaged for the most part, and that they've seen notable improvements particularly in LRP participants.

- Several respondents indicated that the provision of counseling services in the schools fills an important need and that while participation is somewhat low, significant gains are seen in the students who are involved in treatment.

- A few respondents indicated that parents are starting to become involved in the coalition.

2. What problems have you encountered during the first half of the project? How did you deal with these problems, or what solutions did you come up with to overcome these problems?

- A problem frequently mentioned was the lack of community support for CMCA and the project in general, and that the project is still working on increasing awareness and education, which is behind where they planned to be at this point. Project staff continues to make good use of media coverage. Two upcoming events have been planned to help address the problem: Shoulder to Shoulder parent training; and a Hidden in Plain Sight presentation, which will be enhanced by involvement of the local theater group.

- Some respondents also mentioned challenges with school-based prevention programs. The Leadership and Resiliency Program (LRP) appears to present the most challenges. One school did not implement LRP, as they felt they had insufficient support for program implementation and success, and one school didn't implement LRP until second semester. Some respondents indicated that community support for service activities is lacking, and that teachers seem reluctant to take the lead with this program. Staff and school personnel addressed an apparent lack of engagement on the part of older Project Towards No Drug Abuse participants by having them observe a mock alcohol-related car crash and listen to speakers personally affected by alcohol-related accidents. In addition, school staff reductions have posed challenges to maintaining programs, but schools have reassigned responsibilities to keep the programs running.

- Some respondents also indicated that schools aren't making full use of the available counseling services. The counselor has sent letters to school principals, counselors, and juvenile court staff to remind them to be aware of kids who may need treatment, and additional students were referred for treatment as a result.

3. a.) What CMCA actions have had the greatest success?

- Most respondents identified Project Sticker Shock as the most successful CMCA action. These respondents noted that Project Sticker Shock received positive media coverage, increased community awareness that providing alcohol to minors is illegal, was a positive experience for youth participants, and that it was well received by area businesses.

- Respondents also indicated that the most recent town hall meeting was a great success. It was well-attended, partly attributed to advertising, games played, and prizes offered, including a post-prom prize offered to students returning cards received at the meeting. In addition, respondents saw the community picnic as a success, with many teens becoming involved.

b.) Have any CMCA actions not met your expectations?

- Several respondents stated that community support for CMCA has been lacking. These respondents identified this issue based on low attendance at CMCA meetings and community events, the limited number of sectors involved in the coalition, and that project staff seem to do most or all of the work.

- Some respondents also mentioned that the Parent-to-Parent sign-up at school registration did not go as well as hoped. Not enough parents signed up to justify the printing costs of the booklets, so those parents did not receive booklets.

c.) What other actions would you like to implement as part of CMCA?

- Some respondents indicated they would like to see the Parent-to-Parent program succeed, and that school registration can be an excellent time for engaging parents in this and other programs and activities, particularly with more high-profile promotion, and parental involvement in efforts to recruit their peers during school registration.

- Additional possible CMCA actions identified by the respondents included expanding TIPS training to other towns and rural establishments, training for coaches and athletic directors on the effects of alcohol and drug use on athletes, and increased coalition ownership of upcoming activities.

4. Have you attended any local meetings or presentations associated with this project? If so, which ones? What worked well? What did not work as well as you would have liked? How can these be improved upon?

- Seven respondents stated that they had attended at least one meeting, including CMCA/coalition meetings, town hall meetings, and meetings of other community coalitions (such as child abuse prevention and domestic violence coalitions).

- Respondents saw prizes and incentives as having led to increased attendance at town hall meetings, but felt that still more parents and community members should be engaged. Suggestions included providing food, such as a full meal, and child care.

- Some respondents also indicated coalition attendance and involvement is still lacking. Some parents are beginning to express interest in becoming involved. Some respondents suggested obtaining feedback from community members who attend one or two meetings but do not return.

5. What suggestions do you have for improving the project?

- Several respondents indicated that project staff and partners are doing all they can to engage the community, and that these efforts and media exposure should continue.

- Some respondents offered suggestions for improvement, including: engaging more parents in coalition meetings and outreach events; engaging more students by offering activities that appeal to them and working with the local SADD group; obtaining buy-in from law enforcement; allowing project staff to attend full CADCA trainings; and updating school-based prevention program materials.

6. How closely did implementation match the plan? What deviations, if any, occurred? What led to the deviations and what was the impact on the project? (Answered by implementation staff and the project coordinator only.)

- Most respondents indicated that project implementation is more closely matching the plan this year, with school-based prevention programs and counseling services being provided in all districts. One respondent indicated that post-test survey participation was good.

- Respondents noted two areas of deviation from the plan. First, community involvement and readiness for change is not as great as expected. Second, there have been school-based prevention program deviations, including one school having one, rather than two, teachers trained; LRP is implemented in two districts rather than three; TND is presented in 9th grade rather than 10th in some schools due to curriculum schedule conflicts; and LST is not presented in 6th grade in one district.

7. What activities have been initiated to sustain prevention programming beyond the grant? (Answered by superintendents, the project assistant, and the project coordinator only.)

- Almost all the respondents identified at least one thing being done to sustain the project. Some actions undertaken include: embedding programs into school plans and classroom curricula; training school personnel and community members to implement the programs; and updating and enforcing school good conduct policies.

- A few respondents indicated that LRP likely won't continue beyond the grant due to the program's cost.

- Several respondents indicated that they are hoping to find ways to continue providing counseling services in the schools.

8. What activities has the oversight committee undertaken to effect system-wide change? (Answered by superintendents, the project assistant, and the project coordinator only.)

- Several respondents stated that the oversight committee itself has not done much to effect system-wide change, but that the meetings help school personnel get a better

picture of how other schools are using the grant and are a good way to get ideas, share collective concerns, and provide support for each other.

- A couple respondents said they would like to see more done, including efforts to get students referred to the counselor and initiate a training for coaches.

Year 3 Round 1
July 1, 2010 – December 31, 2010

1. What successes have you observed or experienced during the first half of the Jackson County Alcohol Abuse Prevention/Reduction Project?

   - The success most frequently cited during this round of interviews was that of the school-based prevention programs. The LifeSkills Training program was most frequently cited as a success. Respondents also indicated that the students seem to be taking the programs and the surveys more seriously, and that the Leadership and Resiliency Program students greatly enjoy the service projects.

   - The second most frequently cited success was that community awareness and parental involvement in the project has increased. Parents are becoming actively involved in the coalition and are making positive contributions to the community education/outreach efforts.

   - A few respondents cited the increased success of the counseling services this year: Use of the services has increased, and all of the schools have now referred students for services. School personnel also indicated that it is a helpful resource and should be continued.

2. What problems have you encountered so far in the project? How did you deal with these problems, or what solutions did you come up with to overcome these problems?

   - Several respondents indicated that the main problems continue to be denial that underage alcohol use is a problem and the lack of involvement on the part of community members, in spite of project staff's best efforts. However, respondents also indicated that community involvement in project activities is starting to increase.

   - Other problems reported include: 1) few counseling referrals, which was addressed through meetings with personnel at each school at the beginning of the school year and implementing school staff's suggestions for methods of advertising the service; 2) the Project Towards No Drug Abuse program not fitting with one school's philosophy, which was addressed by the school deciding not to continue the program beyond the project period; and 3) inadequacy of the training and technical assistance for Communities Mobilizing for Change on Alcohol, which was addressed by implementing activities that were appropriate for and met the needs of individual communities.

   - Some respondents reported that there have been issues related to lack of commitment and reliability with some project and school staff members. The issue with the project staff person was addressed by the supervisor, who spoke with that staff person and a school staff member who monitors that person's schedule at the school. This problem appears to be resolved. The problem with the school staff person is currently being addressed: The Project Coordinator spoke with the project staff person who co-teaches with the school staff member, and the project staff person will outline clear expectations in class for both students and co-teachers, and will also speak to the school staff person individually.

3. a.) What CMCA actions have had the greatest success?

- Most respondents identified Hidden in Plain Sight as the most successful CMCA action thus far. These respondents noted that Hidden in Plain Sight was well attended and garnered positive feedback from participants.

- A few respondents indicated that Sticker Shock had the greatest success, with one noting that the involvement of the Leadership and Resiliency Program students had a positive influence on those students.

- Additional successes mentioned were the overall increase in community involvement in activities and the coalition, and the new social marketing campaign involving students.

b.) Have any CMCA actions not met your expectations?

- Most respondents did not identify any actions that did not meet expectations, but mentioned two planned events that did not occur: 1) Shoulder-to-Shoulder, a parent training event that fell through due to issues on the part of the training organization; and, 2) the summer leadership conference, which project staff decided to forgo in lieu of a fall youth conference being hosted in a nearby county. Project staff presented a workshop on family communication at the conference, and project funds paid transportation costs for Jackson County youth to attend that event.

- One respondent reported that the police remain too busy and under-funded to perform compliance checks. Project staff is looking into additional sources of funding for this.

c.) What other actions would you like to implement as part of CMCA?

- Two respondents mentioned that they would like to see more information disseminated to parents, adults, and youth about the broader effects of alcohol on youth and their lives.

- Respondents also indicated they would like to see the Shoulder-to-Shoulder parent training and additional server trainings implemented.

4. Have you attended any local meetings or presentations associated with this project? If so, which ones? What worked well? What did not work as well as you would have liked? How can these be improved upon?

- All respondents who have attended local presentations indicated that the events went well and that while attendance has historically been low, they have seen increased attendance at most recent events.

- Respondents indicated that the staff is doing a good job of advertising the events and varying meeting/event times and venues in effort to accommodate more community members.

- Several respondents commented that implementing the suggestions of the parents who have become involved in the activities has worked out very well and that their ideas should continue to be supported and implemented.

5. What suggestions do you have for improving the project?

- Several respondents recommended continuing to find new ways to connect with and engage the community. Respondents suggested offering meals at meetings and using social networking sites.

- Several respondents indicated that the funding period should be longer than three years. They indicated that three years is not sufficient to establish effective professional network connections within the communities and change ingrained mindsets.

- Some respondents indicated that obtaining greater buy-in and support of prevention programming on the part of school staff would improve the project.

- Some respondents indicated that they would like to see increased communication regarding certain aspects of the project, including how and whether items purchased with project funds are currently being used, the status of server trainings, and what outreach efforts are being made currently in the smaller communities in the county.

6. How closely did implementation match the plan? What deviations, if any, occurred? What led to the deviations and what was the impact on the project? (Answered by implementation staff and the project coordinator only.)

- Respondents indicated that the project has closely matched the plan other than a few deviations with the school-based prevention programming. As mentioned in earlier reports, one school is not implementing LifeSkills Training in the 6th grade, and Project Towards No Drug Abuse is being implemented in 9th grade in two schools and in 10th grade in another. These deviations occurred in order to accommodate the schools' needs.

- Respondents also reported two deviations that occurred this year with Leadership and Resiliency Program (LRP) implementation. First, Bellevue Community School District is not implementing LRP this year due to the loss of their trained facilitator and insufficient school staff support for maintaining the program. Second, LRP is not being implemented with fidelity in one other school as there are not two facilitators present for all sessions.

7. What activities have been initiated to sustain prevention programming beyond the grant? (Answered by superintendents, the project assistant, and the project coordinator only.)

- Respondents indicated that LifeSkills Training will continue in some manner in three of the schools, being built into the curriculum of other classes. However, the program will be continued in only one grade at one of those schools. Project Towards No Drug Abuse will become part of the health curriculum in one high school.

- Three schools have been unable to find funding to continue the Leadership and Resiliency Program, and one school is still seeking other funding options.

- Several respondents indicated that they are looking into options for continuing the counseling services in the schools.

8. What activities has the oversight committee undertaken to effect system-wide change? (This question is answered by superintendents, the project assistant, and the project coordinator only.)

- Respondents stated that the oversight committee has helped schools address problems, identify the best ways to use project funds and maintain project services in the schools, and address barriers. Two system changes that have occurred are the implementation of Good Conduct Policies and the purchase and use of security cameras in some schools. One respondent indicated that statistics are showing fewer disciplinary problems since the cameras were put into use.

- Respondents also stated that the oversight committee has effected system-wide change through providing overall support and guidance for the project.

Appendix 6

School-Based Prevention Program Implementation Data

Figure 25. **School-Based Prevention Program Implementation Data – 2008-2009 School Year**

School	Program	Grade and Group	Pre-Test Completed	Lessons Implemented	Post-Test Completed
School-Based Prevention Program Implementation Data (continued on following page)					
2008 – 2009 School Year					
Andrew	LST – Core Program	6th Grade, Cohort A	Yes	20	Yes
	TND	10th Grade, Cohort A	Yes	12	Yes
Bellevue	LST – Core Program	6th Grade, Cohort A	Yes	16	Yes
		6th Grade, Cohort B		14	
		6th Grade, Cohort C		17	
	TND	9th Grade, Cohort A	Yes	12	Yes
		9th Grade, Cohort B			
		9th Grade, Cohort C			
	LRP	9th-12th Grade, Cohort A	Yes	21 – Process Groups 5 – Adventure Activities 3 – Community Service	Yes

		School-Based Prevention Program Implementation Data (continued from previous page)			
		2008 – 2009 School Year			
School	Program	Grade and Group	Pre-Test Completed	Lessons Implemented	Post-Test Completed
Maquoketa	LST – Core Program	6th Grade, Cohort A	Yes	21	Yes
		6th Grade, Cohort B			
		6th Grade, Cohort C		15	
		6th Grade, Cohort D			
	TND	10th Grade, Cohort A	Yes	9	Yes
		10th Grade, Cohort B			
		10th Grade, Cohort C			
		10th Grade, Cohort D			
		10th Grade, Cohort E			
	LRP	9th-12th Grade, Cohort A	Yes	35 – Process Groups 4 – Adventure Activities 4 – Community Service	Yes
Preston	LST – Core Program	7th Grade, Cohort A	Yes	19	Yes
		7th Grade, Cohort B		15	
		7th Grade, Cohort C			
	TND	9th Grade, Cohort A	Yes	12	Yes

Program Key

LST   Life Skills Training   TND   Project Towards No Drug Abuse
LRP   Leadership and Resiliency Program

Figure 26. **School-Based Prevention Program Implementation Data – 2009-2010 School Year**

School	Program	Grade and Group	Pre-Test Completed	Lessons Implemented	Post-Test Completed
		School-Based Prevention Program Implementation Data (continued on following page)			
		2009 – 2010 School Year			
Andrew	LST – Core Program	6th Grade, Cohort A	Yes	20	Yes
	LST – Booster Program First Year	7th Grade, Cohort A	Yes	10	Yes
Bellevue	LST – Core Program	6th Grade, Cohort A	Yes	15	Yes
	LST – Booster Program First Year	7th Grade, Cohort A	Yes	10	Yes
		7th Grade, Cohort B	Yes	10	Yes
	TND	8th Grade, Cohort A	Yes	12	Yes
	LRP	9th-12th Grade, Cohort B	Yes	39 – Process Groups 6 – Adventure Activities 7– Community Service Activities	Yes
Maquoketa	LST – Core Program	6th Grade, Cohort A	Yes	16	Yes
		6th Grade, Cohort B	Yes	15	Yes
		6th Grade, Cohort C	Yes	15	Yes
		6th Grade, Cohort D	Yes	17	Yes
		6th Grade, Cohort E	Yes	15	Yes

School	Program	Grade and Group	Pre-Test Completed	Lessons Implemented	Post-Test Completed
		School-Based Prevention Program Implementation Data (continued from previous page)			
		2009 – 2010 School Year			
Maquoketa (continued)	LST – Booster Program First Year	7th Grade, Cohort A	Yes	10	Yes
		7th Grade, Cohort B	Yes	10	Yes
		7th Grade, Cohort C	Yes	10	Yes
		7th Grade, Cohort D	Yes	10	Yes
		7th Grade, Cohort E	Yes	10	Yes
		7th Grade, Cohort F	Yes	10	Yes
	TND	10th Grade, Cohort A	Yes	10	Yes
		10th Grade, Cohort B	Yes	10	Yes
		10th Grade, Cohort C	Yes	10	Yes
		10th Grade, Cohort D	Yes	10	Yes
	LRP	9th-12th Grade, Cohort A	Yes	36 – Process Groups 9– Adventure Activities 12– Community Service Activities	Yes
Preston	LST – Core Program	7th Grade, Cohort A	Yes	19	Yes
		7th Grade, Cohort B	Yes	17	Yes
		7th Grade, Cohort C	Yes	17	Yes
	TND	9th Grade, Cohort A	Yes	12	Yes

Figure 27. **School-Based Prevention Program Implementation Data – 2010-2011 School Year**

School-Based Prevention Program Implementation Data (continued on following page)					
2010 – 2011 School Year					
School	Program	Grade and Group	Pre-Test Completed	Lessons Implemented	Post-Test Completed
Andrew	LST – Core Program	6th Grade, Cohort A	Yes	15	Yes
	TND	9th Grade, Cohort A	Yes	12	Yes
Bellevue	LST – Core Program	6th Grade, Cohort A	Yes	15	Yes
	LST – Booster Program First Year	7th Grade, Cohort A	Yes	10	Yes
		7th Grade, Cohort B	Yes	10	Yes
	LST – Booster Program Second Year	8th Grade, Cohort A	Yes	9	Yes
		8th Grade, Cohort B	Yes	9	Yes
	TND	9th Grade, Cohort A	Yes	12	Yes
Maquoketa (continued)	LST – Core Program	6th Grade, Cohort A	Yes	16	Yes
		6th Grade, Cohort B	Yes	15	Yes
		6th Grade, Cohort C	Yes	15	Yes
	LST – Booster Program First Year (continued)	7th Grade, Cohort A	Yes	8	Yes
		7th Grade, Cohort B	Yes	8	Yes
		7th Grade, Cohort C	Yes	8	Yes
		7th Grade, Cohort D	Yes	8	Yes

School	Program	Grade and Group	Pre-Test Completed	Lessons Implemented	Post-Test Completed
Maquoketa	LST – Booster Program First Year	7th Grade, Cohort E	Yes	8	Yes
		7th Grade, Cohort F	Yes	8	Yes
	LST – Booster Program Second Year	8th Grade, Cohort A	Yes	5	Yes
		8th Grade, Cohort B	Yes	5	Yes
		8th Grade, Cohort B	Yes	5	Yes
	TND	10th Grade, Cohort A	Yes	12	Yes
	LRP	9th-12th Grade, Cohort A	Yes	31 – Process Groups 10– Adventure Activities 18– Community Service Activities	Yes
Preston	LST – Core Program	7th Grade, Cohort A	Yes	15	Yes
		7th Grade, Cohort B	Yes	15	Yes
	LST – Booster Program First Year	8th Grade, Cohort A	Yes	8	Yes
	LST – Booster Program Second Year	9th Grade, Cohort A	Yes	5	Yes
	TND	9th Grade, Cohort A	Yes	12	Yes

School-Based Prevention Program Implementation Data (continued from previous page)					
2010 – 2011 School Year					

Appendix 7

Survey Instrument

Jackson County GRAA Survey

Identification Number	___ ___ ___ ___ ___ ___ ___ ___
Survey Type	_____ Program Year 1 Pre-test _____ Program Year 1 Post-test _____ Program Year 2 Pre-test _____ Program Year 2 Post-test _____ Program Year 3 Pre-test _____ Program Year 3 Post-test
Month	_____ January _____ February _____ March _____ April _____ May _____ June _____ July _____ August _____ September _____ October _____ November _____ December
Day	___ ___
Year	_____ 2008 _____ 2009 _____ 2010 _____ 2011 _____ 2012
School District	_____ Maquoketa _____ Andrew _____ Bellevue _____ Preston
Prevention Program	_____ Life Skills Training _____ Project Toward No Drug Abuse _____ Leadership and Resiliency Program

Demographic Characteristics	
1. What is your current age?	_____ 10 or younger _____ 11 _____ 12 _____ 13 _____ 14 _____ 15 _____ 16 _____ 17 _____ 18 _____ 19 or older
2. What grade are you in?	_____ 6th _____ 7th _____ 8th _____ 9th _____ 10th _____ 11th _____ 12th
3. Are you a male or female?	_____ Male _____ Female
4. Which of the following best describes you?	_____ White _____ Arab American _____ Black/African American _____ American Indian/Alaskan Native _____ Asian American _____ Native Hawaiian/Other Pacific Islander _____ Hispanic/Latino _____ Other, including mixed ethnicity

30-day Use	
1. On how many occasions during the past 30 days (if any) have you had at least one drink of alcohol (glass, bottle or can of beer; glass of wine, liquor or mixed drink)?	_____ 0 occasions _____ 1 - 2 occasions _____ 3 - 5 occasions _____ 6 - 9 occasions _____ 10 - 19 occasions _____ 20 - 39 occasions _____ 40 or more occasions

2. On how many occasions during the past 30 days (if any) have you been drunk or very high from drinking alcohol?	_____ 0 occasions _____ 1 - 2 occasions _____ 3 - 5 occasions _____ 6 - 9 occasions _____ 10 - 19 occasions _____ 20 - 39 occasions _____ 40 or more occasions
3. How frequently have you smoked cigarettes during the past 30 days?	_____ Not at all _____ Less than one cigarette per day _____ One to five cigarettes per day _____ About one-half pack per day _____ About one pack per day _____ About one and one-half packs per day _____ Two packs or more per day
4. How frequently have you used smokeless tobacco during the past 30 days?	_____ Not at all _____ Once or twice _____ Once to twice per week _____ Three to five times per week _____ About once a day _____ More than once a day
5. On how many occasions during the past 30 days (if any) have you used marijuana (grass, pot) or hashish (hash, hash oil)?	_____ 0 occasions _____ 1 - 2 occasions _____ 3 - 5 occasions _____ 6 - 9 occasions _____ 10 - 19 occasions _____ 20 - 39 occasions _____ 40 or more occasions
Binge Drinking	
1. On how many occasions during the past 30 days (if any) have you had five or more drinks of alcohol (glasses, bottles or cans of beer; glasses of wine, liquor or mixed drinks) in a row, that is within a couple of hours?	_____ 0 occasions _____ 1 - 2 occasions _____ 3 - 5 occasions _____ 6 - 9 occasions _____ 10 - 19 occasions _____ 20 - 39 occasions _____ 40 or more occasions

Attitudes Toward Use

1.	Do you disapprove of someone your age drinking one or two drinks of alcohol (glasses, bottles or cans of beer; glasses of wine, liquor or mixed drinks) nearly every day?	_____ Strongly disapprove _____ Disapprove _____ Don't disapprove
2.	Do you disapprove of someone your age drinking five or more drinks of alcohol once or twice each weekend?	_____ Strongly disapprove _____ Disapprove _____ Don't disapprove
3.	Do you disapprove of someone your age smoking one or more packs of cigarettes per day?	_____ Strongly disapprove _____ Disapprove _____ Don't disapprove
4.	Do you disapprove of someone your age using smokeless tobacco regularly?	_____ Strongly disapprove _____ Disapprove _____ Don't disapprove
5.	Do you disapprove of someone your age smoking marijuana regularly?	_____ Strongly disapprove _____ Disapprove _____ Don't disapprove

Perceived Harm/Risk of Use

1.	How much do you think you risk harming yourself (physically or otherwise) if you drink three or more drinks of alcohol (glasses, bottles or cans of beer; glasses of wine, liquor or mixed drinks) nearly every day?	_____ Great risk _____ Moderate risk _____ Slight risk _____ No risk
2.	How much do you think you risk harming yourself (physically or otherwise) if you drink five or more drinks of alcohol once or twice each weekend?	_____ Great risk _____ Moderate risk _____ Slight risk _____ No risk
3.	How much do you think you risk harming yourself (physically or otherwise) if you smoke cigarettes every day?	_____ Great risk _____ Moderate risk _____ Slight risk _____ No risk

4. How much do you think you risk harming yourself (physically or otherwise) if you use smokeless tobacco every day?	_____ Great risk _____ Moderate risk _____ Slight risk _____ No risk
5. How much do you think you risk harming yourself (physically or otherwise) if you smoke marijuana once a week?	_____ Great risk _____ Moderate risk _____ Slight risk _____ No risk
School Bonding/Commitment	
1. Thinking back over the past year in school, how often did you enjoy being in school?	_____ Almost always _____ Often _____ Sometimes _____ Seldom _____ Never
2. Thinking back over the past year in school, how often did you try to do your best in school?	_____ Almost always _____ Often _____ Sometimes _____ Seldom _____ Never
3. During the LAST FOUR WEEKS, how many whole days have you missed because you skipped or cut?	_____ None _____ 1 _____ 2 _____ 3 _____ 4 to 5 _____ 6 to 10 _____ 11 or more
4. During the LAST FOUR WEEKS, how many whole days have you missed for other reasons?	_____ None _____ 1 _____ 2 _____ 3 _____ 4 to 5 _____ 6 to 10 _____ 11 or more
5. My teachers care about me.	_____ Strongly agree _____ Agree _____ Disagree _____ Strongly disagree