

Project ALERT and Juvenile Justice System

Unite to Fight Youth Meth Addiction

by Andrea Warren

Travelers along I-64 in southeastern Illinois see big sky, rolling hills, and picturesque farms. In the small towns that dot the landscape, people make a point of saying, "Hi, how are ya!"

But this corner of rural America has big city problems. Many of those small towns are frayed around the edges – evidence of the unemployment and poverty that has stalked this area in recent years because of downturns in an economy based

on coal mining and agriculture. According to George Timberlake, a community activist and a recently retired judge of the state's Second Circuit, "Communities that were solidly middle class are now impoverished. Seventy percent of the children in Mt. Vernon, our largest community, come from homes that meet federal poverty guidelines. That's an enormous number."

Noting that drug abuse is often a by-product of poverty and the hopelessness that can accompany

it, Timberlake said that over a decade ago, when he was on the bench first in traffic court and then in juvenile court, he noted increasing numbers of teens with alcohol and drug-related problems. In the last few years the drug of choice in southern Illinois has become methamphetamine, putting young people at greater risk than ever before. Nor is it the only threat.

Meth

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Hospital and School District Partner to Deliver Project ALERT

The Lake Washington School District in suburban Seattle is one of the country's most affluent – and understandably, for it is home to Microsoft. In this area of plenty, drugs can

be plentiful too, and school administrators recognize the need for Project ALERT. But while they may have fewer financial constraints than many districts, their teachers have the same work overload and time crunches created by required state and federal testing.

That's where Evergreen Healthcare comes in.



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"It's hard for people to believe because we're sparsely populated, but we've also had problems with crack cocaine and gangs," Timberlake said. "Next we're probably going to see an increase in heroin. It's already becoming a huge problem in counties north of us. In other parts of the country where meth has been a problem, heroin often follows. It's hard to imagine, but people out here in rural America are shooting up in cornfields.

"Clearly, we needed a way to address addiction in all its forms – a global approach, not one specific approach to one specific drug. Any drug use is part of a pattern of addiction that can be prevented if you get to kids early enough and give them the tools to stay off addictive substances. If we're going to save our young people, we have got to give them these tools."

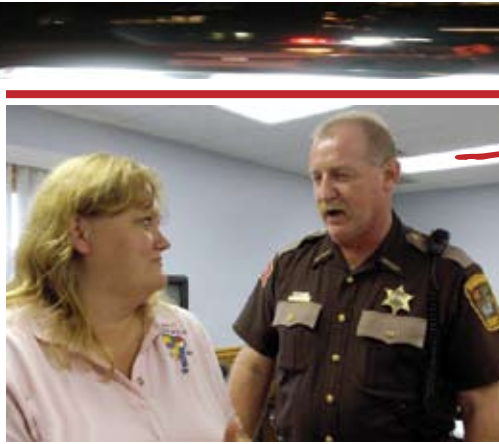
The Path to Project ALERT



Judge George Timberlake moderates a session of the Juvenile Justice Council

Timberlake's quest for a solution led him to the conclusion that traditional approaches – rehab and prison time – did not work, that prevention was the answer. And not just any prevention program, but those like Project ALERT that are evidence-based. "We had several schools in Jefferson County already using Project ALERT and they had

Quarterly Juvenile Justice Council meetings bring together 30-40 representatives from area service agencies.



Tammy Boose visits with Wabash County Sheriff Joe Keeling

"We had several schools in Jefferson County already using Project ALERT and they had statistics to show that this program was effective."

-George Timberlake
Retired Judge

statistics to show that this program was effective," he said. "As I learned more about Project ALERT, it became clear that it should be part of our approach."

The judge turned to others in the 12-county Second Circuit who shared his concerns – specifically to the Juvenile Justice Council, which he had previously organized, bringing together area law enforcement, churches, social services, and schools to combine services to help keep young people in trouble out of court and out of prison.

"We also wanted to figure out how to prevent the problems in kids' lives that get them into serious trouble in the first place," he said. "We work together closely and make lots of referrals to each other."

The Council collaborated with Cra-Wa-La, a social services agency that is part of the Juvenile Justice Council, to apply for a grant through the federal government's Substance Abuse and Mental Health Services Administration (SAMHSA). They received one of only ten grants SAMHSA awarded to communities using evidence-based programs to address growing meth abuse.

The grant, funded for three years at \$326,000 per year, resulted in the creation of the Methamphetamine Prevention Program of the Second Judicial Circuit of Illinois and is administered by Cra-Wa-La.



Cra-Wa-La received one of only ten grants SAMHSA awarded to communities using evidence-based programs.

Marie Goff, Cra-Wa-La's executive director, noted that educating the public about meth is an important part of this program. "We began looking at this problem in 2003 and realized from our drug assessments and from the sharp upswing in case loads that we had youth either doing meth or living in homes where meth was being manufactured. You can make it in your bathroom or even in a car and we have illegal meth labs all over the area," she said. "Children can get addicted just from the smoke."

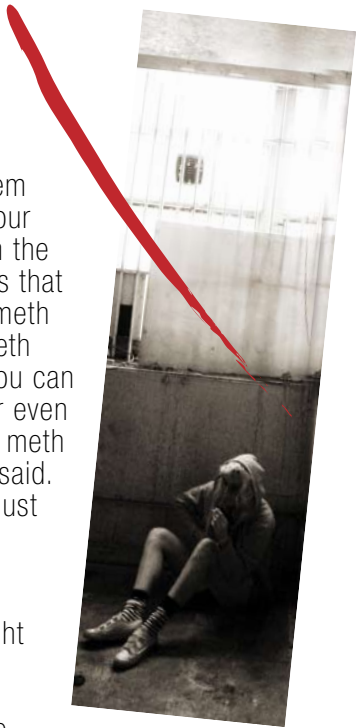
"Parents need to know the signs that their children might be using meth and that it is a killer that ultimately shuts down the body. We had one mother who noticed her daughter's dramatic weight loss but thought she must be on some kind of special diet. Ten percent of people who use alcohol become alcoholics, but 90 percent of meth users become addicted. It happens incredibly quickly."

"Once addicted, they need money to support their habit and that's usually why they start manufacturing and selling meth. Since this is a rural area, getting the anhydrous ammonia they need is not a problem. Still, we're encouraged by new laws that are making it harder to get other ingredients needed to manufacture meth."

Delivering Project ALERT to Schools

Goff is pleased that Project ALERT will help educate young people about the dangers of meth. Tammy Boose, director of the Meth project, is overseeing the implementation of Project ALERT, from recruiting schools to training the teachers. It is in several pilot schools during the 2007-2008 school year.

"Even though we're providing the funding, we're giving schools as much autonomy as possible so they will take ownership of the program," she said. "We're not telling them which class or grade to use it in, though it's typically implemented in either sixth and seventh



"Ten percent of people who use alcohol become alcoholics, but 90 percent of meth users become addicted."

-Marie Goff

Cra-Wa-La's Executive Director

grade, or seventh and eighth grade. We're offering to help get handouts ready and to do pre- and post-evaluations on the students. We'll also show them how to pull out the data specific to their students.

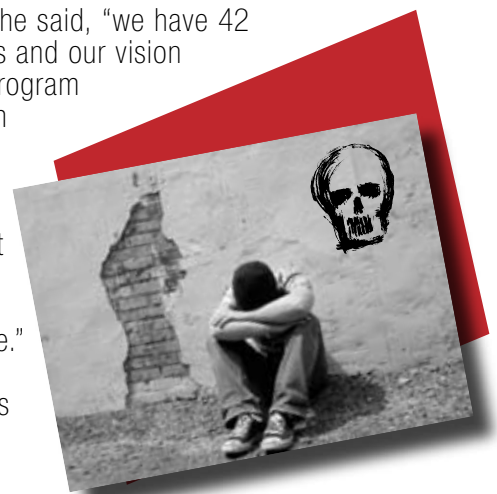
"We had a variety of teachers at our first training. What was exciting was that they wanted to be there. Everybody knows we have a problem with drugs far more dangerous than what we've faced in the past."

Schools that cannot spare teachers to present Project ALERT to their students are looking at other alternatives. Robyn Block, prevention specialist for Wayne County and state coordinator for SADD (Students Against Destructive Decisions), plans for high school SADD members to go into middle schools to teach Project ALERT, using the program's evidence-based Teen Leader component.

"Our county will pilot this and consider promoting it as a statewide SADD project," she said. "We already know that middle school students respond favorably to high school students presenting prevention education to them. Project ALERT has an impressive curriculum and students like and respond to the videos. Using high school students to teach it takes some of the pressure off teachers who already have too much to do."

Boose says her organization's goal is to have Project ALERT in 12 schools at the end of three years. "But," she said, "we have 42 middle schools and our vision is to get the program into all of them and have the schools responsible for it. We want to help all our youth grow up to be drug-free."

Timberlake has one additional goal. While Project ALERT will be offered in the youth corrections center in Harrisburg, IL, and by probation officers within the Second Circuit in weekly group settings, he also wants to see it offered in the juvenile prison system, where the worst offenders are.



"As many as 80 percent of these juvenile offenders are addicted or involved with drugs. Project ALERT may not really be strong enough for these repeat offenders – they probably need a program developed just for them – but it may help them think through the role of peer pressure in using drugs and I'm certain it will help the kids who are not involved with drugs stay away from them."

"Project ALERT is that good."

"Project ALERT has an impressive curriculum and students like and respond to the videos. Using high school students to teach it takes some of the pressure off teachers who already have too much to do."

-Robyn Block

Prevention Specialist
State Coordinator, SADD



Robyn Block is using high school students in SADD to teach Project ALERT

One Girl's Story

Meth leaves many victims in its wake, but the programs in place in Illinois' Second Circuit have given one of them a happy ending. Marie Goff remembers well the 14-year-old who came into the courts, hooked on meth and working as a prostitute to support her drug habit. She was arrested with adults running a mobile meth lab, and in many states would have gone to prison.

But because of the Second Circuit's community-based correction programs, which seek to divert youth from prison, she was assigned a court advocate and was sent through a detox program. She also participated in Cra-Wa-La's Multi-Systemic Therapy (MST), an evidence-based, blueprint treatment program that is used to attempt to interrupt the family cycle of meth use and prevent addiction of younger family members. She was then placed in a foster home.

According to Goff, "She became a role model for her mother, who was also an addict and has since cleaned up. Today she is 18, has her GED and a job here in our community. She now realizes the harm she did to others by manufacturing meth, and although she was victimized by adults, she has accepted that she is accountable for her own life.

"Instead of shipping these juvenile offenders off to adult prisons and locking them up, we're keeping them in their home communities and working with them to get them back on track," Goff said.

"We view their care and rehabilitation as our responsibility. This girl's story also illustrates the compassion shown by the Second Circuit and the determination of the people here to turn around children's lives. "

Making a Difference



Tammy Boose and Marie Goff of Cra-Wa-La are helping to get Project ALERT into the schools.

“Since its founding in 1971, Cra-Wa-La has provided mentors for youth entering the juvenile justice system,” says Marie Goff, executive director of Cra-Wa-La Volunteers in Probation. The name comes from the original three counties in the program – Crawford, Wabash and Lawrence. Today there are 15 counties represented. In addition to its mentoring program for teens and its meth prevention program with Project ALERT as one of its components, it has programs for children of incarcerated parents and offers a wide range of youth advocacy services.

Goff began volunteering with the program in the 1990's after working in the corporate world for 25 years. When the program received a grant from the State of Illinois in 1997, Goff agreed to come aboard as the executive director. She now has nine people on staff and a team of 180 volunteers. The organization also relies on public and private donations.

Tammy Boose, Cra-Wa-La's project director, completed an internship with the organization as an AmeriCorps VISTA volunteer after finishing her undergraduate degree at Eastern Illinois University. She has since received her master's degree in criminal justice from the University of Cincinnati and is also a busy wife and mother. A native of the area, and with three teenagers in the public schools, she is familiar with the impact drugs have had locally. “It's gotten to the point where some high school students think it's okay to use drugs as long as they aren't 'hard' drugs. We definitely have our challenges,” she said.

“This is a rewarding place to work. When you're involved with programs that help children at-risk, you're making a difference.”

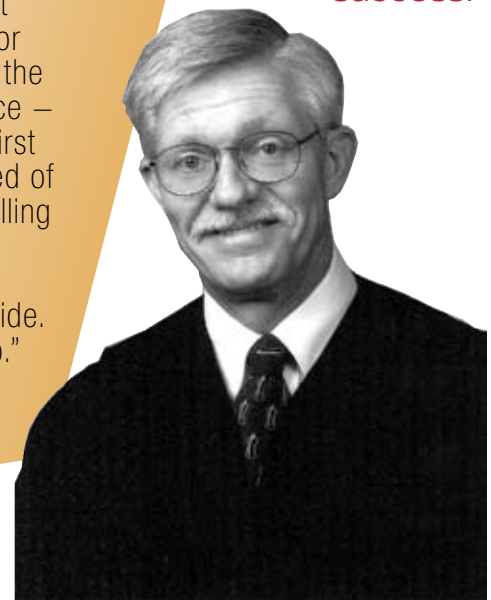
Judge George Timberlake

“Retired” is a relative term for George Timberlake. He left the bench in 2006 after 22 years with the Illinois Second Circuit and is now a full-time community volunteer and a consultant for the MacArthur Foundation. Illinois is one of four states selected by the Foundation for the development of a model system in juvenile justice – a goal Timberlake is passionate about. The state had the nation's first juvenile court system and juvenile prison system. “Illinois is a hotbed of reform around juveniles and the court system,” Timberlake said, calling himself a “juvenile justice reform advocate.”

Though he rarely has a moment to call his own, he takes this in stride. “I retired to be busy,” he says, “and I'm blessed to be able to be so.”

Timberlake's advice to other communities that might want to emulate the Illinois program is, “You must come together, collaborate, and honestly review your problems and possibilities. And you must select a program that is evidence-based so you can maximize your success.”

“You must select a program that is evidence-based so you can maximize your success.”



Evergreen



by Andrea Warren

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One of the largest public hospitals in the area, it has partnered with the school district to deliver Project ALERT to 400 sixth graders in six Title I schools. The program is taught by four part-time health educators and counselors through the hospital's health education division.

According to Lauren Bolen, Evergreen's Health Education Coordinator, "We're finding that students respond well to experts coming in to work with them. And when we're there, it gives busy teachers a bit of a breather, which they appreciate."

It also fits well with the hospital's outreach mission of promoting wellness. "We are interested in the health of our community's children," Bolen said. "By taking this program into the schools, we are fostering a partnership with teachers, administrators, and the community to keep our young people drug-free. We're recognizing that we all must work together on this."

Bob Conroy, a prevention and intervention consultant with the Seattle Public Schools and a chemical dependency counselor, handles contractual arrangements between the hospital and the school district. He began his association with Evergreen when he facilitated a sixth grade tobacco education program for them. "I had taught Project ALERT in a previous job, and when the hospital became interested in expanding its drug education outreach to adolescents, I thought it would be a good fit. I knew the fact that it is evidence-based

would help us get funding. But in addition, it's an excellent program."

Conroy assisted in securing tobacco settlement funds issued to the state of Washington. In the year 2000, the first Evergreen staff members received Project ALERT training and began delivering the program. Conroy agrees with Bolen that students like someone coming in from the outside to work with them. "Teachers also appreciate the expertise we can bring to this because many of them don't have a lot of background in drug education."

"I knew the fact that Project ALERT is evidence-based would help us get funding. But in addition, it's an excellent program."

-Bob Conroy
Prevention and Intervention
Consultant



"By taking this program into the schools, we are fostering a partnership with teachers, administrators, and the community to keep our young people drug-free."

-Lauren Bolen
Evergreen's Health Education
Coordinator



Drug Use in Suburbia

Conroy noted that in the Lake Washington district first incidence drug use by students occurs on average two years later than in urban Seattle. He said tobacco use is down "because we've done a lot of education around it," but marijuana and alcohol usage is "huge." According to Conroy, while methamphetamine is more



a problem in the city, prescription drugs are more prevalent in the suburbs.

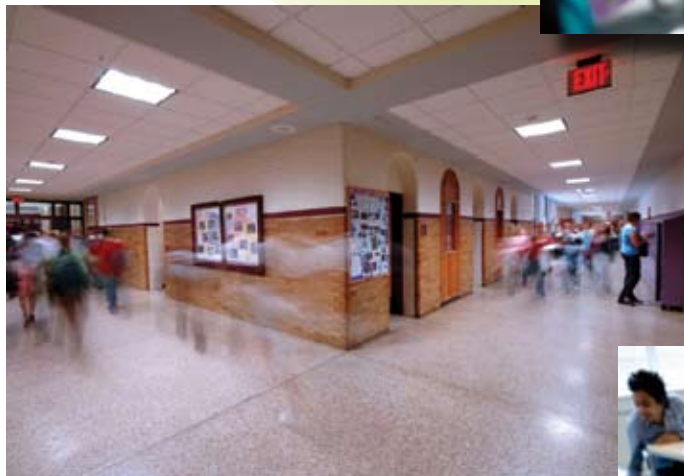
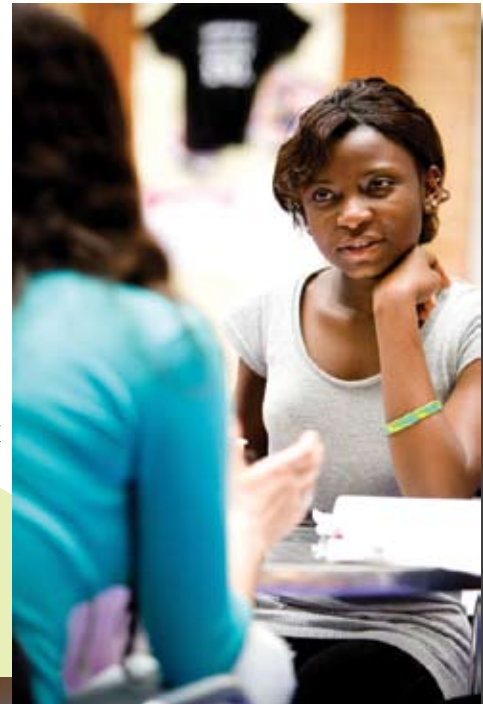
“We’ve also had issues around Ritalin, and we’ve learned of younger kids huffing, using everything from gasoline to whipping cream containers,” he said. “The summer after sixth grade is the starting point for many of them. The reality is that kids experiment. We must give them the education they need to keep them safe.”

Funding is always an issue, Conroy said. “We’ve had some cuts and we may be moving more toward the traditional model of teachers delivering Project ALERT. One way or another, we’ll continue to offer it. It’s been really valuable.”

According to Bolen, school personnel report that students not only enjoy the lessons, but “get” the message. “Instead of adults just telling them to not do something, they learn the skills they need to resist drugs. Because the class is interactive, it’s a lot of fun for them,” she said.

“During the last lesson they have a party and make posters on how they’ll stay drug-free. They always comment that the program has taught them the truth about drugs. They’ve had the opportunity to practice saying ‘no’ in a variety of ways. Many of them have no interest in using drugs, and through the course they’ve learned how to resist peer pressure.

“They aren’t just mouthing the words they think we want to hear. The great thing is how many of them tell us that they appreciate having this skill and intend to use it.”



School



“They aren’t just mouthing the words they think we want to hear. The great thing is how many of them tell us that they appreciate having this skill and intend to use it.”

Easy-to-Use Website Offers Objective Reviews of Evidence-Based Programs

by Andrea Warren



If you or a colleague are seeking information on evidence-based drug abuse education programs, you now have a powerful resource at your disposal. And it's compliments of the federal government.

A registry of these programs has long been available on the website for the National Registry of Evidence-Based Programs and Practices (NREPP) - a service of SAMHSA, the government's Substance Abuse and Mental Health Services Administration. But the registry had limitations. Programs were categorized as "Model," "Effective," or "Promising." There was no "search" feature, nor were there updates on programs.

But all that has changed. The revamped website offers informational overviews on programs - 40 so far, including Project ALERT. The list will grow as SAMHSA's NREPP contractor completes reviews of additional programs.

According to Bridget Ryan, President and CEO of Project ALERT, "This new database is a living registry. It includes more detail than before on programs' strengths and weaknesses and what problems they can address. Our program, for instance, is not effective with college binge drinking or with the treatment of significant addiction. We want potential users to know that."

Ryan especially appreciates that there will be periodic updates. "We're constantly updating Project ALERT, yet viewers at the site had no way of knowing this. Now they will.

"This new database is a living registry. It includes more detail than before on programs' strengths and weaknesses and what problems they can address."

*-Bridget Ryan
President and CEO
Project ALERT*

NREPP SAMHSA's National Registry of Evidence-based Programs and Practices

- About
- Find Interventions
- Review Process
- Submissions
- Resources
- Help
- Contact

Using the Website

Find Interventions



Search Tips:

- Users can search by using the check boxes, inserting keyword(s), or both.



A program of the U.S. Department of Health and Human Services Substance Abuse & Mental Health Services Administration

If you visit the website at www.nrepp.samhsa.gov you are greeted by a colorful, welcoming homepage that is easy to navigate and includes a wealth of information. You'll find background and facts, an explanation of the term "evidence-based," and the history of NREPP.

You'll also learn that the programs listed in the registry include:

- mental health promotion and treatment
- substance abuse prevention and treatment
- co-occurring disorders

SAMHSA states on the website that these listings are considered a starting point and does not "approve, recommend, or endorse specific interventions."

When you click on "Find Interventions," you can complete a checklist to help you find programs that may address your interests. You can select gender, race, age, setting (residential, school-based, etc). You can check off as many areas of interest as you wish, selecting from items such as suicide prevention, tobacco/smoking, or criminal/juvenile justice.

Once you do this, you will receive a list of potential programs. The descriptive information gives a thorough overview of each, and includes an abstract, adaptations, adverse effects, and implementation history. Each review includes summaries of the research and scientific evidence that form the program's base. And, each review provides ratings that measure, on a zero to four scale, both the quality of research behind the program's outcomes and the readiness of the program for broader dissemination.

This section also details strengths and weaknesses noted by SAMHSA reviewers in regard to outcomes and readiness for dissemination. Components evaluated by reviewers include reliability, validity, intervention fidelity, missing data and attrition, potential confounding variables, and appropriateness of analysis. Following this, you will find study demographics and a review of the studies and materials used in the program's research.

Although some of the terminology used in reviews is technical, explanations are clear and concise, and you will be able to follow it without difficulty.

Reliability

Validity

Fidelity

Creating the Registry

Over 200 evidence-based programs have been identified or are in some stage of review for NREPP, according to Kevin Hennessy, PhD, Science to Service Coordinator at SAMHSA. As the project officer responsible for the registry, he predicts that literally hundreds of reviews might eventually be in the registry. "We estimate that we will complete and post 50 to 60 a year for the foreseeable future," he said.

"Our goal is to provide descriptive and objective information and ratings about the research that's been conducted on each intervention."

*-Kevin Hennessy, PhD
Science to Service Coordinator
SAMHSA*

"Each program submitted to us for review is evidence-based in one way or another, but it still must meet our standards for being evidence-based. As we explain on the website, this includes such factors as findings that are established through scientific research. An example would be controlled clinical studies."

According to Hennessy, "Programs also must meet our standards for dissemination. We don't post completed reviews until they're approved by the program developers because this is a voluntary registry.

"Our goal is to provide descriptive and objective information and ratings about the research that's been conducted on each intervention. We then encourage users to be the final decision-makers. They need to consider their needs and use their own judgment to decide if a program is a good fit for them."

Intervention Summary: Project ALERT Ratings

Quality of Research Ratings by Criteria (0.0-4.0 scale)

Outcome	Reliability	Validity	Fidelity	Missing Data/Attrition	Confounding Variables	Data Analysis	Overall Rating
Outcome 1: Substance use (alcohol, tobacco, and marijuana)	4.0	4.0	4.0	4.0	4.0	4.0	4.0
Outcome 2: Attitudes and resistance skills related to alcohol, tobacco, and other drugs.	4.0	4.0	4.0	4.0	4.0	4.0	4.0

Readiness for Dissemination Ratings by Criteria (0.0-4.0 scale)

Readiness for Dissemination	Implementation Materials	Training and Support	Quality Assurance	Overall Rating
RFD Rating for Intervention	4.0	4.0	3.5	3.8

Project ALERT Receives Near Perfect Scores from NREPP

Offering information about Project ALERT is something staff at the BEST Foundation in downtown Los Angeles do all the time. They field calls every day from educators or social services agencies that have heard of the program and want to know more. Sometimes they hear from school officials wanting to start an evidence-based program but don't know what options they have.

Staff members visit with these callers and also refer them to Project ALERT's website:

www.projectalert.com

Now they can also send them to the NREPP's revamped registry where they can review an unbiased assessment of the program. Not only does the Project ALERT evaluation clearly spell out the program's features, but they'll see that it has received almost perfect scores.

"When we talk to people seeking information, we can tell them that if they adopt our program, they'll be using the best," commented Bridget Ryan. "But when they go to the registry and see with their own eyes that we received fantastic scores, then they know it for sure." www.nrepp.samhsa.gov

RAND Shares Pride in Results



"The high scores Project ALERT received from the registry affirm the quality and effectiveness of the program that the RAND Corporation created 25 years ago, grounded in research and analysis," said James A. Thomson, president and chief executive officer of RAND, a nonprofit research organization. "Project ALERT is an exemplary application of prevention science to the problem of drug abuse among adolescents. The BEST Foundation and the Hilton Foundation have been leaders in supporting research-based solutions to the challenge of helping young people stay drug-free."

Our newsletter writer, Andrea Warren, is a freelance journalist who lives in Kansas City. A former teacher, her award-winning nonfiction books for young readers include *Orphan Train Rider*, *One Boy's True Story*, *Surviving Hitler: A Boy in The Nazi Death Camps* and her latest book *Escape from Saigon: How a Vietnam War Orphan Became an American Boy*.



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The BEST Foundation for a Drug-Free Tomorrow is a nonprofit organization committed to providing schools and their community partners with the necessary information, materials and guidance to effectively implement Project ALERT, a skills-based substance abuse prevention curriculum for middle grade students.

The services of BEST Foundation are funded through multi-year grant commitments from the **Conrad N. Hilton Foundation.**

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