

# Manchester Wellness Coalition | Plan Year 4

<b>NAME OF THE INTERVENTION</b>	SRSLY
<b>CWF Element* to Impact</b>	Avoid Unhealthy Substances
<b>Fiscal Agent</b>	Manchester Community Schools
<b>Tax I.D</b>	
<b>Implementation Contacts (2 or more required)</b>	Lindsay Hannah and Karen Bergbower
<b>Contact phones and emails</b>	734-476-0686 / Lindsay@kbamichigan.com      810-225-9550 / Karen@kbamichigan.com
<b>Date Funding Required</b>	
<b>Implementation Date</b>	
<b>Estimated Completion Date</b>	
<b>Total Amount Requested from CWF</b>	\$24,130

<b>Criteria</b>	<b>Descriptions</b>
<p><b>1. Please provide a brief description for the intervention program you are proposing and indicate the target population.</b></p> <p><i>Typically one paragraph and 3-5 sentences</i>  <i>Target population options: youth, adult, seniors, disabled, etc.</i></p>	<p>The SRSLY Intervention has 3 distinct components meant to impact the community at large (youth and adults) and the individual with regard to reducing youth alcohol and substance use.</p> <p><b>Communities Mobilizing for Change on Alcohol (CMCA)</b> is a community organizing effort designed to change policies and practices of major community institutions in ways that reduce access to alcohol by teenagers, thereby reducing teen drinking and the associated health and social problems. The CMCA intervention is based on established theory and research showing the importance of the social and policy environment in facilitating or impeding youth drinking. The objective is to reduce the flow of alcohol to youth from illegal sales by retail establishments, and from provision of alcohol to youth by other adults in the community. Effectively limiting the accessibility of alcohol to teens not only directly reduces teen drinking, but also communicates a clear social norm in the community that underage drinking is inappropriate and unacceptable. Changing the social and policy environment in communities is essential for long-term prevention success.</p> <p>The coalition developed under the CMCA model previously identified as Manchester Voices; however we were approached by SRSLY Chelsea to split the remaining Drug Free Communities (DFC) Mentee Grant Funding with the Ann Arbor Campus Community Coalition (A2C3). The new mentor/mentee partnership with SRSLY Chelsea means that we will be able to adopt the SRSLY</p>

brand, help create a unified regional prevention message, increase our resources, and assistance with raising awareness of the coalition and member recruitment. The SRSly brand has been successfully adopted in Chelsea, Stockbridge, and Dexter. SRSly Chelsea will mentor SRSly Manchester and help us meet DFC Grant requirements so that we can apply in the year 2016. Obtaining funding from DFC Grant would mean an estimation of \$125,000 of In-Kind match funding per year for up to 5 years.

**Project SUCCESS** is designed to prevent and reduce substance use among students 12 to 18 years of age. The program was originally developed for students attending alternative high schools who are at high risk for substance use and abuse due to poor academic performance, truancy, discipline problems, negative attitudes toward school, and parental substance abuse. In recent years, Project SUCCESS has been used in regular middle and high schools for a broader range of high-risk students. Components

include:

1. Prevention Education Series: topic-based classroom presentations that help students identify and resist pressures to use substances, correct misperceptions about the prevalence and acceptability of substance use, and understand the consequences of substance use.
2. Parent Education and Awareness Activities: increase awareness of substance use and promote ideas for preventing and reducing adolescent substance use. This includes parents as collaborative partners in prevention through consultation, information, and education.

Individual and Group Support: assist students as needed in dealing with personal issues. Individual assessments are performed and time-limited individual counseling is offered to students. When necessary, students and families are referred to appropriate community resources, which is consistent with the movement toward a Recovery Oriented System of Care (ROSC). This offers an opportunity to collaborate with Dawn Farm, a ROSC core provider. Groups are offered throughout the school year and address such topics as Newcomers Group, COSAP (Children of Substance Abusing Parents), and Users Group. The groups help adolescents identify and resist social and situational pressures to use substances, correct misperceptions about the prevalence and acceptability of substance use, focus on the personal consequences of use, teach and provide opportunities to practice resistance and coping skills, and identify barriers to using the skills or adopting healthy attitudes.

**Project Towards No Tobacco Use (Project TNT)** is a classroom-based curriculum that aims to prevent and reduce tobacco use, primarily among 7th-grade students. The intervention was

	<p>developed for a universal audience and has served students with a wide variety of risk factors. Designed to counteract multiple causes of tobacco use simultaneously, Project TNT is based on the theory that youth will be better able to resist tobacco use if they are aware of misleading information that facilitates tobacco use (e.g., pro-tobacco advertising, inflated estimates of the prevalence of tobacco use), have skills that counteract the social pressures to obtain approval by using tobacco, and appreciate the physical consequences of tobacco use. Project TNT comprises of 10 core lessons and 2 booster lessons, all 40-50 minutes in duration. The curriculum uses a wide variety of activities to encourage student involvement and participation. Activities include games, videos, role-plays,</p>
<p><b>2. How does this intervention fit into the 1 and 5 year goals and plans of the Coalition?</b>  <i>Please be specific and refer to the current documents stating the Coalition's 1 and 5 year plans and goals. Should include specific health/wellness indicators.</i></p>	<p>The SRSLY intervention focuses on the first of four areas of the Manchester Wellness Plan, "Avoiding Unhealthy Substances". The SRSLY Intervention works to decrease youth alcohol and substance use, including tobacco and prescription medications. Since CMCA, Project SUCCESS, and Project TNT first began we have seen the following data points from the Michigan Profiles for Healthy Youth.</p> <ul style="list-style-type: none"> <li>• Age of first use of alcohol has increased from 13 years old (2010) to 14 years old (2014).</li> <li>• Regular use of alcohol has decreased from 29% (2010) of Manchester High School students having used in the past 30 days to 22% (2014).</li> <li>• Regular cigarette use has decreased from 16% (2010) of Manchester High School students having used in the past 30 days to 7% (2014).</li> <li>• Regular use of ANY TOBACCO PRODUCT has decreased from 27% (2010) of Manchester High School students having used in the past 30 days to 15% (2014).</li> <li>• Regular use of marijuana has decreased from 18% (2010) of Manchester High School students having used in the past 30 days to 11% (2014).</li> <li>• The percent of Manchester High School students who have ever tried marijuana has decreased from 29% (2010) to 20% (2014).</li> <li>• The percent of Manchester High School students who have ever drank alcohol has fluctuated from 37% (2010), to 32% (2012), and to 43% (2014).</li> </ul> <p>The Manchester MiPHY Data for prescription drug use was not statistically significant due to the small sample size. Additionally, many of the questions were new or changed from the previous year.</p>
<p><b>3. What are the specific goals for the intervention?</b>  <i>Specific goals: For each goal address these 5 points so that the goals are SMART goals</i></p>	<ul style="list-style-type: none"> <li>• Maintain or increase the age of first use of alcohol from 14 years old (MiPHY, 2014).</li> <li>• Maintain or decrease percentage of Manchester High School students that have used alcohol in the past 30 days from 22% (MiPHY, 2014).</li> <li>• Maintain or decrease percentage of Manchester High School students that have used cigarettes in the past 30 days from 7% (MiPHY, 2014).</li> </ul>

<ul style="list-style-type: none"> <li>• <i>State what you are trying to accomplish,</i></li> <li>• <i>How you will measure progress toward and accomplishment of your goal</i></li> <li>• <i>Who is responsible for collecting the data?</i></li> <li>• <i>Why you think the goal is attainable</i></li> <li>• <i>Describes how the goal is relevant to the coalition and community wellness related needs.</i></li> <li>• <i>What is the timeframe for achieving the goal?</i></li> <li>• <i>See <a href="http://www.wikihow.com/Set-SMART-Goals">http://www.wikihow.com/Set-SMART-Goals</a></i></li> </ul>	<ul style="list-style-type: none"> <li>• Maintain or decrease percentage of Manchester High School students that have used any tobacco products in the past 30 days from 15% (MiPHY, 2014).</li> <li>• Maintain or decrease percentage of Manchester High School students that have used marijuana in the past 30 days from 11% (MiPHY, 2014).</li> <li>• Maintain or decrease the percentage of Manchester High School students who have ever tried marijuana from 20% (MiPHY, 2014).</li> <li>• Maintain or decrease the percentage of Manchester High School students who have ever drank alcohol from 43% (MiPHY, 2014).</li> <li>• Maintain or decrease the percentage of Manchester High School students who report easy access to alcohol from 59% (MiPHY, 2014).</li> <li>• Maintain or increase the percentage of Manchester High School students who report regular ALCOHOL use to be a moderate to great risk from 65% (MiPHY, 2014).</li> <li>• Maintain or decrease of percentage of Manchester High School students that think half or more students in their grade drank ALCOHOL in the past 30 days from 23% (MiPHY, 2014).</li> <li>• Maintain or decrease the percentage of Manchester High School students who often or almost always hated being at school during the past year from 30% (MiPHY, 2014).</li> <li>• Maintain or decrease the percentage of Manchester Middle School students who often or almost always hated being at school during the past year from 37% (MiPHY, 2014).</li> </ul> <p>We will measure our progress by monitoring MiPHY data over time. We will specifically look at 2016 MiPHY Data, which is typically available in the fall.</p> <p>We believe the above goals are attainable because all three components (CMCA, Project SUCCESS, &amp; Project TNT) were chosen from SAHMSA’s National Registry of Evidence Based Programs and Practices. Each component was picked because they specifically target the above intervening variables and research says that if we implement the program as designed we will impact these variables.</p> <p>The goals above are relevant to the Manchester Wellness Coalition because they are specifically aimed at helping youth “Avoid Unhealthy Substances”.</p> <p>Out time frame to achieve these goals will be ongoing. These are long term goals, however we aim to see movement in 2016.</p>
<p><b>4. What are the key data that will be collected, analyzed, and used to evaluate</b></p>	<p>It is difficult to draw a direct connection between the environmental strategies used and a positive change in the identified outcomes in the SRSly Intervention. However the SRSly Intervention plans to continue to monitor the</p>

<p><b>the intervention?</b></p> <p><i>Should include:</i></p> <ul style="list-style-type: none"> <li>• <i>Units of Engagement</i></li> </ul> <p><i>Might also include survey data, and other measures such as pounds of produce grown, miles of trail maintained, number of books distributed, etc.</i></p>	<p>data that is released from the HIP survey, local MiPHY data and collects anecdotal information from students and community members.</p> <p>A list of that surveys and anecdotal information they will collect and monitor are as follows.</p> <p>As a result we have collected data on numbers of individuals met with, meetings held, active and supportive members, students involved and activities conducted. CMCA identifies 12 benchmarks that have been used for evaluation in the past</p> <p>Project SUCCESS counselors track how many referrals they receive, students met with and additional resources given. They conduct 30 day follow-up with students that were referred to an additional resource to gauge whether they felt that resource was helpful. In addition, all students that participate in Project SUCCESS support groups complete a post survey that shows numbers reporting improvement in 2 of the following 5 areas: relationships, peer refusal skills, handling feelings, solving problems, attitude toward school, awareness of ATOD risk and past 30 day use.</p> <p><b>Surveys/Data Collection Forms</b></p> <ul style="list-style-type: none"> <li>• HIP Survey</li> <li>• MiPHY Survey</li> <li>• MOST Teens Don't Use Survey (Developed by Karen Bergbower &amp; Associates, will be adapted from Livingston County Middle and High School Student Survey 2015)</li> <li>• Underage Drinking Survey (Developed by Karen Bergbower &amp; Associates)</li> <li>• Project SUCCESS Data collection forms (# of students referred, # of students met with, # of students referred/participated in groups, # of participating in individual ongoing counseling)</li> <li>• Post-Group Survey (Developed by Karen Bergbower &amp; Associates)</li> <li>• University of Southern California Project Towards No Tobacco Use Pre-Test, Post-Test, 1-Year Post-Test</li> </ul> <p><b>Activities/ Events/Campaigns</b></p> <ul style="list-style-type: none"> <li>• Parents Who Host Lose the Most, Don't Be a Party to Teenage Drinking             <ul style="list-style-type: none"> <li>○ Kick-Off Event</li> <li>○ Press Announcement: Social Media &amp; Local News</li> </ul> </li> <li>• MOST Teens Don't Use...             <ul style="list-style-type: none"> <li>○ Press Announcement: Social Media &amp; Local News</li> <li>○ 3 Sets of Posters Dispersed 4 weeks apart</li> </ul> </li> </ul>
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	<ul style="list-style-type: none"> <li>• Red Ribbon Week             <ul style="list-style-type: none"> <li>○ Press Announcement: Social Media &amp; Local News</li> <li>○ Middle School Activity</li> <li>○ High School Activity</li> <li>○ Community Activity</li> </ul> </li> <li>• Project Sticker Shock             <ul style="list-style-type: none"> <li>○ 3 Alcohol Retail outlets will participate in Sticker Shock twice each fiscal year.</li> <li>○ Press Announcement: Social Media &amp; Local News</li> </ul> </li> <li>• Educational Booths</li> <li>• Participation in local events such as the Street Festival and Math &amp; Science Night</li> <li>• SRSLY Manchester Kick-Off</li> <li>• SRSLY Manchester Thank You Picnic</li> <li>• SRSLY Manchester Coalition Meetings</li> <li>• SRSLY Manchester Youth Member Meetings</li> <li>• SLS-SRSLY Member Meetings</li> <li>• Halloween Event</li> <li>• Coming Home Dance</li> <li>• Pharmacy will commit to distributing information about the Big Red Barrel</li> <li>• School-wide activities (Martin Luther King Jr Day, Mix It Up Lunch, The Great Kindness Challenge)</li> <li>• Parent Teacher Student Association / Parent Teacher Association Presentations</li> <li>• Variety Show Practices &amp; Performances</li> <li>• Project TNT Classroom lessons</li> <li>• Project SUCCESS Groups</li> <li>• Project SUCCESS Individual Brief Assessment Meetings</li> <li>• Project SUCCESS Individual On-Going Meetings</li> <li>• SRSLY Coalition Training</li> <li>• SRSLY Newsletter</li> <li>• SRSLY YouTube Videos</li> </ul>
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<b>5. What are the estimated of the Units of Engagement for the intervention?</b> <i>Unit of engagement = number of people per event * number of events * timeframe for the event (e.g., 30 minutes would be 0.5 hours)</i>		# of events	Estimated Time	Estimated Attendance	Engagement Units	Estimated Community Reach
	___ sets of Most Teens Don't Use Campaign Posters	3	N/A	N/A	N/A	2000
	Poster will be disseminated and posted in the Middle & High School, local businesses, religious institutions, and public buildings. Digital copies of the posters and information regarding the campaign will be given to local news outlets and social media.					

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<p><i>Example : 100 people * 6 events * 1 hour per event = 600 units of engagement.</i></p> <p><i>Note- if participation is not part of the key data, describe how you will measure engagement of community members.</i></p>	___ Thank You Picnic Event	1	2.00	25	50	N/A	
	___ alcohol retail establishments in Manchester will participate in Project Sticker Shock (two times each)	6	N/A	N/A	N/A	1000	
	Stickers will be placed on multi-packs of alcohol at 3 different alcohol retail outlets. The purpose of these stickers is to remind adults of the consequences of purchase alcohol for underage youth.						
	___ educational booths Events	5	2.00	20	200	20	
	___ Halloween Event	1	4.00	20	80	150	
	___ Coming Home Dance	1	.1	100	10	N/A	
	___ Math & Science Booth Event	1	3.00	75	225	150	
	___ Parents Who Host Lose the Most Kick-Off Event	1	2.00	30	60	N/A	
	___ Pharmacy will commit to providing patients/customers with information about the Big Red Barrel.	1	0.50	2	1	1000	
	___ PTA / PTSA Presentations	2	0.25	10	5	10	
	___ Red Ribbon Week Activities targeted at the High School & Middle School	2	0.50	200	60	400	
	___ Red Ribbon Week Activity targeted at the community	1	1.00	N/A	N/A	2000	
	SRSly members will go into the community and disseminate information about Red Ribbon Week at local businesses, churches, and/or events. This may include decorating the downtown, giving out red ribbons, decorating cars with red ribbons and leaving information slips on windshields.						
	___ School wide Middle School Events ( <i>The Great Kindness Challenge, Mix It Up Day, Martin Luther King Jr Day</i> )	7	1.00	N/A	N/A	380	
	These events tend to evolve from year to year based on feedback from school staff. Activities are often delivered on large scale, such as at an assembly or during lunchtime in the lunchroom.						
	___ SLS - SRSly Kick Off Pizza Lunch	1	1.00	15	15	15	
	___ SRSly Manchester Kick Off Event	1	4.00	100	400	500	
	___ SRSly Manchester Youth Kick Off Pizza Lunch	1	1.00	100	100	380	
	___ Sticker Shock Events	4	1.50	7	42	N/A	
	___ Street Festival Booth Events	1	8.00	40	320	N/A	
___ Variety Show Practice Events	4	3.00	30	360			
___ Variety Show Performance Events	2	1.50	N/A	N/A	380		
TNT Lessons delivered to 2 Quarters of 7 <sup>th</sup> grade Health classes with a total of ___ lessons taught	16	0.85	30	408	30		

Vendor education will occur at ___ alcohol retail establishments	3	0.25	3	2.25	3
___ Coalition Training	1	8.00	10	80	10
___ Adult & Youth Coalition Meetings	5	1.00	5	25	5
___ SRSLY Youth Meetings	21	1.00	15	315	15
___ SLS SRSLY Meetings	21	1.00	15	315	15
___ YouTube Videos (Example: <i>Project Sticker Shock, Parents Who Host Lose the Most, Red Ribbon Week, Most Teens Don't Use</i> )	5	N/A	N/A	N/A	30
Videos are created and disseminated on social media.					
___ SRSLY Newsletters	10	N/A	N/A	N/A	50
Newsletters are sent via email, posted to the website, and social media outlets.					
___ Students Met with Project SUCCESS Counselor	65	0.25	1	16.25	N/A
___ Students Participating in Individual On-Going	20	0.40	3	24	N/A
___ Students participating in Group	40	0.85	8	272	N/A

<p><b>6. Who (specifically) will be responsible for what aspects of intervention implementation?</b></p> <p><i>Please provide names for those responsible for:</i></p> <ul style="list-style-type: none"> <li>• <i>Obtaining all required permits and permissions and all other communication required</i></li> <li>• <i>Deciding on dates, times, locations</i></li> <li>• <i>Marketing – both developing and distributing marketing materials</i></li> <li>• <i>Recruiting necessary volunteers</i></li> <li>• <i>Developing tools to collect data and pictures</i></li> <li>• <i>Analyzing data collected</i></li> <li>• <i>Developing plans for how to improve the intervention (on-going and for subsequent years)</i></li> <li>• <i>Preparing and presenting presentations and reports</i></li> </ul>	<p>Lindsay Hannah, LLMSW will be the initial contact for the SRSLY Intervention. Ms. Hannah will be responsible for obtaining all required permits/permission.</p> <p>Ms. Hannah will work with SRSLY Coalition Members and Manchester Community Schools District administration to decide on dates/times/locations of meetings, events, activities, and lessons.</p> <p>Ms. Hannah will work with Todd Ortbring and the SRSLY Chelsea Community Organizer on issues related to the development of Marketing Materials. Ms. Hannah will work with Wendy Arntson, SRSLY Manchester Coalition members, and SLS-SRSLY to distribute marketing materials into the community.</p> <p>Ms. Hannah and coalition members will work together to recruit new members and volunteers for events/activities.</p> <p>MS. Hannah will work with Karen Bergbower, LMSW, CAADC, CPC-M, to develop tools to collect data. Ms. Hannah and SRSLY Manchester Coalition members will capture events/activities/campaigns on digital image and video to be distributed on social media, our website, and local news outlets.</p> <p>Ms. Hannah &amp; Karen Bergbower will review and analyze data. Ms. Hannah, Karen Bergbower, Manchester Community Schools District, and SRSLY Manchester Coalition Members will review and develop plans for improvement. SRSLY Chelsea will offer some assistance to Ms. Hannah during the planning process to ensure</p>
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<ul style="list-style-type: none"> <li><i>All other specific tasks for this intervention to be successful.</i></li> </ul>	<p>requirements for the DFC grant are fulfilled.</p> <p>Ms. Hannah will prepare and deliver presentations and reports.</p> <p>Ms. Hannah will facilitate all Project TNT classes. Ms. Hannah will facilitate Project SUCCESS groups, individual meetings, referrals, and parent meetings.</p>
<p><b>7. Does implementation of this intervention require approval from an organization other than the fiscal agent or organization implementing the intervention?</b></p> <p><i>Yes or No. If yes, please indicate all organizations requiring approval and indicate if approval has already been granted. If it hasn't been granted, when will this be done. Include the name(s) of the approver(s).</i></p>	<p>No.</p>
<p><b>8. With whom will you collaborate on this intervention including assistance with implementing the program, assistance with financing the program and organizations which might financially support this intervention (long term sustainability).</b></p> <p><i>Please include names of people in the collaborating organization that will be involved with this intervention. Indicate in the budget below – the contribution from the organization(s).</i></p>	<p>The SRSLY Manchester Intervention collaborates will many different sectors of the community.</p> <ul style="list-style-type: none"> <li>Manchester Community Schools District - The <b>Project SUCCESS Counselor</b> will work with school administration to decide the location of the Project SUCCESS Counselor office and the best way to obtain referrals, and the best way to increase awareness of the role of the Project SUCCESS Counselor. Additionally the Project SUCCESS Counselor will work with school staff to identify referrals. The Project SUCCESS Counselor will work with the Health Teacher to identify the time and location of the class that Project TNT will be taught. The SRSLY Community Organizer will work the school administration and the SLS advisor to decide on activities and locations/time of meetings for SRSLY Youth Meetings and SLS SRLY. The SRSLY Intervention will also be utilizing Manchester Community Schools District as the Fiduciary of this grant.</li> <li>SRSLY Chelsea – SRSLY Manchester will be mentored by SRSLY Chelsea and utilize their expertise as we prepare to apply for the Drug Free Communities Grant.</li> <li>Drug Free Communities Mentee Grant - The SRSLY Intervention also receives grant funding from this organization.</li> <li>Community Mental Health Partnership of Southeast Michigan - The SRSLY Intervention also receives grant funding from this organization.</li> <li>SRLSY Manchester Coalition Members - The SRSLY Intervention will access SRSLY Coalition members for help implementing the CMCA component of the grant</li> </ul>

	<ul style="list-style-type: none"> <li>• Chelsea Community Hospital – The Chelsea Community Hospital will be utilized as the fiduciary of the DFC grant funding.</li> <li>• Karen Bergbower &amp; Associates – Karen Bergbower will be utilized as the supervisor of the Lindsay Hannah, LLMSW.</li> <li>• Manchester Wellness Coalition - The SRSLY Intervention will access the Manchester Wellness Coalition members for help implementing the CMCA component of the grant</li> </ul>
<p><b>9. If this is a continuing intervention:</b></p> <p>A. How many years has this intervention been funded by the coalition?</p> <p>B. Have the outcome(s) been presented to the coalition and the report(s) been submitted to CWF?</p> <p><i>If no, when will the presentation to the coalition be done and when will the written report and expense report be submitted to CWF?</i></p> <p>C. Describe how the intervention will be improved (also include past improvements if this is the 3 or more year of funding).</p> <p>D. Has the amount requested from the coalition increased or decreased? Why?</p> <p>E. How many more years will this intervention request funds from the coalition?</p>	<p>A) CMCA , Project SUCCESS, and Project TNT are completing their second year of funding by CWF.</p> <p>B) Yes.</p> <p>C) SRSLY Manchester is always assessing and improving the programs based on the specific needs of the participants and the community. The CMCA component will be improved by partnering with SRSLY in Chelsea. Additionally, Manchester Voices will adopt the SRSLY brand which will lead to increased brand recognition and a more unified message of prevention across Washtenaw County. This will lead to increased access to resources and coalition trainings. The Project SUCCESS Counselor will work to increase visibility in the school, build rapport with teachers and school staff. Project TNT review current Pre, Post, 1-year-out Post survey and work to identify areas of the survey that can be cut, thus shortening the survey to a more manageable amount of data and potentially increase the student completion rate. Additionally, to increase completion rate of the 1-year-out post survey the facilitator will offer an incentive (gift certificate raffle) to former students.</p> <p>D) The amount of funding has been increased by \$100. The purpose of the increase is to try to recruit former Project TNT students to complete the 1-year-out post survey by offering an incentive in the form of a raffle for a gift certificate.</p> <p>E) The SRSLY Intervention is a long term intervention. Substance abuse prevention requires continuous efforts to decrease youth alcohol and substance use. Overtime the intervention will evolve to fit the need of the community.</p>
<p><b>10. Provide citation(s) of similar programs used as a model in developing this intervention.</b></p>	<p>All programs are Model Programs from SAMHAS’s National Registry of Evidence Based Programs and Practices.</p> <p><b>CMCA:</b> There are many evidenced based interventions for community organizing around youth drug and alcohol use. The Community Anti-Drug Coalitions of America and the Substance Abuse and Mental Health Services Administration have comprehensive lists of effective interventions, strategies and coalitions. (<a href="http://www.cadca.org">www.cadca.org</a> &amp; <a href="http://www.samsha.gov">www.samsha.gov</a>). Locally there are community anti-drug and alcohol coalitions that utilize CMCA, Communities That Care (CTC) as well as Ready by 21. Those groups include A2C3, PACT Saline, SRSLY Chelsea and CTC Ypsilanti.</p> <p><u>Program Replication Citations:</u>  Wagenaar, A. C., Gehan, J. P., Jones-Webb, R., Toomey, T. L., Forster, J. L., Wolfson, M., et al. (1999). Communities Mobilizing</p>

for Change on Alcohol: Lessons and results from a 15-community randomized trial. *Journal of Community Psychology*, 27(3), 315-326.

Wagenaar, A. C., Murray, D. M., Gehan, J. P., Wolfson, M., Forster, J. L., Toomey, T. L., et al. (2000). Communities Mobilizing for Change on Alcohol: Outcomes from a randomized community trial. *Journal of Studies on Alcohol*, 61, 85-94.

Wagenaar, A. C., Murray, D. M., & Toomey, T. L. (2000). Communities Mobilizing for Change on Alcohol (CMCA): Effects of a randomized trial on arrests and traffic crashes. *Addiction*, 95(2), 209-217.

Wagenaar, A. C., Murray, D. M., Wolfson, M., Forster, J. L., & Finnegan, J. R. (1994). Communities Mobilizing for Change on Alcohol: Design of a randomized trial. *Journal of Community Psychology*, 22(CSAP Special Issue), 79-101.

**Project SUCCESS:** There are no comparative programs; however the following citations are of research studies on replications of the program.

Program Replication Citations:

Morehouse, E. R., & Tobler, N. S. (2000). Project SUCCESS final report: Grant number 4 HD1 SP07240. Report submitted January 26, 2000, to the Center for Substance Abuse Prevention, U.S. Department of Health and Human Services.

Vaughan, R., & Johnson, P. (2007). The effectiveness of Project SUCCESS (Schools Using Coordinated Community Efforts to Strengthen Students) in a regular secondary school setting. Unpublished manuscript.

**Project TNT:** Towards No Tobacco (TNT) is a nationally recognized evidenced-based tobacco prevention program. Project TNT has reached approximately 50,000 students involved in experimental trials and other implementations. The developer has conducted at least 88 evaluations of independent Project TNT implementations and estimates that approximately 20 additional evaluations have been conducted. The longest continuous implementation of Project TNT is at least 4 years. There appear to be other programs that appear on The National Registry of Evidence-based Programs and Practices (NREPP), however they are listed as focusing on more than just tobacco including the program “Stay on Track” and were not listed as cost-effective.

Program Replication Citations:

Dent, C. W., Sussman, S., Stacy, A. W., Craig, S., Burton, D., & Flay, B. R. (1995). Two-year behavior outcomes of Project Towards No Tobacco Use. *Journal of Clinical and Consulting Psychology*, 63(4), 676-677.

Sussman, S., Dent, C. W., Burton, D., Stacy, A. W., & Flay, B. R. (1994). Developing school-based tobacco use prevention and cessation programs. Thousand Oaks, CA: Sage.

Sussman, S., Dent, C. W., Stacy, A. W., Hodgson, C. S., Burton, D., & Flay, B. R. (1993). Project Towards No Tobacco Use: Implementation, process and post-test knowledge evaluation. *Health Education Research*, 8(1), 109-123.

Sussman, S., Dent, C. W., Stacy, A. W., Sun, P., Craig, S., Simon, T. R., et al. (1993). Project Towards No Tobacco Use: 1-year behavior outcomes. *American Journal of Public Health*, 83(9), 1245-1250.

Wang, L. Y., Crossett, L. S., Lowry, R., Sussman, S., & Dent, C. W. (2001). Cost-effectiveness of a school-based tobacco-use prevention program. *Archives of Pediatrics and Adolescent Medicine*, 155(9), 1043-1050.

Meshack, A. F., Hu, S., Pallonen, U. E., McAlister, A. L., Gottlieb, N., & Huang, P. (2004). Texas Tobacco Prevention Pilot Initiative:

Processes and effects. Health Education Research, 19(6), 657-668.

~ INSERT A BUDGET which shows all sources of income and categories for expenses. Please also indicate which expenses will be covered by the funds from the Chelsea-area Wellness Foundation.

Also provide the information in the two tables below

Budget Summary	Amount	Percentage
Amount of funds from Coalition	\$ 24,130	20%
Total funds from other sources	\$ 96,707	80%
Marketing/Advertising	\$ 14,200	12%
Compensation – to one or more people	\$ 57,130	47%
Infrastructure (structure that lasts 5 years or more)	\$ 0	0%
Other expenses	\$ 49,507	41%

Plan Year	Amount \$\$ granted	Amount Spent	Amount carried over	Amount returned to CWF
<b>Year 1 2012-2013</b>	<b>\$ 4,311</b>	<b>\$ 3174.29</b>	<b>\$ 1136.71</b>	<b>\$ 0</b>
TNT	\$ 4,311	\$ 3174.29	\$ 1136.71	\$ 0
Project SUCCESS	\$ 0	\$ 0	\$ 0	\$ 0
CMCA	\$ 0	\$ 0	\$ 0	\$ 0
<b>Year2 2013-2014</b>	<b>\$ 19,000</b>	<b>\$ 20,136.71</b>	<b>\$ 0</b>	<b>\$ 0</b>
TNT	\$ 0	\$ 1136.71	\$ 0	\$ 0
Project SUCCESS	\$ 5,000	\$ 5,000	\$ 0	\$ 0
CMCA	\$ 18,500	\$ 18,500	\$ 0	\$ 0
<b>Year 3 2014-2015</b>	<b>\$ 24,030</b>	<b>N/A</b>	<b>N/A</b>	<b>N/A</b>
TNT	\$ 530			
Project SUCCESS	\$ 5,000			
CMCA	18,500			