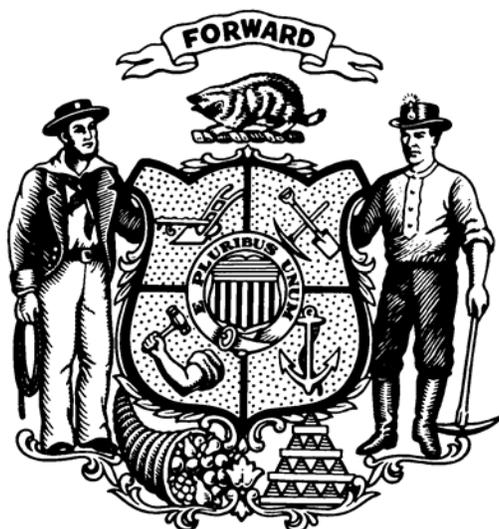


WISCONSIN STATE COUNCIL ON ALCOHOL AND OTHER DRUG ABUSE



December 5, 2008
MEETING

Mark Seidl
Chairperson

JIM DOYLE
Governor

STATE COUNCIL ON ALCOHOL AND OTHER DRUG ABUSE

MISSION STATEMENT

To enhance the quality of life of Wisconsin citizens by preventing alcohol and other drug abuse and its consequences through prevention, treatment, recovery, and enforcement and control activities.

SCAODA FOUR-YEAR STRATEGIC PLAN GOALS 2006 – 2010

Adopted by SCAODA June 2, 2006

GOAL 1:

Support, promote and encourage the implementation of a system of substance abuse services that are evidence-based, gender and culturally competent, population specific, and ensure equal and barrier-free access.

GOAL 2:

Support the prevention and reduction of alcohol, tobacco, and other drug use and abuse through evidence-based practice with special emphasis on underage use.

GOAL 3:

Support and encourage recovery in communities by reducing stigma, discrimination, barriers and promoting healthy lifestyles.

SCAODA 2008 and 2009 Meeting Dates

**American Family Insurance Conference Center
6000 American Parkway Madison, WI 53783
Room A3151**

~~**March 7, 2008** ————— **9:30am to 12:30pm**~~

~~**June 6, 2008** ————— **9:30am to 3:30pm**~~

~~**September 12, 2008** ————— **9:30am to 12:30pm**~~

December 5, 2008 **9:30am to 12:30pm**

March 6, 2009 **9:30am to 12:30pm (Room A2152)**

June 5, 2009 **9:30am to 3:30pm (Room A3151)**

September 11, 2009 **9:30am to 12:30pm (Room A3151)**

December 4, 2009 **9:30am to 12:30pm (Room A3151)**



Jim Doyle
Governor

Mark Seidl, WCHSA
Chairperson

State of Wisconsin

State Council on Alcohol and Other Drug Abuse

1 West Wilson Street, P.O. Box 7851
Madison, Wisconsin 53707-7851

Linda Mayfield
Vice-Chairperson

Scott Stokes
Secretary

December 5, 2008

MEETING AGENDA

9:30 a.m. – 12:30 p.m.

American Family Insurance Conference Center
6000 American Parkway Madison, WI 53783 Room A3151
American Family contact: Stephanie M. Byrd
(608) 242-4100 ext. 30230

- 9:30 a.m. I. Introductions / Welcome / Agenda – Vice-Chair Linda Mayfield
- 9:35 a.m. II. Review /Approval of September 12, 2008 Minutes – Vice-Chair Linda Mayfield
- 9:45 a.m. III. Preliminary Information on the AWARE Initiative—Lisa Maroney
- 9:55 a. m IV. Update on Council Membership—Appointment of Duncan Shrout and Senator Roessler’s Replacement—
- Joyce O’Donnell (regarding Duncan Shrout)
 - Welcoming Recognition—Linda Mayfield
 - Senator Roessler’s replacement –Joyce Allen
- 10:05 a.m. V. Public Input – Vice-Chair Linda Mayfield
- 10:20 a.m. VI. Committee Reports:
- Prevention – Scott Stokes
 - Diversity – Michael Waupoose
 - Intervention and Treatment – Linda Preysz
 - Planning and Funding—Joyce O’Donnell
- 10:50 a.m. VII. Motions Update Document—Joyce Allen
- 11:00 a.m. VIII. Adolescent Brain Development—Flo Hilliard
- Introduction Susan Endres
- 11:30 a.m. IX. Parents and Youth in Recovery—Susan Endres
- Introduction Susan Endres
- 12:00 p.m. X. Public Forums—Sue Gadacz and Lori Ludwig
- Chairing, Staffing, Introductions, Sign Ins (Sue Gadacz)

- Report from Bureau Conference (Lori Ludwig)
- Report from Tribal Conference—Michael Waupoose

- 12:10 XI. Report from Membership Workgroup—Joyce O’Donnell
- 12:20 a.m. XII. Agenda Items for March 6, 2009 Meeting—Linda Mayfield
- Report on treatment available for 5th OWI—Renee Chyba
 - Report on IDP—Mark Seidl
 - Secretary Timberlake—Department Updates
 - 17-Year-Olds in the Adult Justice System—Manny Scarbrough
 - Dave MacMaster—WiNTiP program
- 12:25 a.m. XIV. Announcements—Sue Gadacz
- 2009 Meeting Dates
 - Different Room for March 6th meeting—A2152
 - Committees Annual Reports due in June
- 12:30 p.m. XV. Adjourn—Linda Mayfield



Jim Doyle
Governor

Sen. Carol Roessler
Chairperson

State of Wisconsin

State Council on Alcohol and Other Drug Abuse

1 West Wilson Street, P.O. Box 7851
Madison, Wisconsin 53707-7851

Linda Mayfield
Vice-Chairperson

Mark Seidl, WCHSA
Secretary

STATE COUNCIL ON ALCOHOL AND OTHER DRUG ABUSE

MEETING MINUTES

September 12, 2008

9:30 a.m. – 12:30 p.m.

**American Family Insurance Conference Center
6000 American Parkway Madison, WI 53783
Room A3151**

Members Present: Mark Seidl, Joyce O'Donnell, John Easterday, Coral Butson, Representative John Townsend, Renee Chyba, Eileen Mallow, Gary Sumnicht, Mary Rasmussen, Sandy Hardie, Janet Nordorft, Blinda Beason, Greg Phillips, Scott Stokes, Pamela Phillips, Stuart Ewy (for Senator Carpenter), Douglas Englebert.

Members Excused: Michael Waupoose, Linda Mayfield

Members Absent: Representative Joe Parisi

Ad-Hoc Members Present:

Ad-Hoc Member Excused: Susan Crowley, Randall Glysch, Linda Preysz

Ad-Hoc Member Absent: Roger Johnson, Thomas Heffron, Peggy Wichman, Ray Luick, Larry Kleinsteiber

Staff: Joyce Allen, Lori Ludwig, Jamie McCarville, Sue Gadacz, Kathy Thomas, Raina Zwadzich, Kate Johnson, Jerry Livings

Guests: Carol Roessler, Norm Briggs, Sue Gudenkauf, Jill Kenehan Krey, Denise Johnson, Steve Daki, Harold Gates, Mike Olig, Manny Scarbrough, Dave McMaster, Lorie Goeser, Carol Hanneman-Garuz, Tami Bahr, Chris Hill-Sampson, Anne Ziege, and Patricia Nametz

Introductions/Welcome/Agenda

Mark Seidl, Secretary, called the meeting to order at 9:35 am. In the absence of the Chairperson, he welcomed the group and asked the group to introduce themselves.

Approval of Minutes

Joyce O'Donnell motioned to approve the minutes of June 6, 2008 as written. Sandy Hardie seconded the motion. The motion passed unanimously.

Election of Officers

Mark Seidl turned the Chair over to Nominating Committee member, Joyce O'Donnell. Ms. O'Donnell presented the Slate of Officers: Mark Seidl for Chairperson, Linda Mayfield for Vice-Chairperson and Scott Stokes for Secretary. She asked for any additional nominations from the floor, three times as required by Roberts Rules of Order. There were no further nominations from the floor. Joyce O'Donnell then moved to approve the election of Mark Seidl as the Chairperson; Sandy Hardie seconded the motion. Ms. O'Donnell asked for any other nominations from the floor for Chairperson, three times. There were none. Mark Seidl was elected Chairperson unanimously. The same procedure was followed for Vice-Chairperson and Secretary. With no other nominations being heard from the floor, a motion to elect Linda Mayfield as Vice-Chairperson (second by Renee Chyba) was unanimously approved; as was a motion to elect Scott Stokes (seconded by Gary Sunnicht) as Secretary.

Update of Council Membership

Lori Ludwig reported on the open Citizen's member appointment to the Council. The Nominating Committee reviewed 10-12 applications for the appointment. The Nominating Committee discussed the candidates and made a recommendation to the Governor's Office. There are as yet, no official appointments announcements. Ms. Ludwig shared a chart with the group which summarizes members' names and dates of appointment. Ms. Ludwig also informed the group that once an appointment is made, those who are not chosen will be sent a letter with information about SCAODA's Committees and how to volunteer to serve on the Committees.

Public Input

There were no requests from the public to address the Council.

Committee Reports

Prevention Committee: Scott Stokes reported that the Prevention Committee is working on RFP's for the SPF SIG project. The Prevention Committee will meet in September. They have received feedback from federal officials this week and need to complete a couple of recommendations before they can gain approval to move forward.

Diversity: Sandy Hardie thanked Bureau staff for posting the correct definition of "Cultural Competency" on the SCAODA website. She reported that the Diversity Committee is working on recommendations for cultural competency assessment tools. They are reviewing three tools, which they would like linked to the website. They are looking into mechanisms to provide culturally competent training to program directors, clinic supervisors, and providers. Ms. Hardie also reported that Michael Waupoose will chair SCAODA's "Public Forum" at the Tribal Conference at the Wisconsin Dells October 28-30, 2008. Also, Mr. Waupoose is presenting a workshop on Cultural Diversity at the Bureau

Conference October 22-23.

Sandy Hardie made the following **motion**: In order to establish criteria for new membership and the ability to make an informed recommendation if and when legislators pass the bill to increase SCAODA membership, the Diversity Committee moves to establish a Membership Workgroup that will review all the SCAODA membership information gathered in the coming months. The criteria and recommendations by this workgroup should be completed by and reported out at the 12-05-08 SCAODA meeting in order to be ready for the legislative session to be open in January. The workgroup can include the current Nominating Committee (Linda Mayfield, Joyce O'Donnell, Mark Seidl, Mary Rasmussen and Linda Preysz) and /or representatives from each SCAODA Committee.

Joyce O'Donnell seconded the motion and suggested that the workgroup include representatives from the Nominating Committee and the Committees of SCAODA. With that friendly amendment, **the motion passed unanimously.**

Senator Carol Roessler's Recognition

At this point, former Senator Carol Roessler arrived. She was presented a desk plaque engraved with the dates of her service to SCAODA (1991 to 2008). Mark Seidl pointed out the many initiatives and accomplishments she was responsible for during her tenure with SCAODA. He reported that she has been a champion for SCAODA's causes and a strong supporter of not supporting unfunded mandates. Senator Roessler thanked everyone. She reported that she has learned much from her experience with SCAODA. The group broke for refreshments and resumed ten minutes later.

Committee Reports Continued

Intervention and Treatment Committee (ITC): Tami Bahr reported that the ITC met on July 8th. Updates were reported by Dave McMaster on WIN-TIP, a Wisconsin Nicotine Intervention Project that integrates evidence-based nicotine treatment with AODA treatment programs. They also have been addressing their strategic plan. Ms. Bahr reported on the proportion of private, public, self, and uninsured treatment consumers according to the Insurance Commissioners Office. The breakdown is as follows: 25% private insurance, 30% publicly funded, 3% self-pay, and 5% uninsured. Ms. Bahr also reported that according to the DSM-IV, gambling is a mental health issue and not a substance abuse issue. Substance abuse counselors who are providing counseling for gambling problems are practicing outside their scope. There is a separate credentialing process through the Department of Regulation and Licensing. The Children and Family Sub-Committee is coming together. Tami Bahr also pointed out that there is an IDP Assessor training at the Bureau Conference October 22-23. She reported on the shortage of substance abuse counselors and supervisors in the state as well as the shortage of treatment resources for a large homeless adolescent male population with substance abuse issues. This is a serious trend in the southeast portion of the state. Ms. Chyba reported that the Children and Youth Sub-Committee will be meeting September 23rd to finalize a strategic plan.

Planning and Funding: Joyce O'Donnell thanked the Division for bringing the Trauma Coordinator Elizabeth Hudson to the Bureau. She reported that she has made the trauma fact sheets available at the Public Forum that she chaired in June. Most recently she reported on a presentation by Flo Hilliard to the Planning and Funding Committee on sex differences in the development of the brain. It was a most informative presentation and has implications for treatment. Sue Gadacz also presented to the Planning and Funding Committee on the lack of treatment capacity for women's specialized services. Ms. O'Donnell announced that she was pleased that the Governor's Office is represented here through the presence of Coral Butson. Ms. O'Donnell pointed out that there has been no growth in treatment and recovery programs and in block grant funds. Therefore, Planning and Funding would like to bring forth a motion about how the Bureau of Prevention Treatment and Recovery contracts. Blinda Beason seconded the motion. Discussion elicited that the intention of the motion is to review all contracts that have been out there a long time and evaluate if they are performing according to performance based standards. **Motion:** Planning and Funding Committee recommends that the Bureau of Prevention Treatment and Recovery review and ensure all Substance Abuse Block Grant contracts adhere to performance based standards. **The motion passed unanimously.**

Ms. O'Donnell reported that it also has come to the attention of the Planning and Funding Committee that additional funding may become available if providers are certified by Medicaid. **Motion:** The Planning and Funding Committee encourages each contractee to pursue Medicaid certification of each vendor in order to enable Medicaid certification for reimbursement. Mary Rasmussen seconded the motion. **The motion passed unanimously.**

Joyce O'Donnell pointed out that the group had spent a long time discussing and reviewing lots of data on increasing the tax on beer. Now we need to review the suggestions and the most efficient vehicle to ask the Governor to increase the tax on beer as part of his budget bill. **Motion:** The Planning and Funding Committee would like to officially move that the Governor insert in the budget an increase of the tax on beer. Mary Rasmussen seconded the motion. Representative Townsend suggested that we add the stipulation that any increase go to treatment; Scott Stokes added that the increase also go to prevention. Joyce O'Donnell suggested incorporating their suggestions into the motion. Discussion: Renee Chyba asked if the purpose of the motion is to raise money to go to treatment and prevention? If so, we need to protect the dollars. Joyce O'Donnell pointed out that since the Governor is the head of this Committee, we are hoping he will support this motion. Mark Seidl pointed out that the money will offset the money spent in prisons. We can show savings to the legislature by putting money in for treatment and prevention. **Coral Butson abstained from the vote. Eileen Mallow voted "present." All others voted "aye." The motion passed.**

Joyce O'Donnell reported that the Planning and Funding Committee was concerned about the criminalization of first time offenders for OWI. On one hand, criminalizing the first offense is really addressing the first time the person was caught. On the other hand, there should be some component to send the person to treatment sooner rather than later. Motion: Planning and Funding opposes the criminalization of first time OWI offenders; and would move to mandate treatment if appropriate according to the results of the IDP assessment. Mary Rasmussen seconded the motion. The motion stimulated a great deal of discussion around the current system, implications for the IDP assessment, limitations of the IDP assessment and other ideas

about how to deal with repeat offenders. Mark Seidl suggested that we need a presentation to the Council on how IDP assessors use the instrument (WADE and NCA criteria) from the point of view of what the person goes through. Joyce O'Donnell continued. **Motion:** The Planning and Funding committee opposes the criminalization of first time OWI offenders; and would move to mandate treatment if appropriate according to the results of the IDP assessment. **The motion passed unanimously.**

Motions Update Document

Joyce Allen reviewed for the group a document which summarizes responses to SCAODA motions. She pointed out that letters have been sent to University of Wisconsin System schools, administration and academic services personnel and the appropriate legislative committees concerning the need to add an AODA curriculum; also a letter was sent to the Legislative Audit Committee Co-Chairs asking that an audit of the IDP program occur; and a letter to the Governor to increase the tax on beer.

Wisconsin's Epidemiological Profile

Chris Hill-Sampson presented an outline of the data summarized in, and a hard copy of the report, "Wisconsin Epidemiological Profile on Alcohol and Other Drug Use, 2008." It is a collaborative report based on the work of Bureau of Health Information and the UW Population Health Institute, funded by the Division of Mental Health and Substance Abuse Services. Key findings were presented. The report brought forth a group discussion of the key findings and how we can use the data in our work.

Safe Streets Presentation

Mike Olig from Winnebago County presented on the "Safe Streets" program. It is the result of legislation introduced by Carol Roessler. He reviewed the stages of change according to motivational theories and presented statistics on the number of OWI's last year. Safe Streets is a voluntary program and works in conjunction with the Drug Court in Winnebago County. Legislation designed to develop Safe Streets programs was passed by the Senate last year, but the Assembly did not pass it, due to running out of time.

Recovery Month Activities

Jamie McCarville distributed a handout on National Recovery Month Activities. A Proclamation will be announced at one of the rallies. Many local recovery groups are involved. She provided the group with the website to plan activities.

Agenda Items for December 5th Meeting

IDP presentation; Brain Development presentation; supporting the 21 year-old drinking age (Planning and Funding taking up this topic); Parents and Youth in Recovery; results on SCAODA Survey on representation of Committee members; report from workgroup of

representation of new SCAODA members, Secretary Timberlake and the budget; Report on treatment available for 5th OWI

Adjournment: The meeting was adjourned. The next meeting is scheduled for December 5, 2008 at 9:30 am to 12:30 pm at American Family Insurance Conference Center.

SCAODA 2008 Meeting Dates

March 7, 2008	9:30 am - 12:30 pm
June 6, 2008	9:30 am - 3:30 pm
September 12, 2008	9:30 am - 12:30 pm
December 5, 2008	9:30 am - 12:30 pm

SCAODA 2009 Meeting Dates

March 6, 2009	9:30 am - 12:30 pm
June 5, 2009	9:30 am - 3:30 pm
September 11, 2009	9:30 am - 12:30 pm
December 4, 2009	9:30 am - 12:30 pm

DRAFT



Jim Doyle
Governor

Sen. Carol Roessler
Chairperson

State of Wisconsin

State Council on Alcohol and Other Drug Abuse

1 West Wilson Street, P.O. Box 7851
Madison, Wisconsin 53707-7851

Linda Mayfield
Vice-Chairperson

Mark Seidl, WCHSA
Secretary

**STATE COUNCIL ON ALCOHOL AND OTHER DRUG ABUSE
MEETING MINUTES**

June 6, 2008

9:30 a.m. – 3:30 p.m.

**American Family Insurance Conference Center
6000 American Parkway Madison, WI 53783
Room A3151**

Members Present: Joyce O'Donnell, Renee Chyba (representing Secretary Rick Raemisch), Scott Stokes, Linda Mayfield, Mark Seidl, , Gary Sumnicht (representing State Superintendent Elizabeth Burmaster), Michael Waupoose, Mary Rasmussen, Blinda Beason (representing Secretary Frank Busalacchi , Greg Phillips (representing Michael Myszewski and Attorney General J.B. Van Hollen), Sandy Hardie, Representative John Townsend, Senator Carol Roessler, Jennifer Stegall (representing Eileen Mallow and Insurance Commissioner Sean Dilweg , Dr. Pamela Phillips, Senator Tim Carpenter, Coral Butson representing Governor Jim Doyle, Douglas Englebert .

Members Excused: John Easterday, Alternate for Secretary Karen Timberlake, Judith Wilcox, Representative Joe Parisi.

Members Absent

Ad-Hoc Members Present: Linda Preysz (Designee for Roberta Gassman, Secretary DWD), Jeff Scanlon (for Celia Jackson, Secretary DRL), Ray Luick (Designee for David Steingraber, OJA), Larry Kleinsteiber, Susan Crowley

Ad-Hoc Member Excused: Roger Johnson , Thomas Heffron.

Ad-Hoc Member Absent:

Staff: Lori Goeser, Gerald Livings, Joyce Allen, Greg Levenick, Lori Ludwig, Lou Oppor, Gail Nahwahquaw, Kathy Thomas, Rita Schraepfer-Derke, Mary Raina Zwadzich, Susan Endres, Jamie McCarville, Elizabeth Hudson, and Michael Quirk .

Guests: Katie Plona, Norm Briggs, Bill McCulley, Kyle Pfister, Mary Lynn Rose, Mike Kemp, Murray Kaye, Carol Hanneman-Garuz, Dave McMaster, Denise Johnson, Carol Lobes, Judy Adrian, John Frederick, Cynthia Greer, Manny Scarbrough, Georgiana Wilton, Jill Gamez.

Introductions/Welcome/Agenda

Linda Mayfield, Vice Chairperson, called the meeting to order at 9:35 am. In the absence of the Chairperson, she welcomed the group and asked for any new participants to introduce themselves. Greg Levenick introduced Elizabeth Hudson, the new Trauma Coordinator for the Bureau. Ms. Hudson addressed the group indicating how she looked forward to increasing the awareness of trauma informed care across the state.

Approval of Minutes

Joyce O'Donnell motioned to approve the minutes of March 7, 2008 as written. Linda Preysz pointed out an edit on page 7. In the paragraph above "Women's Capacity Study Results," change "even" to "event." Michael Waupoose expressed concern/confusion about Joyce O'Donnell's motion to increase SCAODA's membership from 22 to 27, adding an additional 5 members from the field of AODA prevention and treatment. He thought the entire motion was "on hold." Joyce O'Donnell explained that what was on hold was the motion that the Planning and Funding Committee would develop criteria for the selection of five new members through recommendations from the other SCAODA Committees.

She explained that the motion to increase the membership was passed unanimously. The motion to identify selection criteria is on hold. Greg Levenick read from the letter sent to Governor Doyle regarding membership and a specific reference was made to language indicating that the new members should be from the field of AODA prevention and treatment. Mr. Waupoose held that he thought there would be further discussion. Mark Seidl seconded the motion for approval of the minutes: all were in favor.

DHFS Legislative Updates

Katie Plona, DHFS Legislative Liaison was introduced. She indicated that now that the legislative session has ended, the budget bill is being developed for passage next January or February. It becomes public on September 15th. She pointed out that the Council might consider the budget bill as an opportunity to influence policy. Because the legislature is not in session right now, there is nothing new to report. The budget repair bill has passed. She asked if there were any questions. Joyce O'Donnell asked if there was any legislation that impacts the field of alcohol and other drug prevention. Regarding the beer tax, what would DHFS' role be? Ms. Plona thought that DHFS would get some funding from it if it did pass. Ms. O'Donnell indicated that she would like to see the legislation once it is activated again. Ms. Plona pointed out that the first opportunity for that to occur would be January 2009. In September, agencies (DHFS) make budget requests. Representative Townsend counseled the group to take advantage of these 6 months to draft legislation. Legislators are sworn in on the first Tuesday in January. Then there is a 25-30 day period to organize the committees. If a bill is ready, it can get to Committee in late January or early February. Joyce O'Donnell expressed the hope that Representative Townsend and Senator Carpenter would introduce legislation to increase the number of members in the Council from 22-27. Representative Townsend recommended that the Council approach both offices and staff to get that done. Joyce O'Donnell indicated that the prospective legislation was on the Planning and Funding Committee's calendar.

Greg Levenick summed up the actions taken on behalf of SCAODA's motions from the March 7th meeting during the past three months: 1) Regarding increasing the membership, a letter was

drafted and sent to Governor Doyle asking for his support. 2) Regarding potential cuts in SAMHSA's 2009 budget, letters opposing the cuts were drafted and sent to the entire US Congressional delegation from Wisconsin, and Governor Doyle. 3) The CLAS standards were posted to SCAODA's website. At the Department level, staff are working with the Affirmative Action/Civil Rights Compliance staff, to identify ways to disseminate the information. Mr. Levenick announced that as part of the regular legislation and motions updates, we'll provide documentation of what has occurred on the SCAODA website, so everyone can see what the item's status. He asked for any other suggestions members might have. There were none made.

Public Input

There were no requests from the public to address the Council. However, Dave McMaster reported that on April 23, 2008 he met with 29 representatives of the ATODA system in order to confront barriers to integrating tobacco cessation programming with other substance abuse treatment programs. It was the first time all of these groups met together. On July 24th, the state of NY will be implementing the new standard that AOD programs MUST be tobacco free. They will be training counselors on how system change occurs. Mr. McMaster will be getting that information and incorporating it into an implementation plan. Mr. McMaster also recognized Norm Briggs for his contributions.

Intoxicated Driver Surcharge Audit Request

Senator Roessler resumed the duties of the Chair. She indicated that the Council should consider what its recommendations will be for the next legislative system regarding "Operating While Intoxicated" drivers. She explained that legislators are generalists, when an incident occurs, the public looks to the legislature. She suggested that the Council make recommendations for change. The third conviction will be on the table. A discussion ensued regarding treatment alternatives such as: the DOC facility that does OWI programming for inmates with a 5th OWI conviction, Drug Courts, and the Safe Streets program. She reported that Safe Streets has a 4% recidivism rate compared to a 53% recidivism rate for those without the program. Senator Roessler reported that the Safe Streets bill was the last bill to pass in the Senate this year. However, the Assembly had adjourned. She asked that whatever SCAODA Committees are appropriate, review the program. Greg Levenick indicated that the ITC would be the appropriate Committee. Senator Roessler asked that a report on Safe Streets be prepared for the Council. This program can be for 2nd time OWI offenders. She also informed the group that she would support Wisconsin having a criminal penalty for 1st time Drunk Driving. Wisconsin is the only state that doesn't have a criminal penalty for first offenders. When the Council comes forth with recommendations, also consider what penalty would be appropriate for first time OWI offenders.

Mark Seidl reported that in 1989 the Intoxicated Driver Program was implemented. It was a good program but it caused the costs of OWI offenders to be shifted from jails to the counties. So, a surcharge was assessed in 1989 on the intoxicated driver. Money came from the counties to the state and the state disbursed it as part of the Community Aids formula. It didn't work. The larger counties were always short. The State Council worked with Senator Roessler to change the situation. So, in 1992, of a \$250 surcharge, 85% went to the county and 15% went to the state. Now counties get 68% or, \$212 of a \$350 surcharge. The request from counties is now

about \$2,000,000. Counties were allocated \$1,000,000 from \$1,400,000. Where did the \$400,000 go? No one knows. Treatment costs have gone up and the counties' percentage of the dollars has gone down. The Wisconsin County Association asked for a legislative audit. Senator Roessler also made a request. Mr. Seidl indicated that this year, counties will get only 30% of what they request. Senator Roessler felt that this should be a major issue for the next legislative session. She reported that two days ago she re-submitted the letter asking for an audit. She continued that the new chair of the Legislative Audit Bureau is Senator Sullivan. Senator Roessler talked to Senator Sullivan last week, also Representative Suzanne Jeskewitz. Senator Sullivan is Joyce O'Donnell's Senator. She reiterated that we need to make that call. Also, it's a good idea to have the State Council send a letter. **Mark Seidl moved that the State Council send a letter requesting an audit of the Intoxicated Driver Program, and have the Vice-Chairperson sign it. The Motion passed unanimously.** Joyce O'Donnell also agreed to make contact with Senator Sullivan. Gary Sumnicht and Mary Rasmussen also agreed to contact their legislators and ask for the audit. In addition to insufficient IDP funds, third party Insurance Companies often refuse to pay for treatment. Jennifer Stegall, from the Office of the Commissioner of Insurance, suggested that if someone is denied insurance coverage they should file a complaint with the Office of the Commissioner of Insurance. Ms. Stegall agreed to bring the link to the insurance complaint forms to the next meeting. Mary Rasmussen made the point that when someone is in need of AODA treatment, they are in a vulnerable state, and taking up the reigns of advocacy may be beyond their skill-level at that point. Ms. Stegall reiterated that Office of the Commissioner of Insurance needs cases so changes in the law can be made. Mark Seidl pointed out another hardship in obtaining third party insurance coverage. Treatment must be provided within a 30-day period. Lorie Goeser explained that if treatment isn't obtained within 30 days, it is not considered an acute problem, and therefore denied coverage. Senator Roessler responded by charging the group to get active, get tough, be a pain to these agencies. Take this problem back to advocates and ask them to help people with the appeal forms. Do whatever is necessary. She asked Mark Seidl to put the IDP background down on paper. She thought the paper should be part of the next SCAODA packet. Senator Roessler summarized: 1) Criminalize first offense OWIs. 2) Restore funding from the IDP surcharge. Make sure money that is set aside is directed to treatment programs. 3) Work on insurance compensation. 4) Pass the Safe Streets legislation (Include the Safe Streets legislation in the next SCAODA packet). Senator Roessler suggested asking Secretary Karen Timberlake to come to a SCAODA meeting when we have some recommendations.

Michael Waupoose raised two issues: 1) regarding insurance coverage for AODA treatment: Not all insurance companies refuse coverage; only some. When the IDP assessor says one thing and the assessment from the treatment provider says something else, there is a disparity in what the person being assessed needs. The Intoxicated Driver assessors are not certified to assess substance use disorders. The Intoxicated Driver assessment tool doesn't lead to a diagnosis, either. HFS 75 dictates that placement criteria for level of care must be assessed and the Intoxicated Driver assessors do not use level of care criteria. If "not medically necessary" is reported, then the insurance won't cover the treatment. That is the key.

Greg Levenick explained that HFF 62 (Administrative Rule relating to intoxicated driver assessments and driver safety plans) was re-written recently. The tool that Intoxicated Driver assessors use is a screening tool and not an assessment tool. A referral of suspected abuse or

dependence is made to treatment personnel. Treatment providers determine the substance abuse disorder diagnosis, if any. Lorie Goeser reported that at the upcoming Bureau conference in October, there will be a training session for Intoxicated Driver Assessors. They will have one session on HFS 62. Lorie Goeser agreed to report on this at the December meeting.

Michael Waupoose continued with his second issue: 2) The Drunk Driving assessment is done in the County of residence where the fee is paid. However, tribal members are referred back to the tribe for treatment and the tribe has to absorb the cost of treatment.

STAR-SI

Michael Quirke presented on STAR-SI. STAR-SI is in the business of increasing treatment success. The goal of the STAR-SI program is to increase successful AODA treatment completions. The project has found that among all STAR-SI sites, successful completions have increased by 55%. The program is based on a “Walk-through” model, wherein program Administrators walk through their programs as if they were clients. The staff becomes the patients and experience the program as the client does. Kenosha reported a reduction of wait time to get into treatment by 50%. Racine showed an initial rate of 47% of referrals getting into treatment which was raised to 72%. Sixty (60) more clients were admitted and that generated an additional \$11,000 in revenue. In Iowa County, they reduced their paperwork and associated time for an Intoxicated Driver Assessment, so they could reduce the fee by \$54. One of the 23 STAR-SI providers, Norm Briggs, from ARC Community Services in Madison, was present and reported that ARC Community Services reduced its “no show” rate from 32% to 16%. Mike Quirke reported that each year about 10 agencies are brought into the STAR-SI project. He encouraged SCAODA participants to get the word out. The agencies get small grants to defray data collection costs (\$5,000-10,000).

Synar

Kyle Pfister presented a power point on Synar which is a federal effort to prohibit sale of tobacco to underage youth (less than 18 years of age). Synar is an amendment (to federal legislation) that requires a less than 20% non-compliance rate (sales to minors). Wisconsin has a rate of 4.5%. Wisconsin Wins is a science-based program to reduce youth access to tobacco products. It incorporates a “Reward and Reminder” protocol and media and outreach activities, too. Senator Roessler asked how merchants find out about Wisconsin Wins. There will be a statewide press release in June; Mr. Pfister meets with the Tavern League and Grocers. There will also be window clings, cards and stickers for the register available at the website.

Committee Reports

Intervention and Treatment Committee (ITC): Linda Preysz reported that the ITC has been addressing their strategic plan. The Children and Family Sub-Committee is coming together. The Intoxicated Driver Program (IDP) Sub-Committee is still pending. Greg Levenick reported that hopefully, in the next three or four months the Bureau would be able to hire an IDP Coordinator. Senator Roessler suggested that members for the IDP Sub-Committee be recruited from among existing IDP programs.

Lorie Goeser reported that the “Joint Statement” in the SCAODA packets are in final draft form and will be sent to Secretary Karen Timberlake. It promotes the well-being of the whole person; many have endorsed it as a standard of practice and good care. Senator Roessler asked how stigma was to be addressed. Lorie Goeser indicated at the WAAODA conference there was a stigma breakout session which included media people. There was an action plan resulting. Senator Roessler asked why veterans as a group weren’t mentioned, and suggested that they be addressed specifically and deliberately. Lorie Goeser agreed to do that. Regarding “Parity” Senator Roessler felt that if “Parity” were passed at the federal level, it would help Wisconsin’s efforts. She then suggested that without a federal law, this state won’t move forward unless and until individual parties, businesses come forward and say they need this. That’s what it is going to take. Look at the costs of the lack of productivity, absenteeism, breakdown in the family. The Mental Health Council needs to appeal to businesses across the state—not Associations—individual businesses. It has to come from businesses or it will not succeed. Legislators are afraid of passing something that would increase costs.

Renee Chyba brought forth a motion that, **with the addition of veterans, the SCAODA council go on record as supporting the Joint Statement from DHFS and to be acknowledged as an endorser of this statement and its action plan, with the knowledge it is a living document with ongoing additions and adjustments being made.** Michael Waupoose seconded the motion. **The motion passed unanimously.**

Renee Chyba then brought forth an additional motion: **SCAODA council should send a letter to the Governor requesting support to increase the number of State of Wisconsin Adult Teaching Institutions (i.e. Technical colleges, and Universities) to offer Substance Abuse Counseling competencies classes and concentrations in order to address the current and predicted future workforce shortage in this area. Recommend a focus to have this type of curriculum offered at UW-Madison, UW-Platteville, UW-Milwaukee, and UW-Oshkosh in particular given these institutions offer a variety of master’s degree programs for a variety of counseling and psychotherapy but do not include/or offer as an option the basic Substance Abuse Counseling educational requirements.** Senator Roessler suggested also sending the letter to the President of the Board of Regents; Chancellors of the Colleges mentioned; and to the Chairs of the Higher Education Committees of both houses. She suggested adding need and factual data to the letters and added the President of the UW System, the Deans of the schools mentioned and the Chancellor of UW-Madison to the list of recipients. Joyce O’Donnell suggested cc’ing all parties to the letter. Jerry Livings suggested mentioning the places that do have the appropriate competencies in place, so there is a place recipients can refer to, when questions arise. **The motion passed unanimously.**

Jeff Scanlon reported on two related issues: 1) Within the past few days there has been a rules change for the Substance Abuse profession which he will distribute electronically. He distributed hard copies of the document. Summarizing, Effective June 1, 2008, Supervisors in Training cannot supervise Counselors in Training. 2) Exam requirements for Clinical Substance Abuse Counselors: The oral exam is being replaced by equivalent items on an updated written exam. He asked that we disseminate to our networks specific information regarding these changes.

Diversity: Michael Waupoose discussed the activities of the Diversity Committee: 1) The Diversity Committee reviewed their membership and letters were sent out to ascertain interest. The roster has been narrowed. Diversity Committee still needs citizen members. Senator Roessler suggested veterans. 2) The Diversity Committee reviewed the work plan and made minor revisions: the Youth Group is now a part of ITC. 3) Diversity held a meeting at the Menominee Treatment Center. It is an amazing place, having integrated culturally appropriate activities within age/sex/client type groupings. Mr. Waupoose expressed gratitude to the staff of the Menominee Treatment Center. 4) Mr. Waupoose thanked State staff for including the CLAS standards and the definition of Cultural Competency on the SCAODA website, but it should be in a more forward place (not under Diversity Committee). 5) Currently the Diversity Committee is working on recommendations for cultural competent assessment tools. They are reviewing three tools, which they would like linked to the website. They are looking into mechanisms to provide culturally competent training to program directors, clinic supervisors, and providers. Senator Roessler suggested Greg Phillips (representing the Department of Justice) and Mr. Waupoose examine ways to help the DOJ with diversity issues. Senator Roessler asked about older adults and where were they represented in the Diversity Committee? Mr. Waupoose indicated that they were not a focus for the Diversity Committee which focuses on cultural diversity.

Planning and Funding: Joyce O'Donnell reported on the Public Forum at the WAAODA conference: She referred to the summary of issues in the SCAODA packet of information. The major issue was there are very few programs for AODA Counselors. Ms. O'Donnell commented on the quick turn around in acting on this concern. Senator Roessler encouraged the group to find a way to get information regarding SCAODA's responses to their concerns back to them. Ms. O'Donnell thanked Senator Roessler for her commitment to the AODA field and hoped that her successor has as much enthusiasm. Ms. O'Donnell expressed gratitude to Lilly Radivojevich, DMHSAS staff assigned to the Planning and Funding Committee, who resigned her DMHSAS position recently. She served the Planning and Funding Committee well. Ms. O'Donnell also thanked the Governor for proclaiming April Alcohol Awareness Month; and was happy to see that DMHSAS hired a Trauma Coordinator. She then made the motion: **To request SCAODA's legislative members introduce legislation that increases SCAODA's number of statutory members to 27 from 22, 5 additional members would represent the substance abuse prevention and treatment field, both culturally and geographically, in the state of Wisconsin. The motion was seconded by Gary Sumnicht.** Michael Waupoose felt that there needed to be a picture of the current Council. He expressed concern that there would be an imbalance; with an overrepresentation of treatment providers. Treatment providers have professional Committees that represent them. He recommended that we look at the make-up of the current Council before we specify who or what the new members would represent. Joyce O'Donnell acknowledged Mr. Waupoose's concern. The intent of the motion is not to cut anyone off. The Citizen Council had 47 members. Planning and Funding is concerned about increasing the numbers and when you look at the membership, it could be considered top heavy. Sandy Hardie agreed with Mr. Waupoose; that we should look at the gaps before we do anything. Linda Preysz echoed that sentiment. She indicated that she didn't want SCAODA to be a professional organization. We need to look at this. **Senator Roessler suggested a friendly**

amendment to amend out “Prevention and Treatment” fields. Gary Sumnicht seconded the motion and the motion with the amendment was approved unanimously.

Senator Roessler then suggested the group brainstorm who the new members should be: Business and professional person, recovering person, veteran, former offender having gone through treatment, tribal member. Mr. Waupoose suggested that SCAODA staff survey the membership as to what they would like to see. He suggested inquiring into members representation (who do they represent) as well as to who they would like the new members to represent. Scott Stokes suggested a Hispanic representative and someone from Prevention. Michael Waupoose suggested a Hmong person. Greg Levenick agreed to do the survey. Greg Phillips pointed out that the tribes are all different and don't always work together. How can one person represent all the tribes? Larry Kleinsteiber suggested a VA federal health care professional. Joyce O'Donnell suggested inviting all of those mentioned to participate on a Committee. Senator Roessler thanked Joyce O'Donnell, Michael Waupoose and Linda Preysz for good succinct motions and background work. Representative Townsend added that legislation can only increase numbers by statute. Specific qualities should be decided here in the State Council. Senator Roessler agreed, indicating that follow-up would occur next legislative session.

Prevention Committee: Scott Stokes reported that the Prevention Committee is working on RFP's for the SPF SIG project. They should be issued soon. He also announced that there is information on the upcoming Prevention Conference in the SCAODA packet. Susan Crowley encouraged people new to the Prevention field to attend as well as returning prevention specialists. Blinda Beason noted that the Prevention conference is a great conference for getting training and credit. Lastly, Scott Stokes noted that the latest Epidemiological Report will be released the end of June or first of July. The Prevention Committee should be able to give an overview of it at the next meeting.

By-Laws: Lou Oppor presented a short summary of the work accomplished in creating By-laws for SCAODA. First, he reported, the Workgroup met six times. All of the Sub-Committees have reviewed the document. The final meeting was about one month ago. The Workgroup took all of the comments into account. Then, he pointed out the passages in the By-laws that are underlined are those that come directly from statute. The purpose for the By-laws was taken directly from the Council's Four-year plan. He pointed out particular sections: 1) Current membership by statute (sec 2.2 page 4); 2) six non-voting Ex-Officio members (page 5); 3) Selection of Officers (page 5); 4) Elections at the first meeting of each year (July 1st) (sec 2.5 page 5); 5) Terms of members (2.5 page 6)—there are several members whose terms have expired and Mr. Oppor reported that he is working with the Governor's Office about these expired terms; 6) Terms shall expire in odd-numbered years (page 4 section 2.3). At this point, Senator Roessler asked for a report on appointments in September. Mr. Oppor continued with his review of the By-laws: 7) Vice-Chair shall convene a Nominating Committee (sec. 2.9 page 7); 8) Defined roles (page 9), created an attendance police person—the Secretary of SCAODA. If members are not in attendance for two or more meetings, then the Secretary contacts them. Senator Roessler indicated that it might be of benefit to send an FYI letter to the Governor about the new members from the Vice-Chair. Mr. Oppor pointed out the attendance rules on pages 13-14. 9) New to SCAODA, an Executive Committee was added. Following the summary, Blinda

Beason made a motion: **To approve and adopt SCAODA's By-laws. Mark Seidl seconded the motion. The motion passed unanimously.** A handout was distributed directing nominations for officers and applications for new or continuing members be directed to Linda Mayfield. The Nomination Committee was convened. The following agreed to participate on the Nominations Committee: Mark Seidl, Renee Chyba, Joyce O'Donnell and Mary Rasmussen.

Project Fresh Light: Susan Endres distributed four handouts. "The Need for Gender-Specific Treatment of Adolescents: A new paradigm for treating boys and young men," "Project Fresh Light Power Point," "Six Barriers identified in March 21, 2007 Inter-Intra Departmental Adolescent Treatment focus Group (rev)," and a cd from Wisconsin Family Ties, "Family Guide to Adolescent Substance Abuse Information and Services in Wisconsin." Senator Roessler asked that a set of parents or two attend the September meeting. Ms. Endres pointed out the project's website: projectfreshlight.org. A discussion ensued as to insurance coverage for adolescent treatment. Mental Health may be covered under Medicaid but not substance abuse. Ms. Endres reported on the use of the standardized assessment tools: the GAIN for use with adolescent populations is being distributed statewide by Family Ties; and the POSIT for use with juvenile justice populations at the point of intake has been distributed to county units. Another issue involved in adolescent treatment is the lack of Certified Counselors with an Adolescent Specialty. There are issues with the Department of Regulation and Licensing as well as with providers. Senator Roessler suggested that Michael Waupoose, Susan Endres and Jeff Scanlon work together on this issue. Ms. Endres reported that Family Ties is an organization for families with Mental Health issues and now it is for families with AODA issues, too. Ms. Endres reported that the final report is due July 9th. Dave McMaster recognized Ms. Endres and Joyce Allen for this program. Michael Kemp of the Adolescent Treatment Improvement Sub-Committee recognized Senator Roessler for this project, too.

Agenda Items for September Meeting: 1) Beer Tax—Senator Roessler said that we need to ask the Governor to do this right now. Ask him to increase the tax on beer in his budget. It won't happen through the legislature. Representative Townsend suggested asking that proceeds go to treatment agencies, instead of the general fund. Other items: 2) Report on treatment available for 5th OWI; 3) Safe Streets; 4) STAR-SI; 5) Epi Profile; 6) Election of Officers; 7) Parents and youth in Recovery 8) Secretary Timberlake and the budget.

Announcements: Senator Roessler ended the meeting by saying that now is the time for the Council to act. It has an influential position with its Committees and a network of providers. She challenged the group to put together an agenda to save lives.

Adjournment: The meeting was adjourned. The next meeting is scheduled for September 12, 2008 at 9:30 am to 12:30 pm at American Family Insurance Conference Center.

SCOADA 2008 Meeting Dates

March 7, 2008	9:30 am - 12:30 pm
June 6, 2008	9:30 am - 3:30 pm
September 12, 2008	9:30 am - 12:30 pm

December 5, 2008 9:30 am - 12:30 pm

SCAODA 2009 Meeting Dates

March 6, 2009	9:30 am - 12:30 pm
June 5, 2009	9:30 am - 3:30 pm
September 11, 2009	9:30 am - 12:30 pm
December 4, 2009	9:30 am - 12:30 pm

Jim Doyle
Governor



State of Wisconsin

State Council on Alcohol and Other Drug Abuse

1 West Wilson Street, P.O. Box 7851
Madison, Wisconsin 53707-7851

Mark Seidl, WCHSA
Chairperson

Linda Mayfield
Vice-Chairperson

Scott Stokes
Secretary

Date: November 18, 2008

To: Wisconsin County Executives
Wisconsin County Board Chairpersons

From: Scott Stokes, Chairman
Prevention Committee
Governor's State Council on Alcohol and Drug Abuse

Re: Dane County Executive, Kathleen Falk's Alcohol Budget Proposal

Handwritten signature of Scott Stokes with initials 'MEZ' next to it.

With a unanimous vote, the Prevention Committee of the State Council on Alcohol and Other Drug Abuse adopted a motion to recognize Dane County Executive Kathleen Falk's Alcohol Budget Proposal and to encourage other counties to investigate implementing similar efforts. County Executive Falk is proposing to provide financial assistance to alcohol prevention, treatment and recovery programs, policies and initiatives. The Prevention Committee is requesting counties to follow in the steps of Kathleen Falk in investigating and supporting similar activities.

As you may know, alcohol misuse and abuse has become a catastrophic epidemic sweeping across Wisconsin. The state leads the nation in rates of binge drinking among young adults, underage drinking and alcohol related motor vehicle fatalities and injuries. In a recent University of Wisconsin Health Initiative news conference, Dr. Jeffrey E. Grossman, president and CEO of the UW Medical Foundation, stated, "Wisconsin is far outside the norm in this area" and "unfortunately, heavy drinking puts not just the drinkers, but the people around them at risk for injuries and even death.

County Executive Falk shows extraordinary political courage in her direct and candid approach to Wisconsin's alcohol environment. Her appraisal of Wisconsin's destructive relationship with alcohol, extensive research on the topic and thoughtful proposals reflect concerns that many of us share. Her initial proposal recognizes the importance of addressing the growing problem of childhood drinking, the burden alcohol places on the judicial and health care system and the need to keep impaired drivers off the roads.

The enormous cost of alcohol misuse in Wisconsin continues to rise. Unlike other states, Wisconsin has not changed the way we sell, serve and view alcohol. We all shoulder the law enforcement, medical, treatment and social cost of our failure to act. We encourage you to emulate County Executive Falk's courage in tackling this problem head on.

Momentum in Wisconsin is building at the community, county and state level to take immediate action to reduce and prevent abusive alcohol consumption and its consequences, and to create a culture where alcohol abuse is not acceptable.

We are including a copy of a recently released epidemiological report, *Epidemiological Profile on Alcohol and Other Drug Use, 2008*. This publication, showing county specific data, may be helpful as you discuss this issue with key stakeholders. The new addition of county level data on both consumption and consequence patterns/trends in this report can help with the creation of discussion points and give leverage to priorities.

If you have questions or would like additional information about how the alcohol environment in your county can be positively influenced please contact the Wisconsin Clearinghouse for Prevention Resources at (800) 248-9244.

<http://www.scaoda.state.wi.us/>

Diversity Committee Meeting Minutes
Thursday, August 7th, 2008

Moraine Park Technical College
235 N. National Ave.
Fond du Lac, WI. 54936
Room E141

Attendees:

1. Michael Waupoose, Chairperson
2. Sandy Hardie
3. Denise Johnson
4. Gail Kinney
5. Dino Arestegui
6. Harold Gates – teleconference
7. Steven Dakai – teleconference

Unexcused Members:

1. James Crawford
2. Angela McAlister
3. Jerry Kaye
4. Fredricka Decoteau
5. Alvita Berlinger
6. FayeAnn White

State Staff:

Mary Raina Zwadzich –Staff Person

Diversity Committee Meeting Minutes

I. Call to order

Mr. Michael Waupoose called the Diversity Committee Meeting to order at 1:15 PM. He asked the Committee members and guests to introduce themselves and welcomed the new Committee member, Dino Arestegui.

Dino introduced himself to the Committee as a resident of Milwaukee who is currently working at the United Community Center. His interests are in culture diversity and folklore. He has advised indigenous people from Bolivia and Peru about alcohol and drugs issues. Michael once again expressed his happiness that Dino reached out and showed interest in joining the Committee.

II. SCAODA – Diversity Webpage Feedback

Michael opened up the topic for discussion requesting feedback about any changes, ideas or other edits the Committee would like submitted to the Bureau. Denise stated the alcohol and drug information seemed confusing and should be separated from the Council's

homepage. She also reported that she was happy the Diversity Committee has a webpage. Michael requested the Cultural Competency Definition be changed. Currently, the old definition is on the webpage and he reported this was not the definition the Committee and Council passed. Michael read the definition to the Committee for approval and Mary Raina Zwadzich agreed to pass on the change to Jerry Livings who is in charge of the webpage. Sandy Hardy and Harold Gates both agreed having the webpage is a great addition and really helps communicate what the Committee has achieved and the State's commitment to the Committee's projects.

The discussion amongst members continued about having all the Committees under the State Council on Alcohol and Other Drug Abuse (SCAODA) discuss cultural competency and diversity. Michael explained how he hasn't heard much or had many discussions with the Planning and Funding Committee and the Prevention Committee. Harold Gates would like the Committees to assess where they are at in terms of cultural diversity and hold every Committee accountable for their activities and promises surrounding diversity and cultural competency.

Michael informed the Committee in the near future SCAODA's Chairpersons will have meetings to discuss motions and updates from each other's Committees. This will help to make recommendations or edits on future motions and keep everyone in the feedback loop as to what is going on out in the field. This new process will help encourage the Chairpersons to take responsibility and ensure all new motions and actions will have cultural diversity interwoven into the plans to be culturally competent. Each Committee has a logic model workplan and the Diversity Committee should create the expectation that every SCAODA Committees' workplans should have diversity addressed. Another idea was diversity should be present in Committees' agendas forcing them to ask themselves important questions surrounding this issue (ex. "How did we address diversity today?").

Steve Dakai requested the CLAS Standards Implementation Tips be on the SCAODA website so each Committee could look through the tips and start to assess what they are doing in each area and see how they could improve. Denise would also like to add links to resources and research like how the WIPHL group has information on their website about cultural competency. Michael agreed and said any helpful links should be identified and added to the website as informational resources.

III. Approval of the Meeting Minutes

Dino asked to correct the spelling of his name for future publications; so instead of Dyno it is spelled Dino. Denise told Michael that she could not contact with the individual she was supposed to from the last meeting and requested Michael to ask Gail to make contact. Denise was also not present at the last meeting and requested this change be made. There was also a typo about the time of the last meeting; so instead of one o'clock to three o'clock it should be corrected to eleven o'clock to three o'clock. After these corrections and edits are amended, the motion carried unanimously to approve the last meeting minutes.

IV. ADA Workgroup Survey – Denise

Denise handed out the latest version of the new survey. The changes were made previously were a typo and the language in the final paragraph. Another typo was found on the latest version in the first introduction paragraph in which dear needs to be switched to deaf.

Denise requested the Committee review the document for any changes, suggestions or edits. The Committee realized there was no indication that this document was created by a member of the Diversity Committee and thought that this should be included on the survey and educational sheet with Denise's contact information. The last question on the survey might be a place where the individual could leave their contact information so Denise could make the initial contact and follow-up. Another question raised was how to disseminate the survey and the Committee believed there are two options; first, to either mail out and/or hand the survey out at future conference trainings, and secondly have it on the website and email the link. There should also be a link on the survey so the individual can access the survey electronically and type in the answers. Denise will send the survey to Michael to add logo. Michael believed it would be a good idea to create a cover letter for the survey with Denise's biography and contact information sheets.

The Committee would like to have this completed and approved at the September meeting so distribution could happen in September, October and November of 2008. This would be in time for the Bureau's conference and the Recovery conference. It could also be disseminated by Wisconsin Association on Alcohol and Other Drug Abuse (WAAODA) by mail or have it on their webpage as a link. Wisconsin Alcohol and Drug Treatment Providers Association, Inc. (WADTPA) may also help in disseminating the survey. A task the Committee could complete in passing out the survey would be to identify all the state certified Alcohol and Other Drug (AODA) programs and have it emailed out. Raina Zwadzich briefly discussed what it would entail for an online survey to be created and deployed from the Bureau's server. The question was raised about how to help in the reduction of duplicate replies. The data from the survey would like to be collected by October.

V. Finalize Diversity Workplan

Steven Dakai reminded the Committee he would like the changes from the last meeting minutes to be included in finalizing the workplan. He recommended eliminating the youth references from the workplan since it has moved to the Prevention Committee's tasks. Denise said she is working on the ADA workplan and incorporating the survey work into it.

The Cultural Competency portion of the workplan was developed by Steve and Michael requested Steve to discuss the activities. Steve thought an activity for agencies and programs to do is to assess where they are with the CLAS Standards Assessment and review the Implementation Tips online. The Committee reviewed the handout, "Culturally and Linguistically Appropriate Services Assessment" by Acumentra Health. Steve was wondering

if they could get permission to use the tool and add in contact information and add a logo to reflect Wisconsin's information. Harold believed he had found the assessment but in a generic form and said he would search for the document and pass it onto Michael. Harold thought that if these tools were to come from the State and the Committee it would come across more powerful and Quality Assurance would legitimize the document. Michael voiced concern that it could also possibly cause fear among agencies when there is an introduction of a new document from the government. In eliminating any possible fear the Committee could create a brief introduction of the purpose of the assessment, a summary of the results, and a way to follow up after the assessment is completed. Gail K. would like to make sure the assessment be passed out to the "frontline" workers and not the just the administrators to capture a complete picture. It would be helpful if this assessment tool was on the internet so individuals taking the assessment could click on the Implementation Tips for examples and clarify any uncertainties. It could help the individual taking the assessment to figure out the statement and see what they are currently doing and what they could improve on in the near future. Gail K. and Raina Z. said they would both look into what is possible in creating an online survey.

Denise pointed out that she felt the assessment had a lot of written portions which excludes the deaf and hard of hearing culture and would like to create an opportunity for this group to participate.

Commitments/Approvals:

Gail K. commented she uses a textbook in her class that has assumption questions about race and culturally competency which she would like to share with the Committee.

The Committee also requested a member to contact the identified people on the Aumentra Assessment tool to request how they calculated their findings. Gail K. made a motion to move forward and the motion was unanimously approved.

A vote for approval to endorse the assessment tools from 7/10 meeting minutes. The following assessment tools were agreed to be put on the website as links: the WIPHL tool, the Portland State tool and the WIPHL Word document. Harold G. seconded the motion, and the motion was carried unanimously.

Gail N. is to send out Sample Measures of Cultural Competency from Georgetown. Michael believed that he was sent this document and would like the Committee to review the document.

Announcements:

- Independence First website has a great AODA PowerPoint presentation. Please review so it can be added to the Diversity webpage.
- The next SCAODA meeting is September 12
- Wingtip, Nicotine Dependence and Substance Abuse Treatment training, Sept. 4
- Tribal Conference, will be staffing the Open Forum, Oct. 28-30

- 6th Annual National Conference on Quality Healthcare for Diverse Population in Minneapolis, Sept. 21-24

Harold made a motion to adjourn at 2:51 pm and the motion was carried unanimously.

Jim Doyle
Governor



State of Wisconsin

State Council on Alcohol and Other Drug Abuse
1 West Wilson Street, P.O. Box 7851
Madison, Wisconsin 53707-7851

Sen. Carol Roessler
Chairperson

Linda Mayfield
Vice-Chairperson

Mark Seidl, WCHSA
Secretary

**INTERVENTION AND TREATMENT COMMITTEE
MEETING MINUTES**

Tuesday, August 12th, 2008

10:30 am – 3:00 pm

Department of Corrections
Region 1 Offices (Ground Floor)
3099 E. Washington Avenue
Madison, WI

Committee members present: Norman Briggs, Linda Preysz, Michael Waupoose, Dan Nowak, Sarah Kate Johnson – BPTR staff, Greg Levenick – Staff to State Council on Alcohol and Other Drug Abuse

Excused members: Dave Macmaster, Renee Chyba, Marcia Larson

Guests: Tami Bahr (phone), Susan Endres – BPTR staff

Call to order: Meeting called to order by Chairperson Linda Preysz.

Minutes Reviewed: July minutes were reviewed, and there was a request to double check the data listed for Substance Abuse Counselors and Supervisors. Committee members requested the following additional information:

- 1) The number of Substance Abuse Counselors in Training (SAC-IT).
- 2) The number of certified SACs.
- 3) The number of licensed Mental Health Providers with a specialty certificate.
- 4) The number of professionals in number 4) above compared to the number of licensed Mental Health Providers who hold a Substance Abuse Certificate.
- 5) The racial breakdown of these categories, if possible.

In addition, the SCAODA meeting will be held on Friday, September 12th, not September 5th, and the ITC meeting is on Tuesday, August 12th. Motion to approve the minutes was made by Michael Waupoose, and it was seconded by Norman Briggs.

Mr. Waupoose also noted that the diversity statement on the SCAODA web site is an incorrect version of the statement.

Update on Child and Youth Subcommittee: Susan Endres and Tami Bahr provided an update on recent activities including outreach to parents. Jill Gomez from Arbor House has been identified as the committee co-chair.

Tobacco-WINTIP Update: Dave Macmaster was unable to attend this meeting.

Discussion of the Intoxicated Driver Program (IDP) membership and selection: Greg Levenick provided an overview of the history of the IDP Subcommittee (refer to attached IDP Subcommittee documents), and the group discussed the process for IDP assessments and treatment.

Specific recommendations to the documents describing the IDP Subcommittee included:

1. Mission Statement
 - At the end of line 3, add “expansion and sustainability of” in front of program so it will read, “To make recommendations for improvements to the expansion and sustainability of the program...”

- At the end of line 4, change “recidivism” to “occurrences.”
2. Representation (Membership)
The IDP Subcommittee should consist of representatives from the following groups or agencies:
- WCHSA
 - IDP Coordinator, Clinical Supervisor, or Assessor
 - ITC Member
 - Provider
 - Law Enforcement or DOT
 - UW Resource Center on Impaired Driving
 - Insurance Representative or Insurance Commissioner’s Office staff
 - Court system

The goal is to convene the IDP Subcommittee by the end of September.

Discussion of annual workforce reports from the Department of Regulation and Licensing (DRL):

This item was postponed.

Update on the letter to Governor for workforce education at all Wisconsin Higher Education groups:

The group discussed the content of the letter which raised concerns about the lack of curriculum for Substance Abuse Treatment Providers in the University of Wisconsin (UW) system. The letter urged increased access to curriculum regarding this topic at specific UW locations so that students earning Master’s Degrees can get a specialty certification in AODA treatment. Coral (last name?) took the letter to Governor Doyle, who is requesting the Board of Regents to take action regarding this request.

Review of Strategic Plan Status: At the July ITC meeting, members discussed women’s treatment services and increased access to gender-specific treatment. Sue Gadacz was invited to attend this meeting but was unable to present. It was suggested that ITC coordinate with Joyce O’Donnell and the Diversity, Planning, and Funding Committee to identify and apply for grants to expand female-specific services. Greg Levenick mentioned that the Department of Health Services has funding to support female-specific services. The group had questions about what qualifies as “female-specific programming” under the 10 percent set-aside. Sue and Cheryl Lofton will be invited to an upcoming meeting to present information about the definition and array of gender-specific services and Comprehensive Community Services (CCS).

Miscellaneous Reports and Discussion: There was discussion about the recommendation at the SCAODA meeting that five additional seats be added to the full committee specifically for providers. Norman Briggs recommended that ITC vote on a recommendation that representatives from three special interest groups – the Wisconsin Association on Alcohol and Other Drug Abuse (WAAODA), Wisconsin Alcohol and Drug Treatment Providers Association (WADTPA), and the Wisconsin Association of Alcohol and Drug Abuse Counselors (WAADAC) - have seats on the SCAODA.

Dan stated that he has seen a shortage of qualified clinical supervisors and professionals to provide the required initial 30 hours of training since the Department of Regulation and Licensing (DRL) assumed licensing responsibilities. A question was raised regarding how it is decided that an individual is qualified to provide the initial 30 hours of required training.

Determine Priorities of issues/tasks for next meetings: Sue Gadacz and Cheryl Lofton will be asked to present about women’s services and CCS.

Adjourn: The meeting adjourned at 2:00 pm.

Next meeting: Friday, September 12th, the full SCAODA Committee is meeting from 9:30 am – 12:30 pm at the American Family Insurance Training Center. The next ITC Committee meeting is scheduled for Tuesday, October 14th.



Jim Doyle
Governor

Mark Seidl, WCHSA
Chairperson

State of Wisconsin

Linda Mayfield
Vice-Chairperson

State Council on Alcohol and Other Drug Abuse

1 West Wilson Street, P.O. Box 7851
Madison, Wisconsin 53707-7851

Scott Stokes
Secretary

**INTERVENTION AND TREATMENT COMMITTEE
MEETING MINUTES**

Tuesday, October 15th, 2008

10:30 a.m. – 1:30 p.m.

Department of Corrections
Region 1 Offices (Ground Floor)
3099 E. Washington Avenue
Madison, WI

Committee members present: Tami Bahr, Norman Briggs, Renee Chyba, Dave MacMaster, Deb Marino, Dan Nowak, Linda Preysz, Sarah Kate Johnson – Bureau of Prevention, Treatment and Recovery (BPTR) staff

Excused members: Marcia Larson, Michael Waupoose

Call to order: The meeting was called to order at 10:35 a.m. by Chairperson Linda Preysz.

Minutes Reviewed: August minutes were reviewed. Edits to the minutes included: 1) in the attendance section, remove Mark Stroschal, Scott Stokes, and Francine Feinberg and 2) in the Miscellaneous Reports and Discussion section, change Prevention to Providers, Alcoholism to Alcohol, adding Counselors after Drug Abuse, and changing the acronym to WAADAC. Norman motioned to approve the minutes with the recommended changes; Renee and Dan seconded the motion. All were in favor; minutes were approved.

Update about Child, Youth and Families Treatment Subcommittee: Tami Bahr provided an update about the work of this subcommittee, which includes: the formation of a strategic plan, establishment of goals, initiation of research about policies and legislation affecting children and families, examination of state and non-state funded treatment, and identification of issues to present to SCAODA. This subcommittee is open to suggestions and comments regarding their work and will be holding a listening session at the Bureau conference to discuss the topics identified in the strategic plan. Refer to the Child, Youth and Families Treatment Subcommittee Update document for more information.

Discussion of IDP Subcommittee: Members reviewed and recommended edits to the Intoxicated Driver Program (IDP) Subcommittee draft documents. Norman suggested that the IDP Subcommittee report to both the Intervention and Treatment and Planning and Funding Committees due to the significant funding need for IDP services. Linda offered to have a conversation with Joyce O'Donnell from the Planning and Funding Committee and Michael Waupoose from the Diversity Committee to discuss coordination of both the IDP Subcommittee and ITC work generally. Norman motioned to table discussion about communication and reporting of the work of the IDP Subcommittee until the November ITC meeting to allow Linda to have discussions with the other committee chairs. This motion was seconded by Renee.

Update about Women's Treatment Services: Linda attended the most recent Planning and Funding Committee meeting at which Sue Gadacz from BPTR reported that there is no new or additional funding for women's services; any increased funding will need to come from outside of the Department of Health Services (DHS). Linda attended the meeting to determine if there was any action ITC could take or assist with to increase funding for women's services. ITC members expressed commitment to support any grant applications or other efforts to identify funding for women's-specific treatment.

WiNTIP Updates: Dave MacMaster reported that the Wisconsin Nicotine Treatment Integration Project (WiNTIP) has received funding for a second year. The annual plan for WiNTIP is due December 31, 2008, and Dave is interested in presenting information at the December SCAODA meeting about WiNTIP's 2008 activities. WiNTIP is the first program in the country to integrate nicotine treatment and mental health treatment. Now that funding is assured for the upcoming year, WiNTIP is focusing on their strategic plans and will be meeting with stakeholders to solicit input.

DRL Data re: Substance Abuse Professionals: Committee members discussed the information received from Jeff Scanlin in the Department of Regulation and Licensing and agreed that there is additional information that they want in order to get a more accurate understanding of how many professionals with which specific licensure status are providing substance abuse services. Kate will contact Jeff to invite him to the November meeting to discuss this issue further. Refer to the email dated August 25, 2008 for additional information.

Update re: Screening Pregnant Women for Substance Abuse Disorders: Linda provided a copy of the minutes from the August meeting of a workgroup of representatives from the Department of Children and Families and Department of Health Services that is examining the issue of screening pregnant women for substance abuse and child abuse and neglect reporting. Some clinics participating in the Screening, Brief Intervention, and Referral for Treatment (SBIRT) program are reading a disclaimer to their female clients notifying them that the data that is being gathered could be used to report a woman to Child Protective Services (CPS) which is resulting in some women not participating in the program and possibly not getting the help they need for them or their unborn child. The workgroup was planning to solicit an interpretation from the Attorney General regarding the issue of disclosure and reporting.

Miscellaneous Items: Committee members discussed the motion that was passed at the last SCAODA meeting to add five new members. Some ITC members thought that three of the five seats should be specifically designated for representatives of WAAODA, WADTPA, and WAADAC. Norman motioned that ITC recommend to SCAODA that three of the five new SCAODA seats be designated for representatives from these three statewide organizations. Dave seconded the motion, and the motion passed.

Meeting adjourned at 1:20 p.m.

Children and Youth SCAODA Subcommittee September 23, 2008

Present: Jill Gamez, Tami Bahr, Judy Adrian, Carol Lobes, Mike Kemp, Flo Hilliard, Judy Kirkwood, Cynthia Green, Joe Kuehn, Jim Webb, John Frederick, Michael Witkovski

Staff: Susan Endres and Jamie McCarville

Absent: Cleon Suggs, Yevette Hittle, Jerry Koepfel, Scott Caldwell, Hugh Davis, Peggy Spiewak, Jennifer Witkowski, Kimeko Hagen

Minutes were approved with one correction. Mike Kemp should be listed as present.

Updates: Judy Kirkwood received an award from MADD at their conference. The MADD focus is on car controls and they seemed less receptive to treatment. Only members of MADD are allowed to attend the conference.

Web cast for pupil services staff November 7th.

SCAODA Report: Tami Bahr attended the last SCAODA meeting September 12, 2008. She shared that many issues related to children were discussed at the SCAODA meeting and there is a lack of knowledge on adolescent issues by meeting participants. Our committee needs to be there to give the SCAODA members direction. SCAODA letters to the Governor and University Chancellors were sent on issues including binge drinking, need for counselors specifically training in Adolescent Development, and OWI were discussed. SCAODA goals were distributed for the discussion for committee goals. SCAODA web site is <http://www.scaoda.state.wi.us/> The next SCAODA meeting is December 5th, 2008. SCAODA has requested Flo Hilliard to address the Council on developmental approaches.

Strategic Plan: Discussion was led by Carol Lobes and the topics from the last meeting were organized into a Grid (attached to these minutes). Committee members were instructed to pick the top two or three issues as the major focus for the committee for the next year. Smaller projects members could do on their own. Developing a specific list of policy recommendations was suggested, including truancy issues, and increasing the beer tax to pay for adolescent treatment.

Suggestions for other sub-committees were also mentioned including alcohol compliance checks. This should be referred to the Prevention Committee for follow up.

To do list-

- Send people the link for list serves including: Leadership To Keep Children Alcohol Free Foundation [weekly@alcoholfreechildren.net]
- Develop a press kit for newspapers
- Are other states more focused on prevention, treatment, and recovery than Wisconsin? Which are model states? Ask staff for comparative treatment research from states with similar demographics to Wisconsin.

- Develop committee press packet that are age specific. The packet should answer questions on what is treatment, continuum of care and continuity of care. Organize presentation principles around spectrum of barriers.
- Press packet development for counselors to speak in school settings.
- Policy information.
- Flo Hilliard presentation to SCAODA on gender, adolescence and treatment and explain what we understand. Refer to adolescents and Monitoring the Future Survey. In 4th grade children are getting addicted.
- Tami Bahr will invite Lou Oppor to hear more about prevention.
- Confirm Michael Waupoose's attendance from the SCAODA Diversity Committee to discuss cultural competency issues.
- The committee will consider choosing a topic for public input and holding hearings around the state.
- Project fresh light will keep the committee informed regarding the adolescent framework, as well as, future opportunities for implementation of evidenced based practice.

Next year Projections: Project Fresh light to deem state responsible treatment framework. Hold hearings around the state. Gap analysis needed

Next committee meeting is December 5th. SCAODA meeting 9:30-12:30 and 1:30-3:30 pm this subcommittee in the afternoon at American Family Insurance HQ, 6000 American Parkway, Madison.

SCAODA Children and Youth Sub Committee Work plan

Situation: Need for Adolescent Substance Abuse Treatment and Recovery Services

Priorities: Parenting skills, development, brief motivational interviewing, outcome evaluation tool, Crisis/urgent treatment services, gender specific strategies, Multi-county strategies, trauma education/treatment, truancy tracking/intervention, report center, evidenced-based strategies, trauma education/treatment.

INPUTS	Outputs		Outcomes		
	Activities	Participants	Short Term (1-6 months)	Medium (6 months 1.5 years)	Long Range (1-2 years)
Research and Data review	Policy Recommendations		Develop letter to ITC committee on policy recommendations		
	Training Brief Motivational Interviewing		Promote training opportunities		
Technical Assistance	Develop traveling Workshop of Information		Parent Support	Improve Parent Skills	
	Develop peer specialists for parenting groups' network		Support Peer Specialist training		
	Develop parenting groups' network		Develop social network tools		
	School psychologists need to give parents clear statements on what to do.		Develop policy recommendations		
	Connect Crisis to parent support		Service coordination		
	Increase excise tax		Promote SCAODA recommendation on Beer tax		
	Training on gender specific strategies		Promote existing opportunities		
	Outcome Evaluation Tool		Promote outcome training opportunities		
	Multi-County strategies		Support Cross-system Collaboration		
	Promote Trauma Education/treatment		Develop Policy Recommendation		
	Promote parity legislation		Promote family driven recovery		
Assumptions 1. 2. 3.			External Factors 1. 2. 3. 12/1/2008		

WiNTiP 2008

Wisconsin Nicotine Treatment Integration Project

Funded by Division of Public Health Tobacco Prevention and Control
Coordinated by UW-Center for Tobacco Research and Intervention

Project Report to SCAODA/ITC

12/05/08

- 1) WINTIP 2008 confirmed the suspected barriers to integrating nicotine dependence treatment into Wisconsin's AODA and mental health services were perceived to be accurate by our WINTIP stakeholder partners.
- 2) There is little opposition to the need for nicotine integration in the mental health and substance abuse populations when the facts of the vulnerability, mortality and morbidity are revealed.
- 3) "How to do" nicotine treatment integration is a major concern of stakeholders.
- 4) Other state agencies responsible for addiction services are willing to partner with Wisconsin in the search for effective nicotine integration policies and methods. (Single State Agencies Survey)
- 5) WINTIP obtained specific recommendations from New York, New Jersey, Massachusetts, Connecticut and our St. Joseph Hospital model program for implementing a nicotine treatment integration plan for Wisconsin AODA services. (Key Informant Interviews)
- 6) WINTIP successfully partnered with the Tobacco Cessation Leadership Network (TCLN) to present a Bringing Everybody Along (BEA) integration training in Madison for AODA and mental health practitioners and managers. (September, 2008)
- 7) WINTIP successfully recruited partners from tobacco, AODA, mental health and government that committed to participate in the WINTIP planning process. (April, 2008)
- 8) WINTIP created and launched an informational website at: **www.wisconsinwintip.com**
- 9) WINTIP compiled an email address distribution list for informing stakeholders of website features and education.

- 10) WINTIP created 6 WINTIP posters for awareness and education available for internet distribution.
- 11) WINTIP played an active role in the Association for the Treatment of Tobacco Use and Dependence's Subcommittee on Mental Health and Substance Abuse (ATTUD) submitting the first article on nicotine integration in the newsletter, Co-occurring Corner. WINTIP participated in the 2009 National Conference on Tobacco or Health planning and will participate in conference presentations and activities.
- 12) WINTIP presented a 6 hour professional training on evidence-based nicotine treatment for AODA counselors at the Wisconsin Association for Alcohol and Other Drug Abuse conference in Madison (WAADAC) – May, 2008)
- 13) WINTIP provided progress updates at all scheduled meetings of the Governors State Council on Alcohol and Other Drug Abuse (SCAODA - quarterly meetings), SCAODA Intervention and Treatment Committee, Wisconsin Alcohol and Other Drug Abuse Association (WADTPA), Wisconsin Addiction Counselors Association (WAADAC), Division of Public Health Tobacco Prevention and Control – Treating Tobacco Dependence team (TTD) and Disparities team.
- 14) WINTIP presented integration trainings, presentations and displays at the UW-Center for Tobacco Research and Intervention's Days of Learning at West Allis, Eau Claire and Rhinelander and the Division of Mental Health and Substance Abuse's state conference in Wisconsin Dells.
- 15) WINTIP completed a state survey seeking mental health and substance abuse providers input and feedback. (October, 2008)
- 16) WINTIP scheduled listening sessions with consumer focus groups for their input.
- 17) WINTIP developed a manual recording learning's and accomplishments in the 2008 planning year.
- 18) WINTIP 2009 will be funded by the Division of Public Health to continue WINTIP's planning and implementation development.

Submitted by:

David "Mac" Macmaster, CSAC, PTTS
WINTIP Managing Consultant
Member: SCAODA/ITC

19) WINTIP website: www.wisconsinwintip.com

STATE COUNCIL ON ALCOHOL & OTHER DRUG ABUSE
Planning and Funding Committee Meeting Minutes
August 28, 2008
ARC Center for Women and Children
Madison, WI

MEMBERS PRESENT: Joyce O'Donnell, Sally Tess, Duncan Shroul, Emanuel Scarbrough

EXCUSED: Francine Feinberg, Deb Lieber, Susan Crowley, Karen Kinsey, Gary Sumnicht, William McCulley

GUESTS: Norm Briggs, Florence Hilliard, Sue Gadacz, Linda Preysz

STAFF: Lori Ludwig

- I. Call to Order – Joyce O'Donnell:
Joyce O'Donnell called the meeting to order at 10:15 A.M.
- II. Review of May 15, 2008 Meeting Minutes – Joyce O'Donnell:
Norm Briggs moved acceptance of the minutes of May 15, 2008. Sally Tess seconded the motion. The motion passed unanimously.
- III. Travel Reimbursement updates—Lori Ludwig: Lori Ludwig reviewed the changes in the mileage reimbursement rate. Handouts were distributed with the information.
- IV. Bureau Conference October 22-23—Coverage Public Forum--Lori Ludwig: Ms. Ludwig reviewed the dates of the Bureau conference. As yet, there is no one volunteering to Chair the Public Forum to be held Wednesday the 22, at 4:45 to 5:45. Joyce O'Donnell asked the group for volunteers. There were no volunteers. Joyce O'Donnell will be out of town. Lori Ludwig agreed to take the issue up at the next SCAODA staff meeting.
- V. Highlights from the Boys and Girls at Risk Conference—Florence Hilliard: Florence Hilliard from UW-Madison, presented a power point with information taken from a conference on "Boys and Girls at Risk" held recently. The Power Point was titled, "Towards a more Gender Responsive Approach to Adolescent Prevention and Treatment." The presentation yielded the following information: There are brain differences between developing male and female brains. No one is studying this phenomenon around the country except Wisconsin. However Medical science tells us that it is very important to account for sex differences in research. Male/female differences are not due to environmental variations alone. There is a large effect caused by the sex hormones. From the start, the environment is acting on differently wired brains. In particular the hormones effect how the brain processes emotive responses to the environment. For example, oxytocin is a hormone present in both males and females. However in stressful situations there is an increase of oxytocin in females and a decrease

in males. Females tend to seek connection while males isolate, shutdown and become angry. The male brain is less quick to integrate “feeling” with verbal parts of the brain quickly—they are more geared toward a flight or fight response. Male brains seem to be more drawn to activities that engage the brain’s spatial relationship processes like video games. Video games speak to boys, not girls.

Male and female brains mature in different sequences and timelines for different areas. Regarding the brain and negative emotions, the female brain is about 1 and ½ years ahead of boys. In girls, a larger fraction of brain activity moves to the cerebral cortex. In boys, brain activity stays in the amygdala, a non-verbal and physical area of the brain. This may account for boys being more likely to not report sex abuse. Under conditions of sexual trauma, the male brain asks, “Why didn’t I stop it?” It is a personal power issue. Boys are more likely to externalize it and act out, which leads to punishment in our society. Girls on the other hand, ask, “Was it my fault?” It is a personal identity issue. Girls are more likely to internalize the experience and harm themselves, leading to treatment.

Flo Hilliard reported on two workshops; one convened for Boys at Risk; and one convened for Girls at Risk. The Boys at Risk Workshop. The major conclusions for boys were: that there is an absence of male role models for many at risk boys; that culturally the attitudes toward typical male behavior of disruption, defiance, immaturity, and aggression needs to be shifted; physicality does not inherently mean “bad.” Males resolve emotional pain differently. The Girls at Risk Workshop. The major conclusions for girls were: Girls at risk over-identify with the female role model (mother) and non-healthy behaviors for seeking connection with males; sexuality as an identity is internalized at a very young age.

Recommendations:

- We need to develop a body of knowledge and educate professionals;
- We need to explore models of prevention and treatment that are gender sensitive
- We need to implement standards of care for adolescent treatment that is gender responsive.

Manny Scarbrough pointed out that ethnicity could be a significant factor effecting behavior in addition to brain gender differences. Flo Hilliard pointed out that some things hold up cross culturally, for example when processing negative emotions, the male brain is always 1 ½ years behind the female brain. However, studying the interaction between cultural differences, sex differences and brain development is on the cutting edge of the research that needs to be done.

Duncan ShROUT asked Flo Hilliard what she would like from the Planning and Funding Committee. Flo Hilliard agreed to send something. Duncan ShROUT will advance Flo Hilliards priorities to SCAODA when Ms. Hilliard gets the information to Joyce O’Donnell or Lori Ludwig. Ms. Hilliard agreed to narrow down what she wanted from this group. She agreed to pull together the research and propose an initiative. Duncan

Shrout explained that what Planning and Funding needs is a proposal for a series of activities aimed at state policy makers saying, “Pay attention to this!” Norm Briggs pointed out that the Adolescent Sub-Committee of the Intervention and Treatment Committee (ITC) of SCAODA has recently formed. The role of the schools was considered. The scarcity of adolescent treatment services was pointed out. Joyce O’Donnell asked if there was another “Boys and Girls At Risk” conference planned. Flo Hilliard indicated that there was. It is being planned for June 16 and 17, 2009.

- VI. Women’s Capacity Study—Sue Gadacz: Sue Gadacz is the contract manager for women’s specialized services for the Wisconsin Department of Health Services. She began her presentation by thanking Norm Briggs for pulling together the Women’s Capacity Study. She explained that the Women’s-specific approach is an effective approach with significant positive outcomes. One reason for this is that quality assurance is embedded in the programs. The approach was initiated in the Division of Mental Health and Substance Abuse Services because a needs assessment conducted by the Division identified women and women with children treatment services as a high priority. Outcome data based on program performance has been collected since 2000. A point of clarification was that the programs providing women’s specialized services are funded through set-aside grants from the Substance Abuse Block Grant (SABG). The federal law sets standards for women’s treatment. Treatment requires extra funding to address ancillary services. There are only 4 residential, women’s specific treatment facilities in Wisconsin. None are in the Northern or Western parts of the state. Ms. Gadacz reported that there is the argument that if men got additional resources, their outcomes would be greater; men could benefit from wraparound levels; all services are as important as AODA treatment; families and clients are equal partners. For example: in the area of employment—employment assists individuals to achieve long term sobriety. Sue Gadacz asked, “What does the future look like?” Workforce development is a critical issue. Planning and Funding needs to consider workforce issues with the SABG. Right now, she continued, the largest amount of SABG goes to men with OWI’s. Look at who do we treat, who is a priority for treatment, people get served because they are very sick. The very sick get the majority of services. Referrals come from jails and hospitals. Treatment providers are at a point where all funding sources need to be accessed. Ninety percent (90%) of women who need treatment are eligible for Medicaid. Agencies need to be certified for Medicaid. She pointed out that urban and rural grants never have had an increase. Salary, benefits continue to increase while the funds going into training are decreasing. Basically, with static amounts of funding, the numbers of persons served will be decreasing. At the federal level there is no issuance of new grants. We are in a holding pattern. There is the Second Chance Act with the Department of Corrections. One component is family treatment. DHS would have to collaborate with other systems in order to tap into other system’s funding. The Department of Children and Families will be bidding out \$5,000,000 in TANF grant funding in 2010. Sue Gadacz summed up that we do a great job of getting people clean and sober but it is hard to keep em that way. We need to focus on recovery. What programs are successful? 1) Coordination of care within communities 2) comprehensive community services (CCS) for the Medicaid-eligible (Women with children). In DHS there is a focus on healthcare for all. In 2009, in addition to women with children, there will be a new benefit for childless adults; an

insurance option for substance abuse services—still within caps for substance abuse services—there is no parity now. Medicaid still does not pay for residential treatment; only out-patient treatment and intensive out-patient treatment. The County has to be the applicant for CCS.

Sue Gadacz suggested that the future of the SABG called for a formal recommendation from Planning and Funding to the Bureau of Prevention Treatment and Recovery to re-bid grants and contracts that are older than 10 years; making them performance-based grants.

Sue Gadacz summarized how to increase funding for treatment:

- Collaborate with others to find new dollars for applicants
- Cut or reduce current reallocations
- Access to health care plans
- Treatment providers must get certified by Medicaid
- Apply for CCS—focus on recovery

Workforce development is a big issue that needs resources. Gender responsive treatment also takes training and funding.

Sally Tess made the following motion: All SABG contracts have to adhere to performance-based standards such as NOMS and other quality measures such as STAR-SI. Duncan Shroul seconded the motion. The motion passed unanimously.

Linda Preysz asked if the Department of Health Services has a position. Sue Gadacz responded that the Department is at a critical point right now. It needs to look at treatment based in science and have the capacity to address emerging needs. For example, the Division was able to fund treatment for methamphetamine abuse by pulling two contracts for IV treatment. Norm Briggs made the point to re-bid contracts that are “not working.” In Dane County, everything is re-bid every 5 years. Sue Gadacz added that we need the capacity to move money around to address emerging needs such as heroin and prescription drug abuse.

Manny Scarbrough pointed out that we have learned about sex-differences in the development of the brain. Regarding treatment services: Were they developed knowing what we know now about brain development? Sue Gadacz responded that regarding women’s treatment—it is responsive to the individual’s psychological and relational makeup. It takes into consideration the system of people involved with the person. Joyce O’Donnell emphasized that programs funded by the SABG should be Medicaid-certified. Sue Gadacz added that we should strengthen the relationship between the Division of Mental Health and Substance Abuse Services and the Division of Health Care Financing. **Duncan Shroul made a motion that the Bureau of Prevention Treatment and Recovery should be encouraged to review all existing contracts and re-bid those contracts believed could benefit from competitive bidding. Sally Tess seconded the motion. The motion passed unanimously.**

Manny Scarbrough raised the need for Universal Health Care in order to provide treatment for substance abuse services. Sue Gadacz pointed out that lack of parity is the biggest issue—more so than Universal Health Care. **Duncan Shroul made the following motion: The Bureau of Prevention Treatment and Recovery should encourage each contractee to pursue Medicaid certification of each vendor. Manny Scarbrough seconded the motion. The motion passed unanimously.**

Sue Gadacz added that many systems are involved with the provision of substance abuse services such as Child Welfare and Corrections. We need to catch things earlier with a multi-systems approach. Medicaid will pay if treatment is determined to be “medically necessary.” It takes skilled individuals to write prior authorizations and obtain longer length-of-stays. One has to know how the system works. We have to tap into those additional resources.

Norm Briggs asked for clarification on performance-based measures. He asked if we are talking about NOMS or other measures within the data. Sue Gadacz responded that completion rate is one NOMS—or outcome measure that CSAT requires states to collect. Wisconsin’s completion rate is in the 47-50% range. Improvement measures like those STAR-SI utilizes are performance measures also. Women’s treatment programs that utilize the STAR-SI method get about \$5,000 for data collection. Duncan Shroul asked what were other possibilities in using the data. Sue Gadacz suggested inviting Mike Quirke to a meeting. Joyce O’Donnell asked Linda Preysz if the discussion was helpful. Ms. Preysz agreed that it was.

- VII. Discussion Pending Legislation/Motions/Updates–Lori Ludwig: Ms. Ludwig reviewed a document titled “Legislative Summary and Update,” dated 8-28-08. Ms. Ludwig reported that there is language in the By-laws that specify one of the duties of the Chair is to make sure that motions passed are acted upon: “including that motions passed be acted upon in an orderly and expeditious manner...” She provided the group with copies of letters sent to the Governor, academic administrators at four Wisconsin System schools and legislators chairing appropriate Higher Education Legislative Committees regarding the addition of certified AODA counselor curricula within their institutions; and another letter requesting an audit of the IDP program to the Legislative Audit Committee Co-Chairs. Duncan Shroul felt strongly that regarding the workforce shortage of qualified AODA counselors that more needs to be done. We need to create a well thought-out strategy to deal with this. Manny Scarbrough brought up the fact that in the past, former drug users decided to be AODA counselors. Now, there is nothing for them. What can we do for this population? Norm Briggs reported that ARC hires MSW’s from UW, but then must provide training for them at ARC. Duncan Shroul asked that this item be brought forward at the next meeting. We need to create options, get help for both clinical and prevention work. Joyce O’Donnell added that we need to discuss who should be at the table. Duncan Shroul suggested that we need a comprehensive approach and perhaps we need SCAODA to request funding to assist in the creation of a document regarding the capacity of Wisconsin to produce AODA counselors. What are other states doing?

- VIII. Rescheduled Planning and Funding Meetings--Group:
- o October 9th meeting changed to October 31
 - o November 18th meeting changed to November 21
- IX. Beer Tax—Joyce O’Donnell: **Joyce O’Donnell plans to ask the Governor to insert in the budget a rise in the tax on beer. There was general agreement.** Joyce requested that staff provide updated data on taxes on beer by each state. Lori Ludwig agreed to locate the information. Ms. O’Donnell announced she will ask Senator Carpenter and Representative Townsend for new legislation regarding the beer tax.
- X. Criminalization of First Offense OWI: **Manny Scarbrough made a motion at SCAODA to oppose criminalizing first offense OWI and support mandatory treatment following the results of the IDP assessment. The motion passed unanimously.**
- XI. Topics for Discussion at Next Meeting: Workforce shortages; Beer tax; Recidivism of 17 year-olds to adult jails (higher than those in juvenile system)
- XII. Adjourn: The meeting adjourned at 2:40 P.M. The next meeting is scheduled for the following:

PLANNING AND FUNDING COMMITTEE MEETING
FRIDAY OCTOBER 31, 2008
10:00 A.M. – 3:00 P.M.
ARC CENTER FOR WOMEN & CHILDREN
1409 EMIL STREET
MADISON, WI
608/283-6426

STATE COUNCIL ON ALCOHOL & OTHER DRUG ABUSE
Planning and Funding Committee Meeting Minutes
October 31, 2008
ARC Center for Women and Children
Madison, WI

MEMBERS PRESENT: Joyce O'Donnell, Sally Tess, Duncan Shroul, Emanuel Scarbrough, William McCulley

EXCUSED: Francine Feinberg, Deb Lieber, Susan Crowley, Karen Kinsey, Gary Sumnicht,

GUESTS: Norm Briggs, Florence Hilliard

STAFF: Lori Ludwig

- I. Call to Order – Joyce O'Donnell:
Joyce O'Donnell called the meeting to order at 10:05 A.M.
- II. Review of August 28, 2008 Meeting Minutes – Joyce O'Donnell:
There were a few corrections: 1) page 3, ninth row from the bottom, change “by” to “while”. Sentence should read: “Salary, benefits continue to increase while the funds going into training are decreasing.” 2) page 6, change “Joyce O'Donnell made a motion...” to “Joyce O'Donnell plans to ask...” regarding asking the Governor for a rise in the tax on beer. 3) Bill McCulley's name should be moved from “Absent” to “Excused.” With those changes, the minutes were approved.
- III. Report on the Governor Appointment and Replacement of Senator Roessler—Lori Ludwig: Lori Ludwig reported that Duncan Shroul has been appointed to the State Council on Alcohol and Other Drug Abuse as a citizen member. There were congratulations and well-wishes all around for Mr. Shroul. Currently the Department of Health Services is working through its Legislative Liaison, Katie Plona, to facilitate the appointment of Senator Roessler's replacement. Katie Plona is currently on leave until mid-November.
- IV. 2009 Meeting Dates--Lori Ludwig: The following dates were selected for 2009, in general they were the third Tuesday of the month:
- January 20
 - February 17
 - April 21
 - May 19
 - August 18
 - October 20
 - November 17

- V. Workforce Shortages—Group Discussion of further actions to be taken: Duncan Shroul pointed out that, in general, there are not enough people for the open Substance Abuse Counselor positions, in many areas around the state, though he hasn't had any problems at his agency, IMPACT INC., in Milwaukee. Mr. Shroul suggested that part of the problem may be that counseling has a life span. It may be that Substance Abuse Counselors want to do other work after ten to fifteen years. Joyce O'Donnell pointed out that the certification requirements have led to a decrease in counselors in the past. Mr. Shroul suggested that we need to look at the issue regarding workforce shortages in the future. Future issues include 1) telephonic counseling—the field is changing in terms of how services are delivered. 2) What do we expect clinical staff to do? Individual, couple, group, assessments, screenings? Norm Briggs felt that it was important to have staff capable of dealing with dually diagnosed disorders—mental health and substance abuse issues. 3) Additional skill sets for dealing with special populations like women and adolescents are important. How do we encourage people to get there?

Mr. Briggs added another challenging issue to the discussion: Reciprocity between states. For example for counties on the border with Minnesota or Iowa, they would like to draw from the Minnesota/Iowa workforce pools. However, Wisconsin's requirements are much higher. This has been a major issue. Ms. O'Donnell suggested that if this is a problem at the Minnesota border, then it is also a problem at the southern border. Mr. Briggs continued that counseling work is increasingly becoming female. Women who are supported by their husbands can do it for less money. With no cost of living increases on state contracts, in order to stay competitive, smaller salaries are offered, even when a Masters degree is expected. On the other hand, Manny Scarbrough pointed out that for others, if an individual has a Masters degree, they need a different salary—they need to earn \$50,000 per year. However, for those who are recovering (in terms of becoming a certified substance abuse counselor), there is a real problem. Mr. Scarbrough pointed out that someone from the Minority Training Program (funded with Substance Abuse Block Grant funds) should be contacted. The funding was used to attract and train 10-15 people. Mr. Shroul indicated that his agency has drawn on the Milwaukee area Technical College—and that has worked out well. However, Mr. Briggs indicated that many others have had trouble finding the training they needed.

Mr. Shroul felt that the problem is more complex than a dwindling workforce. Mr. Briggs agreed. It is a national problem. There is an insufficient number of qualified counselors to meet the demand. Mr. Scarbrough felt that there needs to be scholarships, so individuals can work and go to school at the same time. We need adequate funding to provide incentives for workers to go to school. Mr. Briggs felt that we also need to work to increase opportunities for job placements—part of the certification/licensure requirements, which are currently limited. Mr. Shroul pointed out that if it is a national concern, then it is not just about stringent requirements. Possible solution: Use of the SABG for recruitment and training. We need to do an on-line data analysis to find out what is our position. If the position comes from Planning and Funding, it has more weight. We have a broader purview. Sally Tess asked if DWD has looked at this problem. Norm Briggs reported that yes, they have, and they indicated it is a problem, but it is not a priority there. Ms. Tess reported that DOC has difficulty finding counselors

for its early release programs. If you can't provide the programming, the offenders cannot be released. Mr. Shrout argued that it would take five years for the effect to occur. How is this different from the nurses shortage, asked Ms. Tess. Mr. Scarbrough added, if we can show need, for example the DOC early release program, and counselors at a non-professional level, then we can demonstrate how much money can be saved.

Mr. Shrout asked about the elements of information needed to move forward. Mr. Briggs suggested that the Planning and Funding Committee invite Deb Marino for a presentation. She is the president of Wisconsin Association of Drug and Alcohol Counselors (WADAC). She is also the Director of AODA Services for Green Co. Mr. Shrout also suggested information from people who provide training—academic and technical colleges; what are they seeing, what are the trends. Also, he continued, what is the experience of providers trying to hire AODA counselors, what are they seeing? What have they seen in the last 5 years and what do they anticipate for the next 2-3 years. Mr. Scarbrough would like to know the extent of the problem of hiring culturally diverse staff. Also, we should ask minorities about what their experience is; what are their difficulties. We need someone with an objective view to form the questions. Ms. Tess suggested asking DRL if there is a decrease in the number of certified AODA counselors? The data should be collected and attached to the Governor's budget. Mr. Briggs pointed out that ITC got information from DRL, but was unable to tell how many of the licensed clinical social workers had a substance abuse specialty. Mr. Shrout added that ideally, we would like to link the number of certified substance abuse counselors with the number of people in need. Then we could see what the limits are. We would be in a better position to ask for help. Mr. Briggs recommended speaking with Merrilee Pickett, with the "TRACK" program at UW-Extension. Most people get credit through the "TRACK" program. Mr. Shrout emphasized the need for a 10-40 page report with legislative implications. We need to look at the topic as part of the next strategic plan for the state. He indicated that the workforce issue is one we need to advance. Do we need more discussion or do we need to gather data? Ms. O'Donnell thought that we should discuss this with the other Committees. Mr. Briggs indicated that ITC is looking at this. ITC drafted and sent a signed SCAODA letter to the presidents of colleges in the UW system as well as legislators involved with Committees overseeing higher education in the state. Mr. Shrout felt that this is a problem that sending letters won't solve. He felt that the group needed to look to the Bureau of Prevention Treatment and Recovery for help. **Mr. Shrout made the following motion: The Planning and Funding Committee asks SCAODA to request the Bureau of Prevention Treatment and Recovery to complete an adhoc study analyzing relevant data to address current and future workforce issues pertaining to the recruitment, training and certification of substance abuse counselors. The motion carried unanimously.**

- VI. Recidivism of 17 year olds to adult jails—Manny Scarbrough: Mr. Scarbrough informed the group that he needed to leave early and wished to initiate a discussion on statistics presented in a handout titled "Risk Their Future." The document was prepared by the Wisconsin Council on Children and Families. It reported on a study of the first 1,000

juveniles who were prosecuted beginning January 1, 2001 and followed them up until September 1, 2007. (average follow up period was 6.5 years). Chart 3 indicated that outcomes for 17-year-olds varied depending on their sentences. Deferred prosecution yielded the lowest recidivism rate at 37%; it was the least common disposition, offered to only 5% of offenders. The most frequent sentence, jail, produced the highest recidivism rate at 80%. The study points to racial disparities: “Comparing Caucasians and African American on sentencing reveals a wide disparity. Few African American youth in our sample were given the opportunity for rehabilitation in a community setting; nearly all were sentenced to some sort of incarceration.” (Chart 6)

Mr. Scarbrough reported that he has been doing clinical work in diversion programming. He felt that the youth he works with need contact with males. They come around. They need specialized programs for minorities. Joyce O’Donnell asked Sally Tess if she agreed with that. Ms. Tess replied that the data come from the criminal justice system and DOC.

The report published a finding from the Governor’s Commission on Reducing Racial Disparities in the Wisconsin Justice System: “Consistent with the results of the January, 2008 Legislative Audit report, legislation should be introduced to return jurisdiction of 17-year-olds alleged to have violated state or federal criminal laws to juvenile courts. Current waiver provisions should be maintained.” The report continued with its analysis of DOC data: “Significantly, the recidivism rate for 17-year-olds incarcerated in adult prisons was nearly double that of younger teens treated in the juvenile system, despite the longer follow-up period for the juvenile offenders. The volume of subsequent offenses is higher for 17-year-olds than for any other age group.”

The report concluded: “Trying all 17-year-olds as adults for any crime has been a mistake. We must return 17-year-olds accused of nonviolent crimes to the juvenile justice system so they can get the treatment they need to change behavior and move on to adulthood without the mark of an adult criminal record. The adult system lacks the kind of resources for education and rehabilitation found in juvenile system.”

Ms. O’Donnell asked that Mr. Scarbrough bring the matter to the attention of SCAODA by putting the study on SCAODA’s agenda. Mr. Scarbrough wants the legislators to rescind the policy of putting 17-year-olds in jail. He will ask the analyst of the study, Wendy Henderson, to appear. Mr. Briggs suggested, if possible, Ms. Henderson focus on 17-year-olds with alcohol and drug offenses, if possible.

- VII. Review IDP Audit Request—next steps--Group: Mr. Shrout reported that he contacted the Office of Senator Jim Sullivan to ask if the Joint Legislative Audit Committee would be taking up the audit of the Intoxicated Driver Program. (A letter from SCAODA had previously been sent, requesting the IDP audit.) He was informed that it most likely would not. They receive about 250 requests for audits and act on 2-3. Mr. Shrout indicated that regarding the IDP funds that go to the state and are used by other groups, he was advised to seek a legislative remedy. Ms. O’Donnell suggested that Planning and Funding propose legislation. Mr. Shrout wanted to re-contact Senator Sullivan’s Office

following this meeting to ascertain the official status of the request. Ms. O'Donnell informed the group that the person to put together new legislation on IDP is Mark Seidl. Mr. Shrout added that other Milwaukee legislators might be interested, too. Ms. O'Donnell suggested that Senator Carpenter be given a heads up on this. Mr. Briggs recommended that any legislation should speak to a percentage of the fine that should stay in the County. Ms. O'Donnell added that the surcharge should be indexed to inflation.

- VIII. Follow-up "Boys and Girls At Risk"—Florence Hilliard: Flo Hilliard distributed a paper titled "Need for Gender Sensitive Approaches in Adolescent Treatment." Section one is a literature review and section two contains workgroup conclusions. This report is a product of Project Fresh Light. She reported that she is trying to decide what to take forward to the State Council meeting. She reported that she is applying for funding from the National Institute of Health to do innovative research. Her proposal is to survey Wisconsin adolescent treatment sites and assess the status of programming, in terms of gender-sensitivity. Sally Tess informed the group that one of the goals of the Intervention and Treatment Committee (ITC) is to implement evidence-based services. It would be important to talk to them and develop treatment standards—as they did for women. Lori Ludwig suggested touching base with the Brighter Futures Initiative, Wendy McCarty is the state Coordinator. Other ideas: offer a workshop at next years Bureau conference; and continue to seek "evidence-based" status for programming. Mr. Shrout felt that it was important to work with prevention programs, because currently most prevention programming is not separated for boys and girls. Mr. Briggs indicated that as an evidence-based practice, perhaps there was a role for the Bureau in how to direct this information. He continued that there should be a better way of transforming research findings into practice. He suggested that we need an annual conference just on that; or perhaps Centers of Excellence. Flo Hilliard explained that Susan Endres is planning to use carry-over Project Fresh Light funds to support training on evidence-based models of service delivery to adolescents. There may be a role for gender-sensitive programming. Joyce O'Donnell summed up by informing Ms. Hilliard that the Planning and Funding Committee accepts the report and looks forward to additional developments in this field. Mr. Shrout asked for Ms. Hilliard's next steps. She replied that she is following-up with the NIH grant to do research, and following up with prevention efforts in the state. Mr. Shrout encouraged her to stay in touch. There are new directions in the field. This information would lead to quality programs for boys and girls, each. Mr. Briggs added that in Dane County, the identified service gap is adolescent treatment. Ms. Hilliard agreed to present the information at the next SCAODA meeting.
- IX. Discussion Pending Legislation/Motions/Updates--Lori Ludwig: Ms. Ludwig reported on the motions from the September 12, 2008 SCAODA meeting. The Diversity Committee made the following motion: "In order to establish criteria for new membership and the ability to make an informed recommendation if and when legislators pass the bill to increase SCAODA membership, the Diversity Committee made a motion to establish a "Membership Workgroup" that will review all the SCAODA membership information gathered in the coming months. The criteria and recommendations by this workgroup should be completed by and reported out at the 12-05-08 SCAODA meeting

in order to be ready for the legislative session to be open in January. The workgroup should include representatives from the Nominating Committee and the Committees of SCAODA.” As of 10-31-08 the “Membership Workgroup” is being organized. The e-survey to SCAODA members and participants to identify criteria for the selection of new members is in development. The plan is for distribution of the survey in early November, 2008; and collection and summary of findings by the December 5th meeting. Mr. Briggs reminded the group of the ITC resolution that the current presidents of WAADAC, WAAODA and WADTPA be seated in three of the new member slots. Three of the five new members would be legislatively identified. Mr. Shrout felt that the resolution may face a rocky road and that a genuine discussion is called for. Ms. Tess pointed out that every time the groups change, there would be a new individual on board. Mr. Briggs and Mr. Shrout both volunteered to serve on the “Membership Workgroup.”

Ms. Ludwig reported on the other developments resulting from September 12 SCAODA motions:

Motion: At the September 12, 2008 meeting, Joyce O’Donnell made a motion on behalf of the Planning and Funding Committee that the Bureau of Prevention Treatment and Recovery (BPTR) review and ensure all Substance Abuse Block Grant (SABG) contracts adhere to performance-based standards.

Action: SCAODA staff met with BPTR staff in early October of 2008. BPTR accepts this motion. Establishing measurable outcome goals is important to the Bureau, the Division of Mental Health and Substance Abuse Services and The Department of Health Services. NOMs (National Outcomes Measures) are currently collected from counties but are not a contractual requirement at this time. Some programs report NOMs but others don’t. BPTR needs to set a goal that by the end of 2009, X% of treatment and X% of prevention providers will report NOMs.

Motion: At the September 12, 2008 meeting, Planning and Funding Committee introduced a motion to encourage each BPTR contractee to pursue Medicaid certification of each vendor in order to enable Medicaid certification for reimbursement.

Action: BPTR suggests that the following be explored and implemented as ways to “get the word out” to program providers: 1) Webcast with a Medicaid certified provider on how they did it—how they got certified. 2) website information 3) Workshop at WAAODA conference in the spring 4) Info Memo

Motion: At the September 12, 2008 meeting, Planning and Funding introduced a motion to increase the tax on beer as part of the budget.

Action: We need to follow-up with legislators on any new legislation that may be introduced.

Motion: Planning and Funding introduced a motion to oppose criminalization of first time OWI offenders.

Action: Do we want an organized response to legislation that surely will come before the legislature in January? If so, what?

Joyce O'Donnell indicated that she plans to make a motion to ask that the subject matter of each bill (upon which SCAODA registered an opinion during the 2008 Legislative Session) be re-endorsed and ask the legislators to attach numbers to the bills.

- X. Discussion—Planning and Funding Strategic Plan Goals and Objectives:
Because of the lateness of the hour, there was only time to distribute the “Strategic Framework Work Plan 2006-2010.” Ms. O'Donnell reminded that group that for 2010 a complete evaluation should be undertaken; also Annual reports from each Committee are due in June.

Prior to adjourning, Mr. Briggs asked the Committee to request a report from him on Women's Services.

- XI. Adjourn: The meeting adjourned at 3:00 P.M. The next meeting is scheduled for the following:

PLANNING AND FUNDING COMMITTEE MEETING
FRIDAY NOVEMBER 21, 2008
9:30 A.M. – 2:30 P.M.
ARC CENTER FOR WOMEN & CHILDREN
1409 EMIL STREET
MADISON, WI
608/283-6426

Marin Institute Calls on States with Budget Shortfalls to Follow California in Proposing an Alcohol Tax Increase

Long Overdue Tax Increases Could Ease Budget Deficits in 39 States and Mitigate Alcohol-Related Costs

SAN RAFAEL, CA – Public health advocates are calling on policymakers around the nation to follow the lead of California Governor Arnold Schwarzenegger to help fund ailing state budgets through higher alcohol taxes. On Thursday, Governor Schwarzenegger proposed a nickel a drink tax increase on beer, wine, and distilled spirits to help reduce California's budget shortfall, while providing critical support to the state's programs that reduce alcohol-related problems.

At least 38 other states also face serious budget deficits, totaling more than \$60 billion dollars, according to the Center on Budget and Policy Priorities. "A nickel a drink -- It's the change we need to fix budgets around the nation," said Bruce Lee Livingston, executive director of Marin Institute, the California-based alcohol industry watchdog. "The largest states, such as New York and Florida can avoid cutting essential programs through long-overdue alcohol tax increases," Livingston added. California's proposal accomplishes exactly that.

A nickel per drink increase in New York could raise an additional \$355 million. Florida could add \$430 million to its budget with a similar increase. Some states have not raised alcohol taxes in decades. For example, the last time alcohol taxes were raised in Massachusetts was 1975; while in Arizona alcohol taxes were last raised in 1983.

"Too many states are facing serious budget shortfalls while leaving too much money on the table, said Michele Simon, Marin Institute's research and policy director. "In most of these states, inflation has eroded the real value of alcohol tax revenue. Meanwhile governments continue paying for the rising costs of alcohol-related problems, such as healthcare and criminal justice. The time has come for states to join with California and raise alcohol taxes to reduce these costs."

Representative Terese Berceau's Power Point on the Beer Tax, can be found on her home page:

<http://www.legis.state.wi.us/assembly/asm76/news/>

[Milwaukee Journal Sentinel](#) series, entitled "Wasted in Wisconsin" is still being published.

SCAODA
Legislative /Motions Updates
December 5, 2008

Legislation

SB 375—the “Parity” bill

Motion: On March 7, 2008 at the SCAODA meeting, Scott Stokes made a motion on behalf of the ITC that SCAODA write a letter to Senator Dave Hansen and Representative Sheryl Albers in support of SB 375. Joyce O’Donnell seconded the motion. The motion passed unanimously.

Update: The bill failed to pass prior to the end of the legislative session. On March 11, 2008 Representative Sheryl Albers introduced AB 922, relating to health insurance coverage of nervous and mental disorders, alcoholism, and other drug abuse problems. On 3-21-08 the bill “failed to pass prior to the end of the legislative session”, however fiscal estimates were received on 3-28, 4-14, 4-16 and 5-01.

Update: On October 3, 2008 President Bush signed the Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act of 2008, which will improve access to lifesaving addiction and mental health treatment by eliminating the discriminatory barriers that have kept thousands of Americans with substance use and mental health disorders from receiving the care they need, into law.

AB 474—related to increasing the tax on fermented malt beverages to fund law enforcement grants and alcohol and drug abuse treatment and prevention programs.

Motion: On March 7, 2008 at the SCAODA meeting, Ms. O’Donnell made a motion that the Council support AB 474. Sen. Carpenter reported that the Bill has been referred to the Committee on State Affairs. Minette Lawrence indicated that it has been sitting in that committee since August 2, 2007 and will continue to sit there until the session ends. Michael Waupoose seconded the motion. Senator Carpenter indicated that the motion should include language such as “..support AB 474 and any bill identical to it next legislative session. The motion passed unanimously.

Update: 4-15-08. Legislative Notification Service indicates that the bill failed to pass prior to the end of the legislative session. It will have to be reintroduced next January for follow-up to occur.

AB 54/ SB 116 related to repeat drunken driving offenders and providing a penalty.

Motion: On March 7, 2008 at the SCAODA meeting, Ms. O’Donnell made a motion that the Council support SB 116/AB 54. Senator Carpenter reported at the 3-7-08 SCAODA meeting that he believed that these bills passed both houses the previous day. Ms. O’Donnell withdrew the motion.

Update: 4-15-08. Legislative Notification Services indicates that the Senate bill passed, but the Assembly bill did not. SB116 approved by the Governor on 3-18-2008. 2007 Wisconsin Act 111.

SB 150—related to prohibiting smoking in places of employment, restaurants, taverns, and other indoor areas and providing a penalty.

Motion: Ms. O’Donnell made a motion at the SCAODA meeting of 3-7-08 to support SB 150 and Gary Sumnicht seconded the motion. Senator Carpenter reported that SB 150 has passed out of committee and is sitting waiting to go to the floor. The tavern league is blocking it. The motion passed unanimously.

Update: The Legislative Notification Service indicates that the bill failed to pass prior to the end of the legislative session. It will have to be reintroduced next January for follow-up to occur.

SB 193—related to drunken driving and providing a penalty. This bill is related to a fine based on Blood Alcohol Content, not the number of convictions.

Motion: At the SCAODA meeting on 3-7-08, Greg Levenick expressed concerns because none of the fine money goes to treatment. Mark Seidl agreed. Based on these concerns, Ms. O’Donnell withdrew the motion she made earlier to support the bill and suggested that the Planning and Funding Committee reintroduce the bill at a later date. Mr. Seidl asked to add to the motion the recommendation that the entire surcharge be returned to the Counties. All were in agreement.

Update: 3-21-08: Legislative Notification Service indicates bill failed to pass. It will have to be reintroduced next January for follow-up to occur.

3-21-08. SB 27—relating to releasing persons arrested for certain offenses related to operating a vehicle while intoxicated

Motion: Ms. O'Donnell made a motion to support the bill at the 3-7-08 SCAODA meeting. Katie Plona reported at the same meeting that the bill has been sent back to Committee and there has been no action on it. Ms. O'Donnell suggested adding language to the motion, "...or similar legislation next session." Senator Carpenter agreed to get this Bill to hearing. All were in favor, the motion passed.

Update: The bill failed to pass prior to the end of the legislative session. It will have to be reintroduced next January for follow-up to occur.

AB 498—related to costs of administering tests for intoxication.

Motion: Ms. O'Donnell made a motion that the council support AB 498 at the 3-7-08 SCAODA meeting. The motion passed unanimously.

Update: 4-15-08: Legislative Notification Service indicates the bill failed to get out of Committee. The bill failed to pass prior to the end of the legislative session. It will have to be reintroduced next January for follow-up to occur.

SB 246/AB 463—the "Vendorship" bill

Update: SB 246/AB 463 failed to pass prior to the end of the legislative session. It will have to be reintroduced next January for follow-up to occur.

Motions

Motion: The Planning and Funding Committee recommended at the March 7, 2008 SCAODA meeting that the number of statutory members expand to 27; an additional five new members added to represent the substance abuse prevention and treatment field, both culturally and geographically, in the state of Wisconsin. The motion passed unanimously.

Action: Motion brought to meeting of the By-laws workgroup 4-21-08 on behalf of the Planning and Funding Committee to try to attach it to the By-laws. It was determined at that meeting that it cannot be part of the By-laws as it is not part of the statutes, yet. Suggestion was made by BMHSAS staff to draft a letter on behalf of SCAODA to the Governor apprising him of the intent to introduce legislation.

Update: 5-6-08: Letter signed by Sen. Roessler and sent to Governor Doyle.

Update 2: At the June 5, 2008 meeting, Senator Roessler suggested a friendly amendment to amend out "Prevention and Treatment" fields. Gary Sumnicht seconded the motion and the motion with the amendment was approved unanimously. Further, as a result of Committee concerns, BPTR staff have initiated plans to implement an e-survey, to assess SCAODA participants views on who the Council currently represents and who participants feel the Council should include in order to be more representative of the citizens of Wisconsin.

Motion: At the March 7, 2008 SCAODA meeting, Joyce O'Donnell moved that SCAODA oppose the proposed cuts in President Bush's FY 2009 budget plan, which slashes \$198 million from SAMHSA and calls for the elimination of the Recovery Support Programs and the STOP Underage Drinking Program. The motion passed unanimously.

Action: Letters to Governor Doyle, Senators Feingold and Kohl, and the whole Wisconsin Congressional delegation were drafted, signed by Sen. Roessler and sent 4-25-08.

Update: Response from Tammy Baldwin received 5-20-08

Motion: At the March 7, 2008 SCAODA meeting, Mark Seidl made a motion that the State Council endorse the "National Standards for Culturally and Linguistically Appropriate Services" (CLAS Standards), to enable organizations to move forward in their models of care. The Motion passed unanimously.

Action: In order to increase access to the CLAS Standards, the document was posted to SCAODA's website. Additionally, SCAODA staff have scheduled a meeting with the Department of Health and Family Service's Affirmative Action Officer in order to discuss how to put the CLAS standards into motion.

Update: As of August 2008 two meetings with staff from the Affirmative Action Office have occurred. Plans include training for DMHSAS contract managers to assess the presence and completeness of providers' required Affirmative Action Plans. BPTR staff continue meetings with BPTR management to arrange for such trainings.

Motion: At the June 5, 2008 SCAODA meeting, Mark Seidl moved that the State Council send a letter requesting an audit of the Intoxicated Driver Program, and have the Vice-Chair sign it. The Motion passed unanimously.

Action: On August 15, 2008 a letter signed by Acting Chairperson Linda Mayfield, was sent to Senator Jim Sullivan and Representative Suzanne Jeskewitz, Co-Chairs of the Legislative Audit Committee requesting an audit of the Intoxicated Driver Program.

Motion: At the June 5, 2008 SCAODA meeting, Renee Chyba made a motion that “SCAODA should send a letter to the Governor requesting support to increase the number of State of Wisconsin Adult Teaching Institutions (i.e. Technical colleges, and Universities) to offer Substance Abuse Counseling competencies classes and concentrations in order to address the current and predicted future workforce shortage in this area. Recommend a focus to have this type of curriculum offered at UW-Madison, UW-Platteville, UW-Milwaukee, and UW-Oshkosh in particular given these institutions offer a variety of master’s degree programs for a variety of counseling and psychotherapy but do not include/or offer as an option the basic Substance Abuse Counseling educational requirements.” Senator Roessler suggested also sending the letter to the President of the Board of Regents; Chancellors of the Colleges mentioned; and to the Chairs of the Higher Education Committees of both houses. She suggested adding need and factual data to the letters and added the President of the UW System, the Deans of the schools mentioned and the Chancellor of UW-Madison to the list of recipients. Joyce O’Donnell suggested cc’ing all parties to the letter. **The motion passed unanimously.**

Action: On July 18, 2008, a letter signed by Acting Chairperson, Linda Mayfield, requesting the addition of substance abuse counseling curricula to Wisconsin System colleges and universities was sent to the aforementioned.

Update: On July 28, 2008, Coral Butson, Policy Advisor to Governor Doyle responded. “I have spoken to my supervisor regarding the SCAODA letter that Linda Mayfield sent to the Governor’s office on behalf of SCAODA. We have sent SCAODA’s recommendations on curriculum development to the proper officials with the UW System. They will evaluate the recommendations and act in a manner they see fit. Thank you again for your letter and recommendations.”

Recommendation: On June 5, 2008, Senator Roessler strongly suggested that, regarding the “Beer Tax, SCAODA needs to ask the Governor to do this right now. Ask him to increase the tax on beer in his budget.” Representative Townsend suggested asking that proceeds go to treatment agencies, instead of the general fund.

Action: On August 15, 2008, a letter signed by Acting Chairperson, Linda Mayfield, was sent to Governor Doyle, asking him to increase the tax on beer as part of his budget and requested that the proceeds from the proposed tax are allocated to Counties, the Office of Justice Assistance and the Department of Health Services to fund prevention and treatment programs.

Motion: At the September 12, 2008 SCAODA meeting, the Diversity Committee made the following motion: “In order to establish criteria for new membership and the ability to make an informed recommendation if and when legislators pass the bill to increase SCAODA membership, the Diversity Committee made a motion to establish a “Membership Workgroup” that will review all the SCAODA membership information gathered in the coming months. The criteria and recommendations by this workgroups should be completed by and reported out at the 12-05-08 SCAODA meeting in order to be ready for the legislative session to be open in January. The workgroup should include representatives from the Nominating Committee and the Committees of SCAODA.” The motion passed unanimously.

Action: As of 10-31-08 the Chairperson for the “Membership Workgroup” is being sought. The e-survey to SCAODA members and participants is in development. The plan is for distribution of the survey in early November, 2008; and collection and summary of findings by the December 5th meeting.

Action: During the week of November 13-20, an e-survey was sent out to SCAODA participants. Preliminary findings were presented to the “Membership Workgroup” which met on November 21st. Joyce O’Donnell agreed to Chair the meeting.

Motion: At the September 12, 2008 SCAODA meeting, Joyce O’Donnell made a motion on behalf of the Planning and Funding Committee that the Bureau of Prevention Treatment and Recovery (BPTR) review and ensure all Substance Abuse Block Grant (SABG) contracts adhere to performance-based standards. The motion passed unanimously.

Action: SCAODA staff met with BPTR staff in early October of 2008. BPTR accepts this motion. Establishing measurable outcome goals is important to the Bureau, the Division of Mental Health and Substance Abuse Services and The Department of Health Services. NOMs (National Outcomes Measures) are currently collected from

counties and are a contractual requirement at this time. Although most programs report NOMs, others don't. BPTR needs to set a goal that by the end of 2009, X% of treatment and X% of prevention providers will report NOMs.

Action: November 19, 2008, BPTR has identified a list of contracted mental health and substance abuse agencies who currently do not report NOMS. Also identified among those not reporting NOMs, are those agencies that are currently generating NOMs, and are able to report them, but have not been doing so. Planning is on-going regarding NOMs reporting for these targeted agencies.

Motion: At the September 12, 2008 meeting, Planning and Funding Committee introduced a motion to encourage each BPTR contractee to pursue Medicaid certification of each vendor in order to enable Medicaid certification for reimbursement. The motion passed unanimously.

Action: BPTR suggested that the following be explored and implemented as ways to "get the word out" to program providers: 1) Webcast with a Medicaid certified provider on how they did it—how they got certified. 2) website information 3) Workshop at WAAODA conference in the spring 4) Info Memo

Action: BPTR provided conference time at the October Bureau conference to provide information on Medicaid certification, but no one signed up. Therefore the informational session wasn't held. At the Bureau conference, another session, the session on STAR-SI, presented information on Medicaid reimbursement. Plans are for a Webcast on Medicaid certification in the near future.

Motion: At the September 12, 2008 meeting, Planning and Funding introduced a motion to increase the tax on beer as part of the budget. Coral Butson abstained from the vote. Eileen Mallow voted "present." All others voted "aye." The motion passed.

Action: Follow-up on any new legislation that may be introduced.

Action: At the October 31st Planning and Funding meeting, Joyce O'Donnell indicated that she plans to make a motion to ask that the subject matter of each bill (upon which SCAODA registered an opinion during the 2008 Legislative session) be re-endorsed and ask the legislators to attach numbers to the bills.

Motion: At the September 12, 2008 SCAODA meeting, Planning and Funding introduced a motion to oppose criminalization of first time OWI offenders and support mandatory treatment if appropriate following the results of the IDP assessment.

Action: Motion passed at the September 12, 2008 SCAODA meeting.

Website for Legislative Notification Service:

<http://notify.legis.state.wi.us/Home.aspx>

Talking points: SCAODA Presentation on Gender and Adolescents
Friday, December 5, 2008 Meeting

- Currently, there is no recognized framework statewide or nationally for gender sensitive approaches to AODA treatment of adolescents.
- Gender sensitivity, however, is recognized as a fundamental framework for female adult treatment of AODA both in Wisconsin and nationwide.
- Gender differences are extremely significant during adolescence in brain maturation, brain processing and identity development for males and females.
- Research shows significant gender differences between adolescent males and females in emotional-cognitive processing, biological responses to risk taking, and processes for moving through adolescence to adulthood.
- Gender differences for at risk adolescent males and females are apparent for behavioral expression of trauma, seeking connection and identity formation.
- Development of gender sensitive approaches for treating both adolescent males and females is crucial for improving outcomes.
- Wisconsin can become the national leader for this movement by supporting work that addresses this important issue.

Inside the Biology and Culture of Gender: Science and Theory for Improving Services

Flo Hilliard
University of Wisconsin-Madison
Gender Studies Project

- **2001 Report: National Academy of Sciences**
- “Sex, that is being male or female, is an important basic human variable that should be considered when designing and analyzing studies in all areas and at all levels of biomedical and health-related research”

Cultural And Biological Together

Not Considering Both Creates:

- *Cultural* confusion (and tension):
- **Good:**
- Feminist Movement: Equal Rights
- **Not so Good:**
- Environment determines all behavior
- Equality – overtime-----→Sameness

Gender Role Confusion

- When equality becomes “sameness”
- Co-ed High School Wrestling



Brain, Sex & Gender

- Just environmental?
- Scientists say No!
 - It's also the effects of sex hormones on brain organization and processing.
 - From the start, environment is acting on differently wired brains in males and females.

The Science of Neuroscience

- New technology –
 - Functional: PET, MRI
 - We now can take a “snapshot” of the living brain:
 - as it thinks
 - as it “feels” emotions

Brain Development and Sex Differences

1. Structural differences
2. Processing differences
3. Developmental timeline differences



Brain Development and Sex Differences

- Estrogen (Female hormones).
- Testosterone (Male hormones).
- Starts in utero. Continues after birth.



New Research

- Not just hormones:
 - 2004 study:
 - looked at *protein* expression from X and Y chromosomes
 - Diff. so dramatic were able to correctly identify sex of brain tissue 100% of time by two gene expressions
(Neuropsychopharmacology, 2004)

What does research tell us?

- Hormones and gene expression =
 - Male/Female brains organized differently.
 - Creates differences in certain task, cognitive-emotive areas etc.
- Basic Processing Difference:
 - Compartmental vrs. Global

What Does Research Tell Us

- Physical differences
- Processing differences
 - Can create some “hard wiring” and processing of emotive responses to environment.



Sex Differences and Stress

- Oxytocin
 - “Bonding hormone” “Tend and Befriend”
 - Present in males – greater in females
 - Spikes during/after childbirth
 - Regulates bonding motivation, mood, behavior

Gender and Stress

- UCLA research (and others) showed:
- During stressful times:
 - ↑ In Females
 - ↓ In Males

Gender and Stress

- Behaviors associated with -
- Rise in Oxytocin:
 - Connection seeking; bonding
- Fall in Oxytocin:
 - Isolation, emotional shutdown and/or anger
- Add in:
 - Male brain less rapid integration of emotive and verbal parts of brain – Especially during Adolescence




Brain and Maturation

- Developmental
 - Male and Female Brain:
 - Mature in different sequences & timelines
(Gur R, Turetsky B, J of Neuroscience 1999)
- Functional
 - Brain and negative emotions:
 - Adolescent female brain – activity moves to cerebral cortex
 - Adolescent male brain – activity stays in amygdala
(Kilgore W, NeuroReport 2001; Schneider W, Human Brain Mapping, 2000)

More Sex Differences in Amygdala

Amygdala: long term memory associated with negative emotional events.

Males: sig. Stronger activity in right hemisphere amygdala

Females: Stronger activity in left hemisphere amygdala
(Shors, 1998; Cahill 2001; Cahill 2004)

Memory Research

Females retain more detailed memories with stronger emotional context.

Males retain more global memory of event with less emotional context.



(Seidnitz, Diener, 1998 Canli, 2002)

Evolution and Brain Differences

- **Male and Female Brain Regulation**
- Female brain: organized towards integration of verbal/ emotive processing
- Male brain: organized towards spatial/mechanical, factual processing, physicality

Gender, Brain and Risk Taking

- Potential Threat or Risky Behavior (stress response)
 - Males – mostly **Sympathetic NS**
 - Sharpening senses
 - “Thrill” response (fight or flight)
 - Females – mostly **Para Sympathetic NS**
 - Nauseated and/or dizzy response (Evans J, J of Applied Physiology 2001)

Translate to Male Behavior

- ▣ **U.S. and worldwide studies show boys more likely to engage in physically risky activities.**

(Archives of Pediatrics and Adolescent Medicine, 2002)

Risky/dangerous activity triggers “flight or fight” that boys find enjoyable.

Risk/danger seen as fun “for its own sake” rather than to achieve goal.



Gender Differences

- **Behavior**
 - Girls **willing to take risks**
 - If means justifies the end
 - Boys **seek out risk taking behavior**
 - Simply for the “rush”
- **Evolutionary Theory**



Gender and Aggression

- Elementary school boys fight 20 times as often as girls do.
 - Likely to enhance relationship
- Elementary girls fight less often, more likely to use words.
 - Usually ends relationship
 - (Lever, 1976 & '78; Simmons, 2002)
- The **same** holds true for primates!
 - (Blume, 1998)



Male Culture

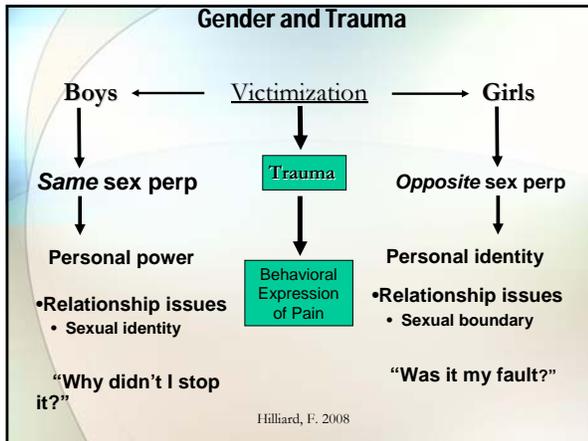
- Aggression -----> Violence
 - (physicality -----> destructiveness)
- Last 25 years:
 - Natural male behaviors are discouraged
 - Focus in schools and general culture
 - All aggression and physicality – bad
 - Competitive games at recess discouraged



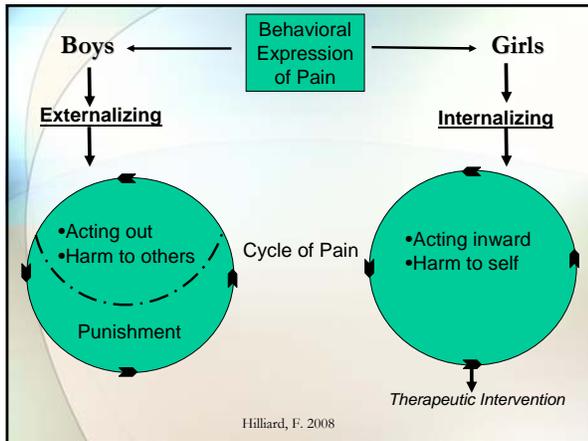
Males and Trauma

- Male sexual abuse/assault:
 - Contradicts “definition of masculinity”
Can't see themselves as victims
 - Rather as failures for not being able to do something to stop it.
 - Little “emotional language” to help healing





- ### Gender and Trauma
- 1998 Study = 7,000 children
 - “would never tell anyone about the abuse”
 - 48% of boys
 - 29% of girls
- (Kipnis A. Bad Boys, 1999)



- ### Project Fresh Light
-
- Increasing effectiveness for adolescent substance abuse treatment in Wisconsin
- CSAT Adolescent Treatment Coordination grant
 - Improve assessment and evidence based practice of adolescent treatment in Wisconsin
 - Through the Bureau of Mental Health and Substances Abuse Services – Dept. of Health and Family Services

- ### Boys and Girls At Risk Workgroups
- **Boys At Risk - 2006-2007**
 - Ten men; One woman
 - Rural, Urban, African American, Native American, Latino, Caucasian
 - **Girls At Risk - 2007-2008**
 - All female
 - Similar makeup to Boys At Risk
 - **Groups represented: 100+ years (and) Thousands of Hours**
 Direct work with young males females at risk
 Families, Communities, Other Systems

- ### Boys At Risk Workgroup
- Major Conclusions:
 - **Absence of Male Role Models**
 - Biological father absent or unknown
 - No substitute male role model to teach moral development into manhood
 - Young boys take on “man of the house” role – -creates confusion of boundaries and age appropriate behavior
 - Decline of respect for females at all levels
 - Morality based on consequences
 - Media hyper-masculinity becomes emulated role

Boys At Risk Workgroup

Major Conclusions:

Macro social:

- Cultural Attitudes: Normal Male Development
 - Considered Unhealthy or labeled Pathological
- Language:
 - Pushy, disruptive, aggressive, defiant, oppositional, violent
- No neutral/positive words for physical behaviors that are non-violent

Male Culture

❖ During this time:

- Rise in violence
- Rise in extremes of masculine definition
- Rise in drop out rates in education
- Fall in enrollment and completion rates of higher education
- Dramatic rise in ADD and ADHD diagnoses
- Rise in other ED special education enrollments



Girls At Risk Workgroup

- Major Conclusions:
- Dysfunctional Enmeshment with mother
 - Patterns of behavior reflect mothers
 - Unhealthy ways of seeking connection and relationship
 - Drug/alcohol use
- Sexuality Becomes Primary Identifier for sense of connection, control and self esteem

Paradigm for females

- Self in Relation Model
 - Standard guiding framework for Treatment of females in Wisconsin.
- Adolescent Females
 - Break enmeshment with mother staying in relational model.
 - Therapies for developing sense of stable self unrelated to sexuality.

New Paradigm for Boys

• Action Philosophy

Developmental & Therapeutic Framework

- Defining through "doing"
- Active behavior in young males:
 - Creates connections
 - Forms and creates deep relationships
 - Sense of pleasure
 - Avenue for learning about self and others
 - Deepens life experience

Action Philosophy

- Young males spend (need) a good deal of time developing sense of self through doing and action rather than talking and in-depth conversation
- Powerful sense of self is seen through powerful action. Young males will seek out what they see as powerful actions or "rites of passage" into manhood
- If not guided in this action, will seek out powerful negative actions (gangs, violence) for connection and passage into manhood

Recommendations

- Develop methods and models for adolescent males to resolve emotional conflict (other than or in combination with talk therapies).
- Change language to reflect basic respect for young males and their development.
- Create activities for young males to help guide them into adulthood.
- Educate single mothers of at risk boys on parenting techniques for boys development.

Wisconsin Can Become the Leader

Possible First Steps:

- Survey successful programs serving males and females separately:
 - Identifying gender sensitive approaches currently being used.
- Framework and skill sets:
 - Develop a working guide to gender sensitive approaches for males and females.
- Parenting Guide:
 - Develop a parent guide and coaching program that is gender sensitive. (administered as part of teen's treatment)

SCAODA Public Forum
Bureau of Prevention Treatment and Recovery Conference
Wisconsin Dells
October 22, 2008

SCAODA Chairperson, Mark Seidl convened the Public Forum at 4:45 p.m. with a panel consisting of himself, Dr. Steve Dakai from the Diversity Committee, and Mr. Norm Briggs from the Intervention and Treatment Committee. Bureau staff in attendance were Joyce Allen, Kate Johnson and Lori Ludwig. There were 10 individuals who signed in. Together they represented public and private substance abuse providers, out-patient, in-patient (hospital), and residential facilities. A representative from the Division of Quality Assurance was also present.

Impact of Title 19 referrals from across the state:

Two individuals spoke to the recent influx of persons on Medicaid being referred to St. Josephs Hospital in Marshfield and St Josephs hospital in Chippewa Falls from all over the state, including Dane County. They felt that it was because of the increase in persons served under the state's Badger Care. They have high medical needs (MRIs etc.) and are being admitted to acute care beds. None of the Badger Care programs provide residential treatment.

Lack of treatment alternatives for adolescents:

- Two individuals felt that the state should look at the lack of higher levels of care for adolescents, specifically, residential and in-patient beds. The speakers felt that if treatment occurs at younger ages, then there would be a reduction in the number of adults requiring treatment. Currently, adolescents in need of residential or in-patient treatment are being sent out of state. It used to be that Tellurian had an adolescent treatment unit. What happened? St. Joseph's Hospital in Chippewa Falls recently shut down their adolescent unit for chronic under-utilization. There is an issue of medical necessity. Mark Seidl indicated that in order to admit persons less than age 18 to CBRFs, changes in the administrative rules would have to occur. Changes would need to occur in HFS 75 and HFS 83.

Administrative rules restrict practice:

One person testified that once there is a "Substance Abuse" diagnosis, mental health therapists' practice is restricted. She continued that most people have a mental health diagnosis in conjunction with a substance abuse disorder and yet the scope of practice is limited for mental health therapists. Joyce Allen explained that the Department of Regulation and Licensing (DRL) is responsible for defining the scope of practice, however, if we can identify a specific Administrative Rule provision that is problematic, we'll take a look at it. Mark Seidl identified HFS 35 and HFS 75 and the DRL as relevant to the issue.

Wisconsin and Minnesota AODA treatment compared:

- One participant testified that since he has moved to Wisconsin from Minnesota, he has observed that Wisconsin does not treat its OWI offenders as if they are addicts. He felt that a significant portion of the Drunk Driving system doesn't provide the full continuum of care as Minnesota does. Only for some is treatment authorized.
- There has been "no margin" in treatment, that is, the volume of adolescent AODA treatment clients has been so low that the provision of service is too expensive to justify the cost and providers cannot justify continuing that service.
- In Minnesota, providers are required to provide the complete continuum of services. Counties contribute much more in terms of funding.
- Another participant added that we need the ability to sort out all the rules. We need a Wisconsin civics and funding course 101

Funding for Substance Abuse Services:

- We need an excise tax on alcohol. 80% of the alcohol is consumed by 20% of the people. This appears to be a taboo subject in Wisconsin. We need a new funding stream. All of the current funding systems are drying up. The Medicaid issue is pushing us.
- Another participant pointed out that Badger Care is not covering AOD treatment, except for detox and medications. Badger Care is not covering childless adults, either.
- Mark Seidl informed the group that the state is looking at funding streams for counties. There is a mental health and substance abuse study going on. Joyce Allen added that the results of the study will be available in about one year. A participant pointed out that costs are being transferred to hospital emergency rooms. Joyce Allen explained that the perspective of the study is: what is the future of county government in this system. If we've given them the responsibility, have we given them the funds? A participant pointed out that we need data on people seeking services. How do we bridge the gap between county and state funding to private providers. Is there a way to look at the entire system? It seems like there is a lack of ability to coordinate the entire system. Joyce Allen confirmed that it is very difficult to look at the entire system. Data systems differ. Data systems are fragmented and exist within county organizations or hospitals.
- A participant felt that we need to identify the themes which we know we have to prepare for in the future: workforce; the indigent; excise taxes and regulatory practices. We need to look at how larger systems are impacted and where there is an opportunity for change.

Payment for Residential Care Services

Norm Briggs reported that in the 1980's there used to be licenses for residential care for children. Kate Johnson pointed out that now there are RCCs (Residential Care Centers) for kids. Norm Briggs asked if there was funding available for RCCs through Medicaid. Joyce Allen responded that, in general, not. A state can draw down some funding for certain services. Another way is through Comprehensive Community Services programs. They are able to build in some substance abuse rehabilitation services including some residential treatment costs, if the CCS county decides to include it in their CCS benefits plan and they will then be able to draw down the federal share of Medicaid for those services. Counties must provide the non-federal share. CCSs are also a way to pay for integrated treatment of mental health or substance abuse disorders for a range of services. There are no exclusions for adolescents. It is for everyone. The benefit could be used to support residential services. She continued, the Psycho-Social rehabilitation benefit requires people to meet certain eligibility requirements which are built into the functional screen, which is used to define the medical necessity for CCS. One participant indicated that it wouldn't happen in his County. Mark Seidl indicated that it is a 60/40 split. His County has to come up with the money. Joyce Allen indicated that the study will look at that.

Mark Seidl summarized the issues presented: 1) Residential treatment for adolescents; 2) funding streams and impacts; 3) taxes on alcoholic beverages.



Jim Doyle
Governor

Mark Seidl, WCHSA
Chairperson

State of Wisconsin

State Council on Alcohol and Other Drug Abuse

1 West Wilson Street, P.O. Box 7851
Madison, Wisconsin 53707-7851

Linda Mayfield
Vice-Chairperson

Scott Stokes
Secretary

Public Forum

Meeting Minutes

Wednesday, October 29, 2008, 6:00-7:30pm

16th Annual Healing Ourselves Conference

Ho-Chunk Hotel and Convention Center

S3214 Highway 12

Baraboo, WI 53913

Present:

Members: Michael Waupoose, Steve Dakai-Diversity Committee Member
Staff: Sarah Kate Johnson, Gail Nahwahquaw
Participants: See attached Sign-In Sheets (X3)

Introduction/Welcome:

Michael Waupoose welcomed the participants and introduced himself as a member of SCAODA, chairperson of the Diversity Committee and Menominee tribal member.

Steve Dakai introduced himself as treatment provider, clinical supervisor at the Maehnowesekiyah Wellness Center and Diversity Committee member and Gail Nahwahquaw introduced herself as Division of Mental Health and Substance Abuse Services, Bureau of Prevention Treatment and Recovery staff .

Michael shared that SCAODA is an advisory committee to the Governor, made up of one each House Majority and Minority representatives, multi state department representation and respective division representation, AODA Prevention and Treatment providers and community representatives. The council advises the governor on issues involving and related to AODA policies, legislation, perceived gaps and ect. The purpose of the public forum is to learn from respective tribal perspective what the issues, concerns challenges and what's working to help SCAODA target resources on a more fully informed basis and that this is the first time SCAODA has hosted a public forum at a tribally specific conference/event. Michael presented the participants with the general outline of the current SCAODA workplan listing SCAODA Mission and Vision statements.

Issue 1: American RedCross-Homeless Outreach Nursing Center-Protective Payee and Domestic Violence Services Advocate for women, men and families (agency not mentioned). Services for the homeless overall are inadequate, but she recognizes that more and more American Indian are in need of such services in urban settings. The providers who offer any AODA services are not actively engaging the homeless community and the services are limited. Most homeless people she encounters struggle with either mental health or AODA issues or both. There is a lack of culturally appropriate services and providers within tribally specific service centers. Participant has often witnessed when homeless or others needing AODA treatment services go to these

<http://www.scaoda.state.wi.us/>

providers, a large majority never return because they don't see someone who looks like them in the agency which may translate the client thinking there will be a lack of understanding of "where I'm coming from". In addition, she noted a lack of services for Native Americans who live off reservation and related issues, such as not wanting their families who live on the reservation to know about their struggles or treatment. Grant funding is limited and keeping appropriate services operating in the urban areas is noticeably decreasing.

Issue 2: The SCAODA handout listing a general workplan for the council is viewed as too vague. If SCAODA is not creating measurable outcomes, how do they know when they've achieved any of the "vague" goals listed? Suggest using data such as current waiting lists (how long) and where is this occurring? Two questions that can help to place funding where there is greatest need.

Issue 3: The reliance on Evidence Based Practices(EBP) for funding, is a challenge for tribal communities.

Discussion-The EBP description is a misnomer; for one thing, the EBP have not been tried in tribal communities or programs most often. Most ceremonial practices for many Native American seeking AODA treatment services are not listed as EBP. The Venture Program was experienced as coming close to a native appropriate program- but it was oriented to tribes in the Southwest, not Midwestern or Wisconsin tribes. This provider still experienced frustration in having to "fit-in" to this model, felt like it takes away from the natural caregiver role defined by tribal societal standards long established. She said that Indian people know their treatment needs and should have the ability to use methods that they know work, rather than being required or encouraged to use EBP. No one model can meet the needs of people in all 11 tribes in the state.

Issue 4: Various state policies and criteria are prohibitive to consumer-provider relationship alliance building.

Discussion- Tribal member's unable to sustain or maintain work in the substance abuse recovery/treatment field. Tribal members feel the disconnection of providers who work in their communities but are not from the community. Other policy or provider treatment requirements include the amount of paperwork that is necessary for billing purposes, is too much and it doesn't contribute to relationship building. Is there a way that paperwork can be minimized?

One participant attended the Minority Counselor Training Institute (MCTI), but felt like this program was not as inclusive as it could be. All the trainers were African American and it was stated that the program did not take the opportunity to invite trainers with expertise in working with Native Americans. When this shortcoming was brought forth to the MCTI program staff it was felt that the comments/observations were dismissed. One person through MCTI was assigned to work with the entire Western side of the state, and there was too much area and need for one person to cover. The participant has not encouraged other tribal members to enroll in the program as a result.

Issue 5: Intervention, inpatient services and funding limitations.

Discussion-What are the resources available to a treatment experienced individual who may have reached the limit of service thru their insurance? Participant is aware that the tribes get limited funds from the Indian Health Services and that the state gives the county (Washburn Co) funds for AODA treatment services. One concern is that when tribal members are referred to services thru county agencies the tribe loses that "referral", and the person is registered in the county

system. Tribes are not able to demonstrate the need for funding increases when this referral process occurs.

She reported that the treatment need in her community is growing with the younger populations, and, with their limited budget, there are no resources to support people in recovery. There is some (not enough) funding for youth but a lack of funding to support treatment and recovery for the parents. They need help to meet the treatment need in their community – funding, counselors, support.

This access to services extends to family members as well. Which unveils another issue, that of treating the core issue of trauma.

Why aren't gaming dollars going back to communities with the greatest need?

Issue 6: Insurance companies and the Division of Licensing and Regulation (DRL) differ in the credential status of counselors for billing purposes.

Discussion- This participant was denied as (primary) provider by the insurance company because she did not hold a masters degree, but DRL does not require this level of training/education to provide treatment services as a counselor. So reimbursement by this standard is limited, because tribal agencies don't have enough staff credentialed at level required by insurance companies. Other DRL issues experienced are the mandated processes that are not supported often by financial means but also with training.

Tribes need their own licensing boards. Also a special task force to help ensure licensing requirements/criteria is understandable to tribal agency staff. The language is culturally insensitive on the DRL web-posting of requirements and criteria. The state can do a better job of getting the appropriate tribal representatives involved on boards. Tribal leadership should appoint the representatives so there's a general awareness in the community as to who the contact person is for various boards.

Also a contact list needs to be created listing the tribal service agencies listing appropriate contact person. This is a helpful resource for other tribes, but also for county and urban based agencies working with tribal members.

Issue 7: Treating trauma.

Discussion-Providers are treating the symptoms and not getting to the core issue of trauma. This participant states mental health and AODA providers do not talk or collaborate on treatment for clients with co-occurring disorder. Often providers or treatment programs don't have the necessary training to start working with clients on issues of trauma.

Issue 8- AODA services are needed in general and very helpful.

I accessed Al-a-Non services for the addictions my family members faced. The program was not tribally specific, but when I needed it, it was very helpful for me to have access to this program. I was able to hear from others experiencing similar challenges in their lives and was given the opportunity to "talk" publicly about what I was experiencing. It was through this program that my family member realized their addiction and sought help. An awareness of the current programs and how to access them was what was helpful for me and my family. It didn't need to be tribally specific.

Issue 9-Accurate data

Discussion-This issues ties into the funding issue, data collection is an issue for tribes but also counties. Documentation on death certificates often does not reflect the actual cause of death, i.e., domestic violence, rather the physiological or anatomical cause of death. i.e., blunt force trauma.

Multiple people expressed the challenges and pain that members of their communities are experiencing – two tragedies in one week, domestic violence, issues with younger generations – and that there need to be resources to allow Native communities to develop services locally to address the entire spectrum of treatment through recovery.

There was a recommendation that one of the new SCAODA members should be reserved for a tribal member. The tribes could appoint at least one person as a representative and rotate that position among the 11 tribes.

SCAODA 2009 Meeting Dates

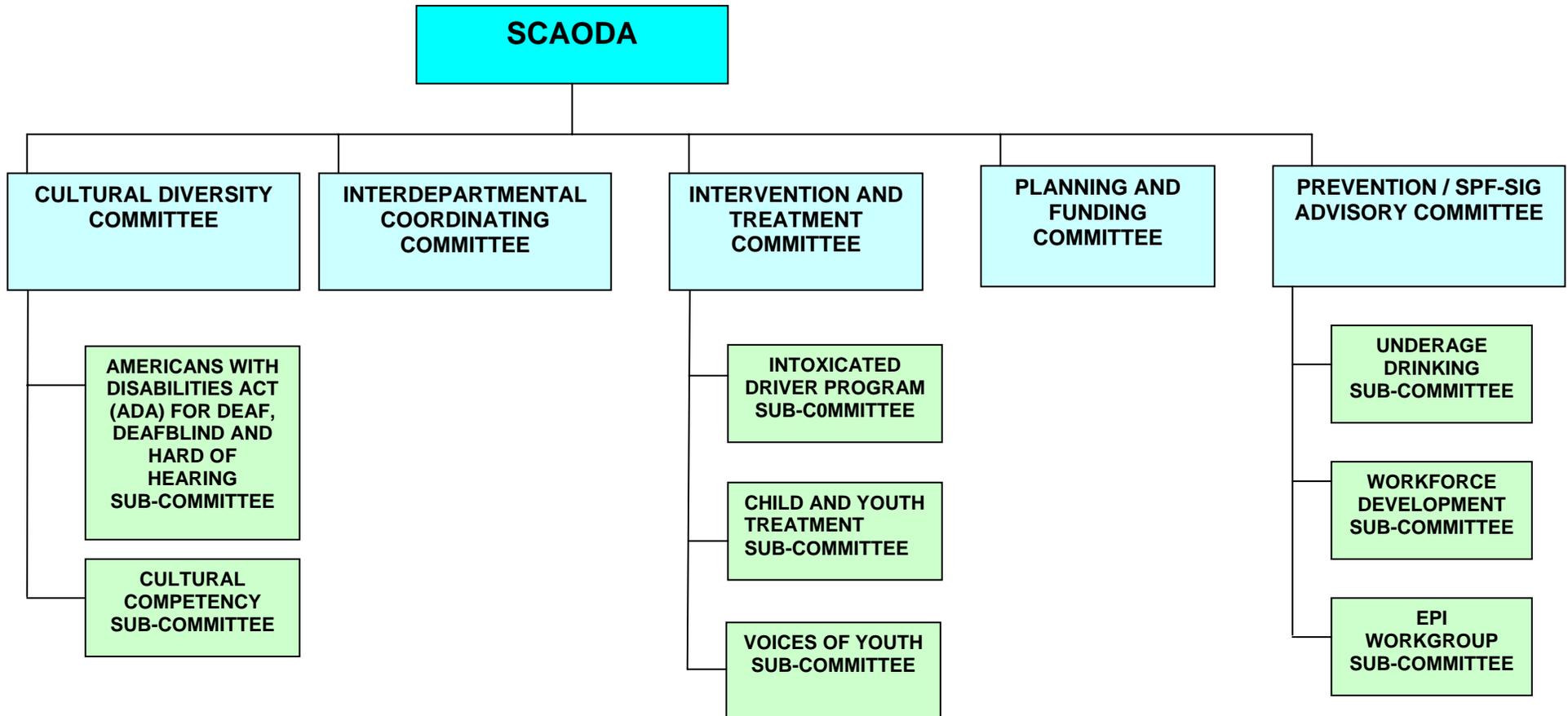
**American Family Insurance Conference Center
6000 American Parkway Madison, WI 53783**

March 6, 2009	9:30am to 12:30pm	Room A2152
June 5, 2009	9:30am to 3:30pm	Room A3151
September 11, 2009	9:30am to 12:30pm	Room A3151
December 4, 2009	9:30am to 12:30pm	Room A3151

SCAODA Organization Chart

October 2008

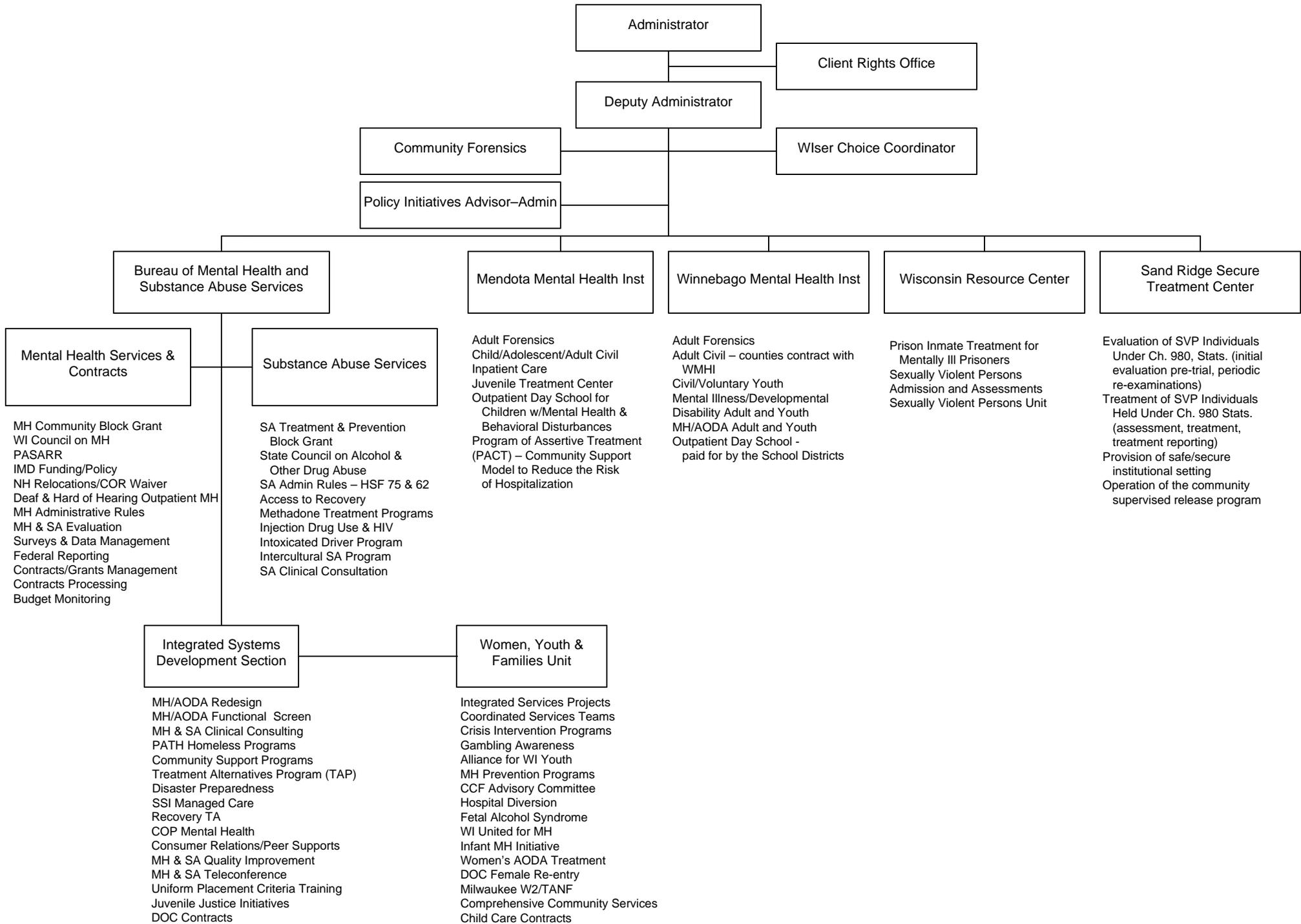
1. Cultural Diversity Committee
 - a. Americans with Disabilities Act (ADA) For Deaf, Deafblind and Hard of Hearing Sub-Committee
 - b. Cultural Competency Sub-Committee
2. Interdepartmental Coordinating Committee
3. Intervention and Treatment Committee
 - a. Intoxicated Driver Program Sub-Committee
 - b. Child and Youth Treatment Sub-Committee
 - c. Voices of Youth Sub-Committee
4. Planning and Funding Committee
5. Prevention / SPF-SIG Advisory Committee
 - a. Underage Drinking Sub-Committee
 - b. Workforce Development Sub-Committee
 - c. EPI Workgroup Sub-Committee



Department of Health and Family Services
Division of Mental Health and Substance Abuse Services

June 2007

Functions



**Membership of the State Council on Alcohol and Other Drug Abuse, (SCAODA)
1 W. Wilson St., Room 434 Madison, WI 53702 (608) 266-3977**

STATUTORY MEMBERS *

Key	Statutory Members	Member	Designee	Term
	1. The Governor	Jim Doyle	Coral Butson	NA
	2. The Attorney General	J. B. Van Hollen	Michael G. Myszewski <i>or</i> Gregory Phillips	NA
	3. The State Superintendent of Public Instruction	Elizabeth Burmaster	Gary Sumnicht	NA
	4. The Secretary of Health Services	Karen Timberlake	Alternate: John Easterday	NA
	5. The Commissioner of Insurance	Sean Dilweg	Eileen Mallow	NA
	6. The Secretary of Corrections	Rick Raemisch	Renee Chyba	NA
	7. The Secretary of Transportation	Frank Busalacchi	David Collins <i>or</i> Blinda Beason <i>or</i> Janet Nordorft	NA
	8. the chairperson of the pharmacy examining board	Dr. Pamela Phillips		NA
	9. A representative of the controlled substances board	Douglas Englebert		NA
	10. Governor's Law Enforcement and Crime Commission	Vacant		NA
C G	11. Citizen Member	Duncan Shrout appointed 10-20-08		4 years
C G	12. Citizen Member	Sandy Hardie appointed 5-7-04		4 years
C G	13. Citizen Member	Mary Rasmussen appointed 9-16-05		4 years
C G	14. Citizen Member	Scott Stokes appointed 7-28-05		4 years
C G	15. Citizen Member	Joyce O'Donnell appointed 6-13-94		4 years
C G	16. Citizen Member	Linda Mayfield appointed 6-3-04		4 years
P	17. Provider of services	Michael Waupoose appointed 5-5-04		4 years
	18. A member of the Wisconsin county human service association, inc.	Mark Seidl		Appointment determined by WCHSA
D M	19. State Representative Majority Party	Joe Parisi		NA
R m	20. State Representative Minority Party	John Townsend	Minette Lawrence	NA
D M	21. State Senator Majority Party	Tim Carpenter		NA

M = Majority Party m = Minority Party R = Republican
D = Democrat C = Citizen Member
P = Provider G = Serves at the Pleasure of the Governor

* Statutory Members are either appointed by the Governor, or in the case of legislative members, appointed by their respective leaders. Statutory members vote, and serve voluntarily as advisors to the Governor.

Membership of the State Council on Alcohol and Other Drug Abuse, (SCAODA)
1 W. Wilson St., Room 434 Madison, WI 53702 (608) 266-3977

EX OFFICIO MEMBERS * (Non-Voting Members)

Ex Officio Members	Member	Designee
1. University of Wisconsin System	Susan Crowley	
2. Secretary, Department Of Revenue	Roger Ervin	Roger Johnson
3. Secretary, Department Of Workforce Development	Roberta Gassman	Linda Preysz
4. Secretary, Department Of Regulation And Licensing	Celia Jackson	Peggy Wichmann
5. Wisconsin Technical College System	Thomas Heffron	
6. Department Of Veterans Affairs	Larry Kleinsteiber	
7. Office Of Justice Assistance	David Steingraber	Ray Luick
8. Liaison to the Mental Health Council	Judith Wilcox	
9. Liaison to the Developmental Disabilities Council	Vacant	
10. Division of Public Health	Randall Glysch	

* Ex Officio members, not appointed by the Governor, are non-voting, and voluntarily serve the State Council.

The State Council consists of 22 statutory members and ten Ex Officio members and has five standing committees:

1. Cultural Diversity Committee
2. Interdepartmental Coordinating Committee
3. Intervention and Treatment Committee
4. Planning and Funding Committee
5. Prevention / SPF-SIG Advisory Committee

Updated: November 24th, 2008

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Updated November 3rd, 2008

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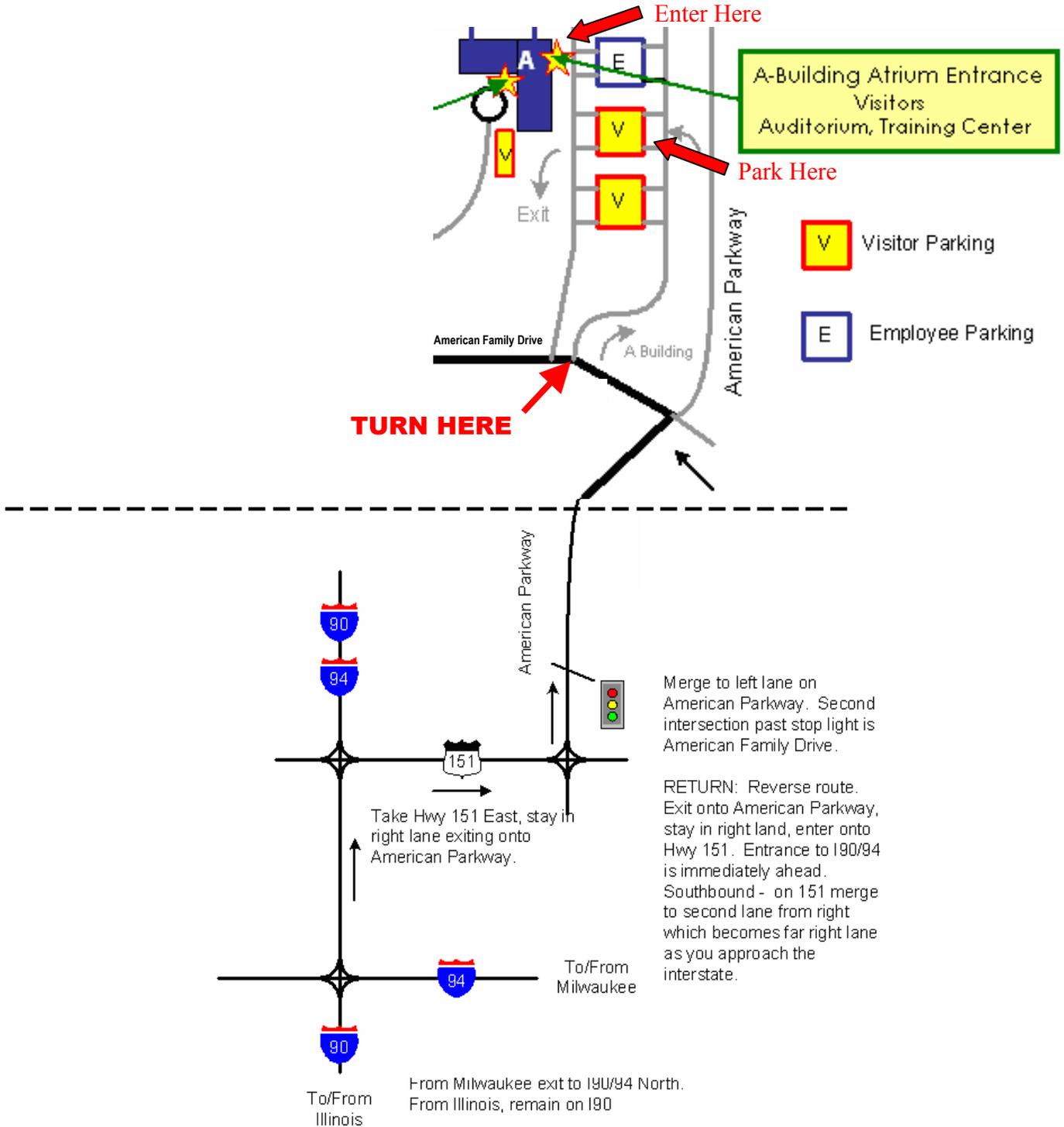
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Directions to American Family's Training Center and Auditorium



Highway Directions to AF-NHQ Campus