

PERFORMANCE AUDIT

ARIZONA DRUG AND GANG POLICY COUNCIL

Report to the Arizona Legislature By the Auditor General August 1996 Report 96-11



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August 1, 1996

Members of the Arizona Legislature

The Honorable Fife Symington, Governor

Mr. Rick Kidder, Director Division of Drug Policy

Transmitted herewith is a report of the Auditor General, A Performance Audit of the Arizona Drug and Gang Policy Council. This report is in response to a May 17, 1995, resolution of the Joint Legislative Audit Committee. The performance audit was conducted as part of the Sunset review set forth in A.R.S. §§41-2951 through 41-2957.

The report addresses the extent to which the Drug and Gang Policy Council has fulfilled its statutory mandates regarding the coordination and evaluation of substance abuse and gang prevention, education, and treatment programs to ensure optimal delivery. The 17-member Council was established to address, in a coordinated and comprehensive manner, the State's activities dealing with substance abuse. Active in its early years, the Council achieved several accomplishments. For example, it initiated the annual compilation of a statewide inventory of publicly supported substance abuse education, prevention, and treatment programs, and developed a comprehensive strategic plan to improve cooperation and provide common direction for the many agencies involved in service delivery. However, current council activities are not producing effective program coordination and evaluation. Its effectiveness has been hindered by poor attendance among many of the agency directors who make up the Council, and the lack of funding to implement evaluations that are needed to make recommendations for achieving better use of public resources dedicated to substance abuse and gang programs. Moreover, the Council has not adequately fulfilled its role in addressing gang issues or overseeing the Arizona Prevention Resource Center, which is the State's clearinghouse for drug and gang prevention, education, and treatment information.

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Overall, we believe the Council would be more effective if agency directors were allowed to assign a designee to serve on the Council and if funding for a statewide evaluation program was secured.

My staff and I will be pleased to discuss or clarify items in the report.

This report will be released to the public on August 2, 1996.

Sincerely,

Jauglas R. Naton

Douglas R. Norton Auditor General

Enclosure

SUMMARY

The Office of the Auditor General has conducted a performance audit and Sunset review of the Arizona Drug and Gang Policy Council, pursuant to a May 17, 1995, resolution of the Joint Legislative Audit Committee. This audit was conducted as a part of the Sunset review process set forth in Arizona Revised Statutes (A.R.S.) §§41-2951 through 41-2957.

Background

The Legislature created the Drug and Gang Policy Council (formerly known as the Alliance For a Drug Free Arizona Interagency Committee) in 1987 to address, in a coordinated and comprehensive manner, the State's education, prevention, and treatment activities dealing with substance abuse. The Council is comprised of 17 members representing a cross section of state agency directors and community leaders who play an integral role in the fight against drugs and gangs by providing education, treatment, and law enforcement programs.

The Council is required by statute to fulfill such duties as:

- recommending the basis for effective coordination of all state substance abuse and gang programs and expenditures;
- conducting an annual inventory of publicly supported substance abuse programs; and
- evaluating the results achieved by such programs.

Current Council Activities Are Not Producing Effective Program Coordination and Evaluation (See pages 5 through 13)

Despite the Council's early efforts, its current activities do not effectively coordinate the optimal delivery of education, prevention, and treatment programs. The Council, which was established in 1987, was active in its early years. For example, it began compiling the *Annual Substance Abuse Program Inventory*, which documents all publicly supported substance abuse education, prevention, and treatment programs. It also developed a comprehensive strategic plan, which is designed to improve cooperation and provide a common direction for the many state agencies involved in Arizona's substance abuse prevention, education, and treatment programs. However, in recent years member attendance has been poor, impeding its ability to perform effectively. Further, the Council has not fulfilled its statutory mandate to evaluate the results of publicly funded substance abuse and gang prevention, education, and treatment

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programs. As a result, the Council is unable to make recommendations to the Governor and the Legislature for achieving optimal use of the almost \$65 million in substance abuse programs. In addition, the Council has devoted little attention to gang issues or the activities of the Arizona Prevention Resource Center (Center). In 1990, the Council's statutes were amended to give the Council responsibility to oversee the Center's operations. The Center serves as the State's clearinghouse for drug and gang education, prevention, and treatment information.

To ensure the Council continues its early progress toward meeting its mandates, several steps should be taken. For example, the Legislature may want to consider amending the statutes to allow agency directors or their designees to serve on the Council. In addition, the Council will need to pursue options to pay for statewide program evaluations such as dividing the cost among member agencies, directing the Center to conduct the evaluations, or seeking grants. As a long-term funding solution, the Legislature may want to require agencies to allocate a percentage of their prevention, education, and treatment monies to evaluations.

Other Pertinent Information (See pages 15 through 19)

On June 1, 1990, the Board of Regents authorized the establishment of the Center at Arizona State University (ASU). On June 28, 1990, the Governor approved legislation providing for the Center to be "... established and maintained at the direction of the Arizona drug and gang policy council" The actions by the Legislature and the Board of Regents were in response to the increasing problem of substance abuse among Arizona's youth. The Center's goal, at the time, was to decrease the incidence of drug and alcohol abuse among children in Arizona. However, because substance abuse results from a multitude of social problems, the Center's founders perceived the need to embrace a more comprehensive approach to prevention. Additionally, the Center's tie to ASU enables it to not only focus on issues related to drugs and gangs, but other social issues that may directly or indirectly relate to problems associated with substance abuse and involvement in criminal gangs. Therefore, the Center's services often involve other issues such as AIDS, teen pregnancy, and school dropouts. To that end, the Center has adopted the following mission statement:

To help Arizona's communities develop, implement, document, and evaluate programs related to prevention of substance abuse and other social problems.

The Center relies on three sources to pay for its services: (1) it receives approximately \$200,000 annually from a state appropriation passed through the Arizona Criminal Justice Commission;

(2) it receives approximately \$500,000 annually through intergovernmental service agreements with a core group of state agencies; and (3) it receives approximately \$800,000 annually from special grants or contracts.

Sunset Factors (See pages 21 through 24)

Our report also contains responses to the 12 Sunset Factor questions in accordance with A.R.S. §41-2954. In response to the question regarding the continued need for the Council, we noted that the Council has taken minimal action in recent years to fulfill its primary role of effectively coordinating the optimal delivery of education, prevention, and treatment programs. Therefore, the Legislature may want to consider extending the Council's function for a period of only three to five years. This should allow sufficient time to demonstrate whether it can improve its effectiveness in meeting its role.

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INTRODUCTION AND BACKGROUND

The Office of the Auditor General has conducted a performance audit and Sunset review of the Arizona Drug and Gang Policy Council, pursuant to a May 17, 1995, resolution of the Joint Legislative Audit Committee. This audit was conducted as a part of the Sunset review set forth in Arizona Revised Statutes (A.R.S.) §§41-2951 through 41-2957.

Council Established to Coordinate and Evaluate Substance Abuse and Gang Prevention Programs

In 1987, the Legislature created the Alliance For a Drug Free Arizona Interagency Committee (AIC). The AIC was created to address, in a coordinated and comprehensive manner, the State's education, prevention, and treatment activities dealing with substance abuse. In 1990, the AIC was renamed the Arizona Drug Policy Council (and later the Arizona Drug and Gang Policy Council), additional members were added, and additional duties were established.

The Council is required to meet at least quarterly and has several statutory mandates including:

- Recommend the basis for effective coordination of all state programs and expenditures, including federal monies, for education, prevention, and treatment relating to alcohol and drug abuse and participation in criminal street gangs as defined in §13-105;
- Conduct an annual inventory of publicly supported education, prevention, and treatment programs related to substance abuse in operation in this State;
- Evaluate the results achieved by publicly supported education, treatment, and prevention programs and make recommendations to the Governor and the Legislature for revising programs or redirecting expenditures to achieve better use of public resources; and
- Oversee the operation of the Arizona Prevention Resource Center (Center), which shall be established and maintained at the direction of the Arizona Drug and Gang Policy Council for the collection, storage, and distribution of information relating to substance abuse and gang education, prevention, and treatment programs.

Organization and Budget

The Council's membership consists of a cross section of state agency directors and community leaders who play an integral role in the fight against drugs and gangs by providing prevention, education, treatment, and law enforcement programs:

The Governor (who serves as Chair)

The Attorney General

The Director from each of the following:

Department of Public Safety Department of Corrections Department of Juvenile Corrections Department of Health Services Department of Economic Security Department of Education Arizona Health Care Cost Containment System Administrative Office of the Courts

A representative from each of the following:

Arizona Criminal Justice Commission Arizona Drug and Gang Enforcement Task Force Arizona Board of Regents State Board of Directors for Community Colleges League of Arizona Cities and Towns a local community or neighborhood group the business community

Although the Council includes representatives from a wide range of agencies, it has no dedicated budget or personnel. Currently, the Governor's Division of Drug Policy (GDDP) supplies staff and support services to administer the Council's activities. The Council has established a working group, comprised of staff from member agencies, and uses the Center to provide necessary staff support to aid it in fulfilling its mandates.

Audit Scope and Methodology

This audit focuses primarily on the Council's ability to meet its statutory mandates regarding coordination and evaluation of programs to ensure the optimal delivery of educational, treatment, and prevention programs. To evaluate the extent to which the Council fulfills its objective, we observed its meetings, and reviewed minutes of previous meetings back to its

inception. In addition, we interviewed current council and working group members, as well as some former members, to obtain their perspective on how well the Council is fulfilling its mandates and thereby meeting its overall objective. This work also included a review and analysis of the Council's *Annual Substance Abuse Program Inventory* and the *Comprehensive Strategic Plan* to determine how they help the Council comply with its mandates. Finally, literature was reviewed regarding program evaluations of substance abuse programs.

This report presents a finding and recommendations for the Arizona Drug and Gang Policy Council regarding:

The Council's need to take several steps to ensure it effectively coordinates the optimal delivery of education, prevention, and treatment services.

In addition, our report includes a section discussing the duties performed by the Arizona Prevention Resource Center, which was included as a part of the Council's enabling statutes in 1990 (see 15 through 19). The report also contains responses to the 12 Sunset Factors for the Council.

This audit was conducted in accordance with government auditing standards.

The Auditor General and staff express appreciation to all the council members, the Executive Director of the Governor's Division of Drug Policy and staff, and the Director of the Arizona Prevention Resource Center and staff for their cooperation and assistance throughout this audit.

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FINDING I

CURRENT COUNCIL ACTIVITIES ARE NOT PRODUCING EFFECTIVE PROGRAM COORDINATION AND EVALUATION

The Arizona Drug and Gang Policy Council's current activities do not effectively coordinate the optimal delivery of education, prevention, and treatment programs. Although the Council took several steps early in its existence to fulfill its mandates, poor member attendance and lack of program evaluations and monetary support now impede its ability to perform effectively. As a result, the Council has been unable to make recommendations to the Governor and the Legislature for achieving optimal use of the approximately \$65 million in substance abuse programs. In addition, the Council has devoted little attention to gang issues or the activities of the Arizona Prevention Resource Center (Center).

Council Active in Early Years

The Council worked diligently in its early years to address its statutory mandates. For example, in 1989, the Council hired an outside consultant to review the State's coordination of substance abuse programs. It also created an evaluation roundtable of state agency and private sector representatives to ascertain what evaluation efforts were already occurring in Arizona. These reviews revealed a number of problems regarding the State's overall approach to substance abuse issues, including uncoordinated efforts to provide statewide prevention and treatment services; fragmented evaluation data that did not allow for statewide analysis; no centralized location for basic prevention information; and no listing of current programs that received public funding.

In response to these findings, the Council appointed a working group, comprised of staff from member agencies, to meet more frequently to address some of the noted weaknesses. This resulted in several accomplishments:

Arizona Prevention Resource Center (Center) In 1990, the Council was given responsibility to oversee the Center. A.R.S. §41-617 designates the Center to serve as the State's clearinghouse for drug and gang education, prevention, and treatment information. (See pages 15 through 19 for more information about the Center.)

Annual Program Inventory Soon after its establishment, the Center compiled the first annual statewide inventory of publicly supported substance abuse education, prevention, and treatment programs.

Comprehensive Strategic Plan A comprehensive strategic plan was developed to improve cooperation and provide a common direction for the many agencies involved in Arizona's substance abuse education, prevention, and treatment programs.¹ This plan, adopted in

1991 and updated in 1994, contains 27 strategies with objectives ranging from developing a cohesive community mobilization system to developing a statewide drug-free workplace system and a plan for evaluating Arizona's substance abuse programs. Each strategy identifies the agency primarily responsible for its implementation, as well as those agencies whose assistance is required for effective implementation. (For a complete listing of the 27 strategies, see Appendix A, pages a-i through a-iii.)

Poor Attendance Hinders Council's Effectiveness

Despite its early accomplishments, the Council's effectiveness is hindered by poor attendance. To ensure the Council continues its early progress toward meeting its mandates, steps need to be taken to increase attendance at meetings.

Poor member attendance impedes Council's effectiveness—Poor attendance reduces the Council's effectiveness. While it is required to meet at least once every calendar quarter, from 1987 through 1994 the Council averaged fewer than three meetings a year. Since 1995, the Council has been meeting quarterly, but individual members are often absent. As illustrated in Table 1 (see page 7), attendance has been particularly poor in the last 2 ½ years, with an average of only 5 out of 17 members attending meetings.

As noted in Table 1, members sometimes send other individuals (proxies) on their behalf. However, these proxies are often the same individuals who comprise the Council's working group. Therefore, in some cases, council meetings have been reduced to the working group members presenting information, plans, or proposals to themselves rather than to the council members. Poor attendance also prevents the Council from obtaining a quorum. Although proxies increase the number of individuals in attendance, they do not have the power to

¹ Twelve state agencies are involved in providing substance abuse education, prevention, and treatment programs and services. The agencies that provide the majority of financial support for such services include the Department of Health Services, the Department of Education, the Department of Corrections, and the Arizona Supreme Court.

Table 1

Meeting Date	No. of Members <u>Attending</u>	No. of Proxies <u>Attending</u>	No. of Positions <u>Not Represented</u> *
February 23, 1994	11	4	2
July 24, 1994	5	7	5
February 8, 1995	5	9	3
May 3, 1995	3	7	7
October 4, 1995	3	6	8
December 6, 1995	3	5	9
March 13, 1996	3	5	9
June 5, 1996	5	6	6
Average	5	6	6

Drug and Gang Policy Council Attendance Record

^a This column indicates the number of positions where neither the member nor a proxy attended the meeting.

Source: Auditor General staff review and analysis of council meeting minutes and attendance records for 1994, 1995, and through June 1996.

implement overall plans or authorize spending. Therefore, without adequate member attendance, the Council is rendered powerless in taking any action. For example, during its June 5, 1996 meeting, the Council was scheduled to take action on the recommendations proposed in the 1995 substance abuse program inventory. However, due to poor member turnout, the action item was held until such time the Council could obtain a quorum.

Council members' poor attendance may stem from several factors including competing priorities for agency directors, who comprise over half of the Council. For example, in the Council's June 1996 meeting (observed by auditors), the Director of the Governor's Division of Drug Policy (who staffs the Council) asked attendees to discuss the attendance problem and the perceived reasons such a problem exists. The general consensus of those participating in the discussion was that while agency directors may be committed to the Council, they simply have other tasks and responsibilities they are obligated to attend to.

Another factor that may contribute to poor attendance is the lack of actionable items for the Council to address. During the discussion at the June 1996 meeting, one attendee noted the

lack of meaningful discussion in council meetings. Another member indicated that if issues discussed in council meetings were relevant and led to action, more members would be motivated to attend. All attendees agreed that the missing link to valuable discussion and subsequent action is the lack of evaluation data upon which to base funding recommendations.

A review of council meeting minutes for the last two years confirms there has been little action taken by council members to move it forward in fulfilling its overall mission. In fact, the last three council meetings we observed were limited primarily to presentations or status updates on the activities of other entities involved in preventing substance abuse, such as the Governor's Division of Drug Policy, or the Department of Health Services.

Steps needed to encourage greater attendance — To ensure the Council continues its early progress toward meeting its mandates, steps need to be taken to increase members' attendance at meetings. To draw increased interest and attendance, the Council may need to direct more of the focus of its meetings to items that the Council can act upon. As previously mentioned, in past meetings, the Council has taken little action and has generally used meetings as a means of allowing other groups to present or brief the Council on activities they are performing that relate to drug and gang issues.

A more direct means of increasing attendance at council meetings would be to change the Council's composition. Currently, the Council's statutes allow only agency directors to comprise its membership. However, as noted earlier, member attendance has been poor, limiting the work the Council can accomplish. If the statutes were revised to allow agency directors or their designees to serve as council members, agency directors could designate and send representatives with the time and expertise to work on council issues. For example, the Council's working group is currently comprised of individuals from member agencies who are actively involved in substance abuse or gang issues, and are often the individuals who attend council meetings on behalf of their agency director. As previously mentioned, the working group played a significant role in helping the Council achieve its early accomplishments. By allowing the members of the working group to serve on the Council, the Council would be able to meet more frequently and be more productive in taking the necessary steps to meet its mandates.

Council Has Yet to Evaluate Overall Effectiveness of Programs

Despite the role the Council can play in helping the State achieve optimal use of public resources, it has yet to fulfill this important mandate. Although an evaluation plan was created, a lack of funding has prevented its implementation. To ensure that the Council can evaluate the results achieved by publicly supported programs, it will need to seek monetary support for implementing its evaluation plan. The Council will also need to develop data collection standards to ensure it can collect comparable information statewide.

Evaluation plan developed but not implemented – Although the Council's working group created an evaluation plan addressing its requirement to conduct evaluations, a lack of funding has prevented implementation of this plan. Specifically, by law, the Council is required to evaluate the results of publicly funded substance abuse and gang prevention, education, and treatment programs, and "make recommendations to the Governor, and the Legislature for revising programs or redirecting expenditures to achieve better use of public resources." In June 1993, the Council's working group presented an evaluation plan that would enable the Council to fulfill these mandates. This multi-phase plan focuses on evaluating the State's overall strategy for reducing substance abuse rather than conducting individual program evaluations for the more than 700 programs in Arizona. Specifically, the plan encompasses many activities, including:

- Determining the goals and priorities that are important to Arizona and implementing the mechanisms necessary at the program level to determine if these goals are being met;
- Researching and reviewing other studies that have identified effective prevention, education, or treatment strategies; and
- Comparing Arizona's programs to the identified effective strategies in order to determine if monies are being used in the most effective manner.

However, this plan has not been implemented and the Council has yet to conduct any evaluations. Without these evaluations, the Council is unable to make recommendations to the Governor and the Legislature for achieving better use of public resources dedicated to substance abuse and gang programs. According to the Council's 1995 Program Inventory, almost \$65 million in state, federal, and local monies is distributed annually to substance abuse programs.¹ These programs consist of a variety of efforts ranging from school-based prevention programs to outpatient treatment and counseling. While some of these programs may be evaluated by individual agencies, the evaluations vary in size and scope. For example, the Center (who compiles the annual inventory) indicated that 455 of 706 substance abuse prevention and treatment programs reported some type of program evaluations. However, these evaluations range in scope from client satisfaction surveys to evaluations of program impact. Further, the Council has not performed a statewide assessment of their impact on reducing the incidences of substance abuse and/or gang participation. Nevertheless, even without statewide evaluations, research suggests that Arizona's resources could be distributed more effectively. For example:

¹ Currently, some data on gang prevention programs is collected for the inventory. However, when compiled, the data is included under a broader category. Therefore, current expenditures for gang programs are not identifiable in the annual inventory.

- According to a Drug Strategies report, repeated evaluations have found the Drug Abuse Resistance Education (DARE) program to be ineffective in reducing new alcohol, tobacco, or drug use among young people.¹ Yet, in both 1993-94 and 1994-95, Arizona distributed more than \$700,000 to such programs.
- Both the 1993-94 and 1994-95 annual inventories indicate that funding for Peer Leadership and Mentorship programs is low compared to other prevention programs, even though both Peer Leadership and Mentorship programs have proven records of effectiveness.

Lack of support has prevented implementation of evaluation plan— Despite the importance of knowing the benefits and effectiveness of Arizona's programs, the Council has not agreed on how to pay for an evaluation program. To finance the evaluation plan (estimated by the working group to cost approximately \$200,000 for the first year), the working group proposed that each agency represented on the Council contribute equal amounts from their budgets.² However, council members thought monies should be sought from other sources. Specifically, the Council stated it should submit a budget proposal to the Legislature, or approach the Governor's Office of Management and Budget to determine if any surplus monies were available. However, neither approach was formally pursued by the Council, and the issue has not been revisited since 1993.

To ensure that the Council fulfills its evaluation mandate, it should pursue all possible monetary support options, including:

- 1) The Governor, as Chairman of the Council, requiring the 9 large state departments represented on the Council to utilize existing discretionary funds to contribute an amount (possibly less than \$25,000) toward the plan.
- 2) Directing the Center to implement the plan. The Center is a viable candidate because the plan consists mainly of personnel costs, and it has experienced evaluation staff. Further, the Center currently produces the annual program inventory and is familiar with the participating agencies and programs. However, it may not have staff available to conduct these evaluations unless its work on the annual inventory is reduced. This could be done by changing the statutory requirement to produce an inventory biennially, instead of annually.³

¹ *Keeping Score, What We Are Getting For Our Federal Drug Control Dollars.* 1995. Prepared by Drug Strategies, a nonprofit organization that promotes effective approaches to solving the nation's drug problems.

² Budgets for additional years of evaluation have not been developed because they will depend on the goals and priorities established during the first year.

³ A yearly inventory may not be needed since year-to-year funding patterns have remained stable over the last three years. Further, the inventory was intended to be the first step toward evaluation and is of limited value without evaluation data. However, the Center's Director indicated that moving to a biennial inventory could affect the consistency and quality of data overall.

3) Seeking external grants. In fact, the Governor's Division of Drug Policy has recently begun pursuing grants for the Council from the federal government. However, to date, the Division has been unsuccessful.

A long-term strategy for funding evaluations on a more permanent basis could be for the Legislature to require agencies involved in the delivery of substance abuse prevention, education, and treatment to establish provisions for adequate funding of evaluations.

The Council needs to establish data collection standards – In addition to addressing funding requirements, the Council will also need to address data collection needs. As of fiscal year 1995, 12 different state agencies distributed prevention and treatment monies, yet no statewide data collection standards exist. To determine the effectiveness of programs statewide, all programs should collect some standardized information based on Council-established objectives. For example, if the Council defines an "effective" treatment program as one in which patients remain substance-free for at least six months, all providers would need to supply patient follow-up information for that time frame.

To enable the Council to establish the necessary data collection standards, its role in evaluation should be strengthened by amending A.R.S. §41-617(D). Specifically, the statutory changes should expand the Council's duties to include standardized data collection, and developing and prescribing report content and form. In addition, the statute should require the operators of publicly supported education, prevention, and treatment programs to gather data according to the Council-established criteria.¹

Council Devotes Little Attention to Gangs or the Center

In addition to not fulfilling its evaluation requirement, the Council has not adequately fulfilled its role in addressing gang issues or overseeing the Center. Although the Council's enabling statutes were revised in 1991 to include duties regarding the prevention of gangs, it has delegated all of its involvement to a subcommittee that includes only one council member. Specifically, the Council voted to allow the State Gang Advisory Committee (GAC) to become a subcommittee of the Council. However, the GAC, comprised of law enforcement officials and community representatives, existed before the Council was mandated to address gang issues and acts independently from the Council. The GAC's interaction with the Council is limited to status updates and presentations regarding its activities throughout the State.

In addition, the Council has not completely fulfilled its role in overseeing the operation of the Arizona Prevention Resource Center. The Council's oversight is limited primarily to the production of the annual program inventory, and therefore is removed from most of the Center's other activities. This may be due in part to the Center's unique structure. In addition

¹ This requirement could also be incorporated into the program operators' service contracts.

to its statutory relation to the Council, the Center also exists as a "center" at Arizona State University and receives funding from a variety of sources, including three state agencies and several special grants and contracts. Therefore, the Center's activities are influenced by several factors, including statutory and university requirements and the needs of its primary funders and grantors. Consequently, the Council is not necessarily aware of all decisions that affect the Center (see pages 15 through 19 for more information).

Recent legislation may help increase the Council's commitment to activities regarding both gang prevention and the Center. Specifically, during the 1996 legislative session, Session Law Chapter 189 was passed altering the language of the Center's duties in relation to the Council under A.R.S. §41-617 in three primary ways. First, it changes its name to the Arizona Drug and Gang Prevention Resource Center. Second, it adds a requirement that the annual inventory (which is prepared by the Center) include gang prevention programs as well as substance abuse programs. Third, this bill adds a requirement that the Center provide an annual report to the Legislature on its current and future activities as well as a listing of any monies it receives.

RECOMMENDATIONS

- 1. The Legislature should consider amending A.R.S. §41-617(D) to allow the Council to establish data collection standards and develop and prescribe the content of standardized reports.
- 2. The Legislature should consider requiring that agencies involved in the delivery of substance abuse prevention, education, and treatment programs establish provisions for adequate funding of a statewide evaluation program.
- 3. The Legislature should consider amending A.R.S. §41-617(A) to allow agency directors or their designees to serve as council members.
- 4. The Council should ensure its meetings are focused on action-oriented agenda items.
- 5. The Council should pursue options for funding the statewide evaluation proposal through such avenues as:
 - dividing the cost among its member agencies;
 - changing the program inventory from an annual to a biennial basis, and then directing the center staff used to compile the annual program inventory to conduct the evaluation project; or,
 - seeking external grants.
- 6. The Council should increase its involvement in gang prevention efforts and oversight of the Center by:
 - ensuring the annual inventory includes information on gang prevention programs; and
 - requiring the Center to regularly update the Council on its activities.

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OTHER PERTINENT INFORMATION

During the audit, we obtained other pertinent information regarding the Arizona Prevention Resource Center (Center), which is partially overseen by the Drug and Gang Policy Council.

Background

On June 1, 1990, the Board of Regents authorized the establishment of the Center at Arizona State University (ASU). On June 28, 1990, the Governor approved legislation providing for the Center to be "... established and maintained at the direction of the Arizona drug and gang policy council...." The actions by the Legislature and the Board of Regents were in response to the increasing problem of substance abuse among youth in Arizona. The Center's goal at that time was to decrease the incidence of drug and alcohol use and abuse among children in Arizona. However, because substance abuse results from a multitude of social problems, the Center's founders perceived the need to embrace a more comprehensive approach to prevention. To that end, it has adopted the following mission:

To help Arizona's communities develop, implement, document, and evaluate programs related to prevention of substance abuse and other social problems.

The Center's continued status as a part of ASU enables it to not only focus on issues related to drugs and gangs, but other social issues that may directly or indirectly relate to problems associated with substance abuse and involvement in criminal gangs. For example, the Center has developed training sessions relating to assessment of adolescent health and health risks.

Budget and Organization

The Center relies on several sources to pay for its services and activities (see Table 2, page 16). First, it receives approximately \$200,000 from the State that is appropriated through the Arizona Criminal Justice Commission. Second, it receives approximately \$500,000 from a core group of state agencies involved in the prevention of substance abuse.¹ It is this core group

¹ These agencies have established intergovernmental service agreements with the Center through the Board of Regents.

that provides direction to the Center regarding annual planning and budget issues. Third, the Center will receive about half of its money, or almost \$800,000, during fiscal year 1996 from special grants or contracts (established through the Board of Regents) with various local, state, and federal organizations. Finally, ASU provides various in-kind contributions such as computer supplies and equipment.

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Table 2						
Revenue Sources Supporting the Arizona Prevention Resource Center Fiscal Years 1993-94 through 1995-96 (unaudited)						
Source	<u>1993-94</u>	<u>1994-95</u>	<u>1995-96</u>			
Arizona Criminal Justice Commis- sion ^a	\$ 200,000	\$ 200,000	\$ 220,000			
Department of Health Services ^a	250,000	250,000	250,000			
Governor's Division of Drug Policy ^b	106,900	110,000	110,000			
Department of Education ^c	140,000	170,743	160,342			
Subtotal	696,900	730,743	740,342			
Special Grants and Contracts	445,875	687,684	780,798			
Total	<u>\$1,142,775</u>	<u>\$1,418,427</u>	<u>\$1,521,140</u>			

^a Monies from the Arizona Criminal Justice Commission and the Department of Health Services come from state sources.
 ^b Monies from the Course of Division of Division and Division from find and the Department of Health Services come from state

^b Monies from the Governor's Division of Drug Policy come from federal sources.

^c Monies from the Department of Education come from both state and federal sources.

Source: Auditor General staff analysis of financial data contained in the Center's Interagency Service Agreements and the State of Arizona Joint Legislative Appropriations Report for fiscal years ending June 30, 1996, nd June 30, 1997.

Although the Center's budget and staffing levels vary from year to year depending on the number of special projects, its 1995-96 budget supported 13 full-time positions for the first half

of the year and 20 full-time positions for the second half of the year. Its staff activities can be classified into three primary areas:¹

Clearinghouse

The clearinghouse serves as a small, specialized library that catalogues and distributes a broad range of comprehensive prevention materials. The subjects addressed cover most prevention and health promotion topics with particular focus on alcohol, tobacco, and other drugs, as well as gang prevention

issues. The clearinghouse also serves as the State's Regional Alcohol and Drug Abuse Resource (RADAR) network under the U.S. Department of Health and Human Services, Center for Substance Abuse Prevention.

Technical Assistance and Training

Research and Evaluation

This unit provides training and technical assistance to organizations, teachers, and individuals undertaking various prevention programs in local schools and communities. Examples of the classes sponsored by the Center include Skills for Effective Prevention, Conflict Resolution, and Gang Prevention.

The role of this unit is to provide Arizona communities with evaluation services to determine the effectiveness of their prevention efforts. Because the people involved in prevention may not possess the skills needed to assess prevention programs, the Center offers expertise in areas such as survey and evaluation design.

Services Provided by the Center

The size and scope of the Center's technical assistance, clearinghouse and research, and evaluation services vary depending on the agency or organization directing or requesting its activities. For example, the Center's services are guided by the Drug and Gang Policy Council's statutes, which focus on drug and gang issues. In addition, the Center's connection with ASU enables it to seek outside sources of support to provide assistance in a variety of areas including the education and prevention of HIV/AIDS, school dropouts, and teen pregnancy. The Center's services tend to be holistic in nature and encompass a broad range of prevention issues.

Services provided to the Council — The Center currently conducts a number of services for the Council that focus on drug and gang issues. For example, it prepares the annual program

¹ The Center also has an Administration, Planning, and Development area. Its primary purpose is to promote effective collaboration among prevention and treatment programs.

inventory of substance abuse programs, with the assistance of participating state agencies and various local entities. This report, intended to inform legislators and the public of substance abuse prevention and treatment expenditure patterns, documents year-to-year changes in the distribution of public monies for programs across the State. In addition, the Center is established, per A.R.S. §41-617(D)(6), to act as a clearinghouse for drug and gang information. In this role, the Center collects, stores, and distributes information relating to the prevention and treatment of, and education about, substance abuse and gang activities. Although the Center does store and distribute some information relating to gangs, it has more information about substance abuse. The Center's Director attributes this to the fact that there is more substance abuse literature available from state and federal sources. Because the Center does not have a printing budget, it is dependent on what these sources can provide.

The Center has also been instrumental in carrying out several of the 27 state strategies developed in the Council's strategic plan to improve cooperation between the multiple state agencies that provide substance abuse prevention, education, and treatment services in Arizona. One of these strategies involves the design of an evaluation plan to help address the Council's mandate to evaluate publicly supported prevention, education, and treatment programs. Although the Council currently lacks the financial support to complete evaluations, the Center could play a strong role in implementing the evaluation plan if money becomes available.

Services to primary funding agencies and grantors — In addition, the Center provides services to other agencies and groups based on its relationship to ASU. ASU requires the Center to seek outside support for its services. Therefore, as previously mentioned, the Center has intergovernmental service agreements (through the Board of Regents) with the Department of Health Services, the Governor's Division of Drug Policy, and the Department of Education to provide specific services. These activities, intended to serve the agencies and their constituents, often include issues other than drugs and gangs. For example, the Center trains HIV specialists on how to provide accurate AIDS information to Arizona students, as well as providing technical assistance to communities and schools on how to address such issues as teen pregnancy, and school dropouts.

Likewise, the Center maintains a substantial number of special projects with various entities including city governments, federal agencies, and school districts. Although the services provided may be similar to those provided to the core funding agencies, these requests often involve the Center assuming the operational duties of a project instead of simply offering technical assistance. Two examples of special projects include developing child nutrition materials and evaluating existing prevention programs. (For a list of center grants awarded in the last complete fiscal year, see Appendix B, pages b-i through b-iv.)

Holistic approach allows for expansion of services – Although the Center's statutory authority is limited to drug and gang issues, its affiliation with the University enables it to pursue a more comprehensive approach to prevention. Further, as mentioned previously, the Center's founders determined early in its existence that its services should not be limited to substance abuse (and later gangs) as distinct from other social problems. This change was in response to the increasing recognition by the people involved in substance abuse prevention around

the country that a holistic approach is needed to successfully address the complex problems of substance abuse and gang activity. In support of this holistic position, the Center provided a number of citations from experts on the prevention of substance abuse. One of these states, "Perhaps the most important conclusion we can make from over a decade of prevention research. . . is that the causes of substance abuse are multiple. . .and that prevention efforts focused on a single system and a single strategy will probably fail."¹

¹ Bonnie Bernard, Alcohol and Health Training Development System, Prevention Resource Center (1986). *Characteristics of Effective Prevention Programs.*

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SUNSET FACTORS

In accordance with A.R.S. §41-2954, the Legislature should consider the following 12 factors in determining whether the Drug and Gang Policy Council should be continued or terminated.

1. The objective and purpose in establishing the Council.

The Drug and Gang Policy Council, formerly the Alliance For A Drug Free Arizona Interagency Committee, was created in 1987. The Council's 17 members comprise a cross section of state agency directors and community leaders who play an integral role in the fight against drugs and gangs. Its statutory objective has essentially remained intact since its inception:

". . .to foster cooperation among all state and local governmental entities, neighborhood groups, community organizations and private groups to ensure the optimal delivery of educational, treatment and prevention programs that will reduce the incidences of substance abuse or participation in criminal street gangs as defined in A.R.S. §13-105 by children, youth and families."

2. The effectiveness with which the Council has met its objective and purpose and the efficiency with which it has operated.

The Council worked diligently in its early years to address its statutory mandates. Its activities included directing the Center to begin compiling the *Annual Substance Abuse Program Inventory*, which lists all publicly supported substance abuse programs. It also developed a comprehensive strategic plan to improve the coordination of and provide a common direction for the many agencies involved in Arizona's substance abuse education, prevention, and treatment programs.

However, in recent years the Council's effectiveness has been hindered by poor attendance, lack of a statewide assessment of substance abuse and gang prevention programs, and a lack of monetary support to conduct such assessments. These factors have prevented the Council from fully achieving its objective. Specifically, the Council has been unable to make recommendations to the Governor and the Legislature for achieving optimal use of the almost \$65 million directed toward substance abuse programs (see Finding I, pages 5 through 13).

3. The extent to which the Council has operated within the public interest.

The Council generally operates in the public interest by bringing together state agency representatives and community leaders who are dedicated to reducing the incidences of substance abuse and gang participation in Arizona. Through its comprehensive membership, the Council is an ideal entity for making recommendations to the Legislature regarding expenditures for prevention, education, and treatment programs.

However, while the Council has identified all publicly funded programs through its *Annual Substance Abuse Program Inventory,* it has not fulfilled its overall objective of effectively coordinating the optimal delivery of educational, prevention, and treatment programs. Therefore, its benefit to the public is limited because it cannot ensure public resources are spent in the most cost-effective manner.

4. The extent to which rules and regulations promulgated by the Council are consistent with the legislative mandate.

The Council has no authority to promulgate rules and regulations.

5. The extent to which the Council has encouraged input from the public before promulgating its rules and regulations and the extent to which it has informed the public as to its actions and their expected impact on the public.

Although the Council has no authority to promulgate rules and regulations, all council meetings are open to the public. The Council follows Open Meeting Law requirements for each meeting held.

6. The extent to which the Council has been able to investigate and resolve complaints that are within its jurisdiction.

The Council has no authority to investigate complaints.

7. The extent to which the Attorney General or any other applicable agency of state government has the authority to prosecute actions under enabling legislation.

This factor also does not apply to the Council.

8. The extent to which the Council has addressed deficiencies in the enabling statutes which prevent it from fulfilling its statutory mandate.

The Council has not proposed any legislative changes in the past five years. However, the wording "and gang" was added to the Council's title and several of the Council's mandates in 1991 because of Arizona's growing concern with gangs and gang-related problems.

9. The extent to which changes are necessary in the laws of the Council to adequately comply with the factors listed in the sunset laws.

In order for the Council to be able to comply with its statutory mandates, additional statutory authority may be necessary. Specifically, the Council's duties, as authorized in A.R.S. §41-617(D), may need to be expanded to ensure that it can effectively gather the information necessary to evaluate statewide education, prevention, and treatment programs. Statutory changes are needed to expand the Council's duties to include standardizing data collection and developing and prescribing report content and form, and to require the operators of publicly supported education, treatment, and prevention programs to follow data standards established by the Council.

In addition, to further enhance the Council's effectiveness, A.R.S. §41-617(A) may need to be revised to allow agency directors or their designees to serve on the Council.

10. The extent to which the termination of the Council would significantly harm the public, health, safety or welfare.

Although termination of the Council would not significantly harm the public health, safety, or welfare, its membership (which includes directors of several state departments such as the Department of Education, Department of Health Services, the Department of Public Safety, and the Department of Corrections, as well as community leaders), provides the potential for broad interagency and community collaboration on drug and gang prevention and education issues. Moreover, as there is no other entity that allows for such substantial cooperation, the Council has a unique opportunity to make a positive impact on the State's drug and gang problems. Specifically, if the Council can fulfill its mandate to provide effective coordination and evaluation, it can assist in ensuring that the \$65 million spent annually on substance abuse, prevention, education, and treatment programs is used in the most cost-effective manner.

However, the Council's current activities do not effectively coordinate the optimal delivery of education, prevention, and treatment programs. Therefore, the Legislature may want to consider extending the Council's function for a period of only three to five years. As noted earlier, the Council is aware of the importance of conducting

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evaluations that can be used to make meaningful recommendations regarding the continued funding for substance abuse programs. A period of three to five years should be sufficient time to demonstrate meaningful progress in fulfilling its evaluation mandate and show that the Council can play a viable role in coordinating the delivery of substance education, prevention, and treatment programs.

11. The extent to which the level of regulation exercised by the Council is appropriate and whether less or more stringent levels of regulation would be appropriate.

The Council has no regulatory authority.

12. The extent to which the Council has used private contractors in the performance of its duties and how effective use of private contractors could be accomplished.

In its early years, the Council hired a consultant to review Arizona's education, prevention, and treatment efforts. This consultant was successful in identifying several problems the Council needed to address to effectively deal with substance abuse issues. However, since that time the Council has not used any private contractors.

Agency Response

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STATE OF ARIZONA GOVERNOR'S DIVISION OF DRUG POLICY

FIFE SYMINGTON Governor RICK KIDDER Director

July 29, 1996

Mr. Douglas R. Norton Auditor General 2910 North 44th Street, Suite 410 Phoenix, Arizona 85018

Dear Mr. Norton:

I write to respond to the submission of the Auditor General's review of the Drug and Gang Policy Council.

The report cites several recommendations to which I would like to respond, and it is my hope that the responses to these recommendations will be given all due consideration. It is true that the Council was incredibly productive in its early years and that the State of Arizona is indeed well served as a result of those accomplishments. The annual Program Inventory, a publication hailed by many outside the state as the finest in the nation, tracks the expenditures of nearly \$65 million for substance abuse education, prevention and treatment from all publicly supported sources. The Inventory provides the best possible base from which ultimately to meet the lone unmet mandate of the Council, a statewide evaluation system.

The statewide evaluation system, not to be confused with individual program evaluation which goes on throughout the state and is often required by federal or state grantors, will have the benefit of looking at the entire package of treatment, education and prevention programs throughout the state and seek out areas of priority and perhaps overlapping of services. The primary stumbling block toward the implementation of a statewide evaluation plan, designed by the Council, is funding, since such implementation is quite costly and often not within the allowable scope of work for funds assigned to and within Arizona for substance abuse prevention, education and treatment. Funds coming to my office, for example, from the U.S. Department of Education - Safe and Drug-free Schools and Communities Act are not to be used for such purposes, which implies that additional funding must be secured in order to "do my share" in contributing to such an endeavor.

It has been my contention for some time that the Council could function more effectively if it could a) meet more often and b) was composed of agency directors or their designees. When a Council is comprised of extraordinarily busy agency directors for whom issues related to substance abuse fall only peripherally within the scope of their day to day work, the effectiveness of the group suffers necessarily. The members of the Council's Working Group, who often sit in for Council members unable to attend, are the people within their respective agencies who have the ear of the directors and who have the expertise to address substance abuse issues, since they are the ones for whom substance abuse represents a substantial component of their job descriptions within those agencies. These individuals could, in fact, meet together more frequently than their directors, vote on action items about which they are knowledgeable and develop comprehensive and forward looking plans with which to return to their respective agencies for discussion and/or approval.

The Council does need to begin the time-consuming process of developing and implementing the use of standardized data as an integral step toward the statewide evaluation. Currently, funders employ for their own reports a wide array of data definitions, such that one could easily run the risk of attempting to compare apples and oranges. In order to develop a standardized approach, the agencies themselves may, in some cases, need to duplicate current efforts, something which may prove costly in time and money. More importantly, that data will need to be housed somewhere, since only a central data bank will prove effective in the difficult task of analysis. Consequently, a thorough review of what data is collected now and how the parameters of that data are defined will allow the first steps of any implementation of a statewide evaluation.

The Recommendations

1. The Legislature should consider amending A.R.S. §41-617(D) to allow the Council to establish data collection standards and develop and prescribe the content of standardized reports.

As mentioned above, such data collection and analysis will be essential in the full implementation of the statewide evaluation and great care must be exercised to ensure that the data being collected will tell the full and most accurate story of the state's substance abuse efforts, but the Legislature should also be aware that the data identification, collection and analysis process will have costs for which there is no current funding.

2. The Legislature should consider requiring that agencies involved in the delivery of substance abuse prevention, education and treatment programs establish provisions for adequate funding of a statewide evaluation program.

It should be noted, as stated above, that many federal grants for the states contain the requirement that the program be evaluated but lack the flexibility to allow for those funds to be applied to a broader evaluation goal. It is the goal of the Governor's Division of Drug Policy that all programs be evaluated for effectiveness, based on a measurable outcome/narrative model.

3. The Legislature should consider amending A.R.S. §41-617(A) to allow agency directors or their designees to serve as council members.

The Governor's office applauds this recommendation and believes that the current composition of the Council limits its effectiveness. The presence of appropriate designees as voting members would allow the Council to move more rapidly toward the implementation of a statewide evaluation, as well as other initiatives and allow the Council to meet more frequently than currently is the case.

4. The Council should ensure that its meetings are focused on action oriented agenda items.

Once the configuration of the Council allows for the presence of designees and more frequent meetings are possible, it will be more easy to focus meetings on actionoriented agenda items. A group of individuals whose primary job descriptions involve substance abuse as a major component will be able to generate more actionoriented items for the Council to consider. The current structure fails to produce a quorum, rendering action impossible.

- 5. The Council should pursue options for funding the statewide evaluation proposal through such avenues as:
- `* dividing the cost among its member agencies;
- changing the Program Inventory from an annual to a biennial basis, and then directing the Center staff used to compile the annual program inventory to conduct the evaluation project; or,
- * seeking external grants.

The Council will need to review at length the implications of changing the Program Inventory into a biennial project. It is an essential piece of any statewide evaluation and the data gatherers who currently work on the inventory are skilled at collecting that data, making the APRC the logical place to house the evaluation data collection. As to the costs, each agency will need to look into its coffers and assess its ability to contribute to such a project, provided the legislature does not intend to appropriate funds for the consummation of this mandate. The Governor's Office and others are seeking external grants to help defray the costs of the evaluation, but the federal government has dramatically reduced funding to the Center for Substance Abuse Prevention at the Department of Health and Human Services, the most logical place to seek external monies for a project of this kind.

6. The Council should increase its involvement in gang prevention efforts and oversight of the Center by:

* ensuring the annual inventory includes gang prevention programs; and

* requiring the Center to regularly update the Council on its activities.

Many of the programs in the current inventory deal with the development of more resilient youth and are, in fact, gang prevention programs as much as they are substance abuse prevention programs. There are funds currently being expended designed to relate specifically to street gangs, and it is appropriate that the inventory reflect those efforts as well. It is often difficult to delineate clearly between drug and gang prevention programming since the majority of programs statewide seek to respond to a wide array of potentially poor decisions by young people.

The Arizona Prevention Resource Center (now the Arizona Drug and Gang Prevention Resource Center) reports at each meeting of the Council on activities and issues related to substance abuse, inventory and evaluation. The Council has not routinely been apprised of the Center's operational activities and projects unrelated to Council business. The Center receives only 15% of its funding from state monies, and it reports frequently to the Council. I would ask that the recommendation be clarified regarding appropriate reporting and oversight.

The Drug and Gang Policy Council serves as a strong example of the positive collaboration between and among agencies involved in important issues. With a most daunting dream, the erradication of substance abuse in Arizona, the Council will continue to work as a body, dedicated to the most effective coordination of services possible and to serve the Governor and the people of Arizona with skill and determination.

Sincerely,

Rick Kidder Director

APPENDICES

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Appendix A

Comprehensive Strategic Plan

The Drug and Gang Policy Council has identified 27 initial strategies that it believes the State must address in order to meet its objective. These strategies are being planned, developed, and implemented by state agencies working in a collaborative manner. The strategies, with the agency responsible for taking the lead role indicated in parentheses, are as follows:

- Develop a statewide program inventory and database. (Arizona Prevention Resource Center)
- Develop a cohesive community mobilization system. (Governor's Office of Drug Policy)
- Develop standards for substance abuse prevention programming. (Department of Health Services)
- Develop minimum competencies and skills for prevention personnel. (Department of Health Services)
- 5) Develop a "Central Coordinating Office." (Governor's Office)
- 6) Develop an integrated prevention delivery training system. (Arizona Prevention Resource Center)
- 7) Develop an integrated treatment delivery training system. (Department of Health Services)
- B) Develop a coordinated method for submission of substance abuse related funding and legislative proposals.
 (Governor's Office)
- 9) Develop a "translation system" for legislators and policy makers that includes trend analysis and research compilation. (Arizona Prevention Resource Center)
- 10) Develop standardized contracting systems. (Governor's Office)

Appendix A (con't)

- 11) Develop a "Children/Youth Centralized Diagnostic System," which includes high risk and need-based placement recommendations and treatment services for all children. (Department of Health Services)
- 12) Develop models for training parents about substance abuse. (Arizona Department of Education)
- 13) Develop prevention programming as both instruction and training within pertinent colleges at state universities and community colleges.
 (Arizona Prevention Resource Center)
- 14) Develop standards for substance abuse treatment programming. (Department of Health Services)
- 15) Develop diagnostic and treatment services for adults in the criminal justice system. (Department of Corrections)
- 16) Develop coordination systems within juvenile corrections among the courts, Criminal Justice Commission, and counties.
 (Governor's Office)
- 17) Develop a tracking system for substance-abusing clients receiving services from different agencies.
 (Governor Central Coordination Office)
- 18) Develop follow-up and after-care services for substance-abusing clients subsequent to their receiving primary services from different agencies. (Department of Health Services)
- 19) Develop a statewide Drug-Free Workplace system, which includes plans, policies, and programs.
 (Governor's Office)
- 20) Develop a system of comprehensive prevention programming for the entire K-12 population.
 (Arizona Department of Education)
- Establish an ongoing strategic planning process that includes evaluation of existing efforts and revisions to the State Strategy each year.
 (Governor's Office)

Appendix A (concl'd)

- 22) Develop a single, coordinated statewide anti-drug strategy that incorporates the Drug Policy Council's State Strategy for Substance Abuse Prevention, Education, and Treatment, and the Criminal Justice Commission's Drug Enforcement Strategy. (Governor's Office)
- 23) Develop a statewide substance abuse prevention, education and treatment evaluation plan that includes the assessment of results achieved by specific programs, delivery systems, and structures supported by public funds; the component costs of these programs compared to law enforcement and incarceration; and the overall results achieved by the collective efforts of prevention, education, and treatment programs. (Governor Central Coordinating Office)
- 24) Develop a coordinated statewide media strategy. (Governor's Office of Drug Policy)
- 25) Develop a cooperative intergovernmental relationship with tribal governments in the State to develop substance abuse programming.
 (Governor's Office)
- 26) Develop Drug Free/Safe School Zone Programs. (Attorney General's Office)
- 27) Develop a system of comprehensive prevention programming for the out-of-school youth population.
 (Arizona Prevention Resource Center)

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Appendix B

Arizona Prevention Resource Center Description of 1994-95 Grants Awarded

Title: Description: Sponsor: Amount: Period Covered:	Child Nutrition Education Resources Developed appropriate child nutrition materials by the clearinghouse and arranged for bulk distribution to targeted user groups Arizona Department of Education \$30,000 04/01/94 - 09/30/94
Title: Description: Sponsor: Amount: Period Covered:	National & Community Service/School to Work Strategic Planning & Technical Assistance An intergovernmental agreement with APRC to work with gubernatorial appointed boards and commissions in planning federally funded activities; conceptualize, design, develop programs and proposals Governor's Office of Community Programs and Public Outreach \$123,687 05/03/94 - 09/30/95
Title: Description: Sponsor: Amount: Period Covered:	Treatment Evaluation System Project Development of outcome based evaluation system for treatment services; includes formulation of measurement package and administrative decision-making model Tri City Behavioral Services \$11,250 06/01/94 - 02/28/95
Title: Description: Sponsor: Amount: Period Covered:	Project Success Evaluation Year 2 * Continue evaluation services for second year of alternative activity/parent involvement K-8 prevention program Crane Elementary School District (USDDE, Federal Activities Grant Program) \$11,000 08/01/94 - 07/31/95
Title: Description: Sponsor: Amount: Period Covered:	Tobacco Prevention and Control Plan Development of statewide design for tobacco prevention and education Arizona Department of Health Services \$9,720 09/01/94 - 10/15/94
Title: Description: Sponsor: Amount: Period Covered:	Storytelling as Culture: A Prevention Strategy * Statewide conference featuring storytelling as a prevention strategy for several culture settings Affiliated Tribes of Arizona (DHHS, Center for Substance Abuse Prevention) \$4,000 10/01/94 - 03/31/95

* Substance abuse related grants.

Appendix B (con't)

Title: Description: Sponsor: Amount: Period Covered:	Storytelling for Empowerment Project* Evaluation services for Center for Substance Abuse high risk youth project that will utilize storytelling as a prevention curriculum model for junior high youth on Tohono O'odham Reservation Affiliated Tribes of Arizona (DHHS, Center for Substance Abuse Prevention) \$22,605 plus \$242,045 primary grant to sponsor 10/01/94 - 09/30/95 (expected to continue for 5 years)
Title: Description: Sponsor: Amount: Period Covered:	Border Volunteer Corps Evaluation Provide baseline, outcome and process measures to project and 24 local project sites to determine project effects and to develop turnkey evaluation resources for second imple- mentation year of project Arizona-Mexico Commission \$63,000 08/01/94 - 07/31/95
Title: Description: Sponsor: Amount: Period Covered:	Phoenix Community Partnership * Year-one evaluation services for five-year community partnership project; will include baseline measures, analysis of community interaction for neighborhood development; will also include comparison city Center for Substance Abuse Prevention (through the City of Phoenix) \$350,000 plus \$1,725,497 primary grant to sponsor 10/01/94 - 09/30/95
Title: Description: Sponsor: Amount: Period Covered:	Mesa Project * Continued evaluation of five-year project; will include end project outcome measures, including student survey, assessment of programs assumed by community, and develop- ment and adoption of community prevention plan Samaritan Behavioral Health Services (DHHS, Center for Substance Abuse Prevention) \$35,600 01/01/95 - 12/31/95
Title: Description: Sponsor: Amount: Period Covered:	Arizona Smokeless States Initiative * Part of a statewide "smokeless states" initiative funded by the Robert Wood Johnson Foundation. APRC will develop materials and training under the "Community Tobacco Use Prevention Strategies" component Robert Wood Johnson Foundation (through American Cancer Society) \$65,975 plus \$649,751 primary grant to sponsor 01/01/95 - 12/31/96

^{*} Substance abuse related grants.

Appendix B (con't)

Title:	National & Community Service/School to Work Strategic Planning & Proposal Writing
Description:	Technical Assistance for the Arizona's National and Community Service School to Work Programs
Sponsor: Amount: Period Covered:	Governor's Office of Community Programs and Public Outreach \$10,000 (amendment to existing grant) 05/03/94 - 09/30/95
Title: Description:	Project Success II Evaluation* Continues year two evaluation of prevention program providing mentoring, peer counsel- ing, and general prevention activities
Sponsor: Amount: Period Covered:	Crane Elementary School District (USDDE, Federal Activities Grant Program) \$11,000 03/01/95 - 02/28/96
Title: Description:	Phoenix Weed N' Seed Program Evaluation * Evaluation of community mobilization integrated services intervention in Phoenix's Garfield Neighborhood
Sponsor: Amount: Period Covered:	Bureau of Justice Assistance, US Department of Justice, Weed & Seed Program \$37,500 plus \$712,500 primary grant to sponsor 04/01/95 - 09/30/95
Title: Description:	Child Nutrition Education Needs Assessment Evaluation of legal, nutrition education program and staff technical assistance needs for the purpose of planning, designing nutrition education and training programs to a variety of
Sponsor: Amount: Period Covered:	providers' statewide activities Child Nutrition Unit/Arizona Department of Education \$17,800 02/01/95 - 09/30/95
Title: Description:	BABES Program Evaluation * APRC conducted a program outcome evaluation of two local child abuse prevention programs associated with alcohol abuse. The sites were Creighton Elementary School in Phoenix and Sacaton Elementary School on the Gila Indian Reservation. The evaluation involved student pre-post testing and staff interviews.
Sponsor: Amount: Period Covered:	National Council on Alcohol and Drug Dependence, Arizona Chapter \$9,500 plus \$19,000 grant to Sponsor from ADE Comprehensive Health Unit 01/01/95 - 06/30/95

^{*} Substance abuse related grants.

Appendix B (concl'd)

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Amount:\$4,000 03/01/95 - 08/30/95Title:Community Mobilization (TEAM) Training of Trainers* This project delivered a revised community mobilization training of trainers program to 25 Arizona preventionists. The revised training featured increased simulation experiences and increased facilitation skill development.Sponsor:Southwest Regional Center for Drug Free Communities, USDDE \$5,000	Title: Description:	Adolescent Health Training This project developed and delivered two trainer sessions to develop participant skills in assessing adolescent health and health risks. The first session provided training to 32 teachers, nurses, behavioral health workers, and social service providers. The second session was specially designed for 26 physicians and nurses to apply the skills in ongoing hospital education programs.
Period Covered:03/01/95 - 08/30/95Title:Community Mobilization (TEAM) Training of Trainers*Description:This project delivered a revised community mobilization training of trainers program to 25 Arizona preventionists. The revised training featured increased simulation experiences and increased facilitation skill development.Sponsor:Southwest Regional Center for Drug Free Communities, USDDE \$5,000	Sponsor:	Arizona Department of Health Services, Office of Women and Children's Health
Title:Community Mobilization (TEAM) Training of Trainers*Description:This project delivered a revised community mobilization training of trainers program to 25 Arizona preventionists. The revised training featured increased simulation experiences and increased facilitation skill development.Sponsor:Southwest Regional Center for Drug Free Communities, USDDE \$5,000		
Description:This project delivered a revised community mobilization training of trainers program to 25 Arizona preventionists. The revised training featured increased simulation experiences and increased facilitation skill development.Sponsor:Southwest Regional Center for Drug Free Communities, USDDE \$5,000	Period Covered:	03/01/95 - 08/30/95
 Arizona preventionists. The revised training featured increased simulation experiences and increased facilitation skill development. Sponsor: Southwest Regional Center for Drug Free Communities, USDDE Amount: \$5,000 	Title:	Community Mobilization (TEAM) Training of Trainers*
Amount: \$5,000	Description:	Arizona preventionists. The revised training featured increased simulation experiences and
	Sponsor:	Southwest Regional Center for Drug Free Communities, USDDE
	Amount:	\$5,000
Period Covered: 07/01/94 - 12/31/94	Period Covered:	07/01/94 - 12/31/94

^{*} Substance abuse related grants.