



State of Wisconsin
Department of Health Services

Tony Evers, Governor
Andrea Palm, Secretary

January 28, 2020

The Honorable Tony Evers
Governor
115 East State Capitol
Madison, WI 53702

Dear Governor Evers:

I am pleased to submit the Wisconsin Department of Health Services (DHS) 2018 Annual Report to the Governor on Activities relating to Substance Abuse Prevention and Treatment in Wisconsin. The report was prepared in accordance with Wis. Stat. § 51.45(4)(p), which requires DHS to submit an annual report on substance abuse treatment and prevention services. The report highlights substance abuse prevention, treatment, and recovery programs administered by the DHS Division of Care and Treatment Services.

Substance use disorders remain a significant challenge for individuals, families, and communities across Wisconsin. Successful implementation of evidence-based programs and new initiatives as described in this report supports our goal of Wisconsin becoming the nation's healthiest state, and a place where our young people can grow up safe, healthy, and ready to pursue their opportunities for success.

Sincerely,

A handwritten signature in black ink, appearing to read 'Andrea Palm', written over a horizontal line.

Andrea Palm
Secretary - designee

Enclosure

2018 Annual Report to the Governor on Activities Relating to Substance Abuse Prevention and Treatment



WISCONSIN DEPARTMENT
of **HEALTH SERVICES**

Division of Care and Treatment Services

P-01023-2018 (12/2019)

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BACKGROUND

In 2018, the Department of Health Services (DHS) administered \$27,200,848 in federal Substance Abuse Prevention and Treatment Block Grant (SAPTBG) funds and more than \$10 million in substance use funds from other federal and state sources. The Division of Care and Treatment Services (DCTS) oversees most DHS substance use programs in partnership with county and community agencies. DCTS also provides staff services to the State Council on Alcohol and Other Drug Abuse, a governor-appointed body responsible for promoting effective alcohol and drug use disorder prevention and treatment policies. Unless otherwise noted, this report highlights the activities related to substance use prevention and treatment efforts DCTS administered during calendar year 2018.

Need for Activities Relating to Substance Use and Addiction

National. During 2018, there were approximately 20.3 million people aged 12 or older with a substance use disorder (Substance Abuse and Mental Health Services Administration [SAMSHA], 2019). The costs related to the loss of productivity, health, and crime total more than \$740 billion annually (National Institute on Drug Abuse, 2017). It is estimated that about 21.2 million people nationwide were in need of substance use treatment; in 2018, about 3.7 million people received substance use treatment (SAMSHA, 2019).

Wisconsin overdose deaths involving an opioid more than doubled from **6.9** (2009) to **16.7** (2017) per 100,000 population.

Wisconsin. Substance use and misuse are important health concerns affecting Wisconsin. In 2017, approximately 8.1% of people in Wisconsin had a substance use disorder (SAMHSA, 2019). Table 1 presents the prevalence of Wisconsin's youth and adults who used various mood-altering, habit-forming substances. Substance misuse and addiction pose significant health, social, public safety, and economic problems in Wisconsin (National Institute on Drug Abuse, 2017; DHS, 2016). Data produced in the Wisconsin Epidemiological Profile on Alcohol and Other Drug Use (2016) estimate that alcohol was a factor in at least 2,008 deaths and 2,907 motor vehicle crash injuries in Wisconsin in 2015.

Deaths in Wisconsin relating to drugs have been increasing over the last decade. The age-adjusted rate for mortality related to drugs increased from 10.9 in 2009 to 21.5 deaths per 100,000 population in 2017 (Table 1). Deaths involving heroin and prescription opioids also increased from 2006 to 2017 (Table 2; Wisconsin Interactive Statistics on Health [WISH], 2019).

The impacts of drug use, specifically focused on opioids, are demonstrated in hospital data as well as death records. Since 2005, the rate of opioid-related hospital discharges has increased steadily. The age-adjusted rate of opioid-related discharges has significantly increased from 252.7 in 2009 to 475.4 per 100,000 population in 2017; the age-adjusted rate of heroin-related hospital encounters increased from 5.2 in 2009 to 41.9 per 100,000 population in 2017 (WISH, 2019).

Wisconsin overdose deaths involving cocaine more than tripled from **1.4** (2009) to **4.8** (2017) per 100,000 population.

Alcohol and drug use and misuse also affect the criminal justice system. In 2017, there were 31,172 arrests relating to drug violations in Wisconsin. Of those, about 11% were juvenile arrests (Department of Justice, 2019).

Table 1. Wisconsin Substance Use Percentage Estimates Age 12 and over

Substance Use Measure	2014-2015 Survey		2016-2017 Survey	
	Wisconsin	U.S.	Wisconsin	U.S.
Past month alcohol use	60.4%	52.2%	61.6%	51.2%
Past year marijuana use	12.1%	13.4%	12.7%	14.5%
Past year cocaine use	1.6%	1.8%	2.0%	2.0%
Past year heroin use	0.3%	0.3%	0.4%	0.3%
Past year pain reliever misuse*	--	--	3.8%	4.2%

*This question was added for the 2015-2016 NSDUH, therefore no data exists for the 2014-2015 survey
Source: SAMSHA, 2017; SAMHSA, 2019. (National Survey on Drug Use and Health)

Table 2. Wisconsin Drug Overdose Death Rate

Drug Involvement	2009	2013	2017
Total Drug Overdose Deaths	10.9	14.8	21.5
Drug overdose deaths involving any opioid	6.9	10.5	16.7
Drug overdose deaths involving prescription opioids	4.5	5.7	6.4
Drug overdose deaths involving heroin	1.4	4.2	7.7
Drug overdose deaths involving cocaine	1.4	1.5	4.8
Drug overdose deaths involving benzodiazepines	2.5	4.3	4.1

Source: WISH, 2019. Age-adjusted rate per 100,000 people.

PREVENTION-RELATED ACTIVITIES

Substance Abuse Prevention and Treatment Block Grant

The Substance Abuse Prevention and Treatment Block Grant is a federal program that provides funds to all 50 states to help plan, implement, and evaluate activities to prevent and treat substance misuse and addiction and promote public health. Based on a formula approved by the state legislature, DHS annually distributes \$9.7 million in community aids from this block grant directly to Wisconsin’s 72 counties. At least 20 percent of these funds must be spent on prevention activities. The remaining funds are expended for treatment and recovery support services, including a minimum of 10 percent allocated for women’s treatment services. Prevention services funded under the block grant must be evidence-based to ensure the greatest impact and highest quality services. In 2018, the following priority areas continued to be targeted by prevention service providers:

- Underage drinking (ages 12-20).
- Adult binge drinking (ages 18-34).
- Drinking among pregnant women.
- Drinking and driving (especially among people ages 16-34).
- Opioid use for nonmedical purposes (especially among people ages 20-54).

Table 3 shows alcohol and drug use data among Wisconsin youth ages 12-17.

Table 3. Wisconsin Substance Use Percentage Estimates Ages 12-17

Substance Use Measure	2014-2015		2016-2017	
	Wisconsin	U.S.	Wisconsin	U.S.
Any alcohol use in the past month	11.3%	10.6%	10.7%	9.5%
Past year marijuana use	14.0%	12.9%	12.6%	12.2%
Past year cocaine use	0.7%	0.6%	0.6%	0.5%
Past year heroin use	0.1%	0.1%	0.1%	0.1%
Past year pain reliever misuse*	-	-	3.0%	3.3%

*This question was added for the 2015-2016 NSDUH, therefore no data exists for the 2014-2015 survey

Source: SAMSHA, 2017; SAMHSA, 2019 (National Survey on Drug Use and Health)

DHS collects information from counties and other local prevention providers funded under the block grant through the Substance Abuse Prevention-Services Information System (SAP-SIS). Table 4 shows the number of people reached with prevention program services in 2018 compared to their distribution in the general population.

Table 4. Race/Ethnicity Distribution: General Population vs. People Reached

Race/Ethnicity	Percent of General Population	Percent of People Reached Thru Prevention Programs
Native American	1.2%	1.2%
Asian	3.0%	2.8%
African American	6.7%	13.1%
Hispanic/Latino	6.9%	8.6%
Caucasian	87.1%	74.0%

Source: SAP-SIS, DHS 2018.

Table 5 provides a snapshot of the types of county and other local prevention services provided across the state in 2018.

Table 5. Types of Prevention Programs, 2018

Prevention Program Type	Percent of Prevention Programs (n=246)
Population Risk Level Classification	
Universal Indirect (coalitions; policies)	34%
Universal Direct (general population; unknown risk)	42%
Selective (at-risk populations)	15%
Indicated (substance users; high-risk populations)	8%
Most Common Kinds of Activities	
Multiagency coordination and collaboration; coalitions	20%
Ongoing classroom and/or small group sessions	20%
Other activity	22%
Education programs for youth groups	10%
Parenting and family management	3%
Speaking engagements	3%

Source: SAP-SIS, DHS 2018.

Alliance for Wisconsin Youth

Wisconsin Stat. §§51.45(7)(b)7 and 250.04(4)(a) require DHS to establish a program of prevention and intervention services. One of these programs is delivered through the Alliance for Wisconsin Youth, which brings together community coalitions, individuals, and resources to positively impact youth by preventing substance misuse and addiction and other behavioral health concerns. The Alliance for Wisconsin Youth supported 107 community prevention coalitions across the state in 2018.

In partnership with DHS, the Alliance for Wisconsin Youth created regional prevention centers. Through these regional prevention centers, which have contracts with DHS, the Alliance for Wisconsin Youth provides a statewide infrastructure for prevention activities by assisting community coalitions to accomplish DHS and Alliance for Wisconsin Youth priorities and projects. In 2018, the Regional Prevention Centers:

- Awarded minigrants to local prevention coalitions to work on the state’s five priorities and implement the Strategic Prevention Framework (SPF).
- Provided prevention training, technical assistance, and support on:
 - How to become culturally competent in programming.
 - How to identify substance-impaired individuals and types of substances through the use of Drug Impairment Training for Educational Professionals; for example, teachers, health care providers, law enforcement, youth serving agencies, and interested parents.
 - How to establish secure medication take back and drop-off sites.
 - How to implement community alcohol policy changes.
 - How to influence counties’ use of the 20 percent block grant prevention set-aside.
 - Advanced Roadside Impaired Driving Enforcement Training for law enforcement officers to gain skills to address the gap between standardized field sobriety testing and drug recognition experts.
 - The SPF through four-day Substance Abuse Prevention Skills Training (SAPST) events.
 - Ethics in prevention for prevention professionals.
 - Quarterly meetings with member coalitions in which prevention education was provided along with the opportunity for coalitions to network, coordinate, and plan for future prevention efforts.

In 2018, the Alliance for Wisconsin Youth also coordinated Wisconsin’s “Parents Who Host, Lose the Most” public awareness campaign; 42 community coalitions participated. The campaign encourages parents and law enforcement to partner together to prevent teen drinking.

The Alliance for Wisconsin Youth, in partnership with the Division of Public Health/DHS, hosted a two-day training event on opioid prevention messaging with 113 participants registered from local public health departments, tribal health clinics, and substance use prevention coalitions. Participants learned about data visualization techniques to enhance presentations and message framing to change the conversation on opioids that inspire community action.

Per the Governor’s Executive Order #273, DHS convened a Governor’s Faith-Based Summit on Opioids for pastors, priests, parish nurses, and others involved in faith-based community organizations confronting prevention, intervention, recovery, and criminal justice consequences of the opioid public health crisis. To fulfill this order, the Regional Prevention Centers hosted three summits in October 2018 across Wisconsin and had 240 people register.

Program Name	Counties Participating	Annual Funding Amount	Organizations Served in 2018
Alliance for Wisconsin Youth	Five regional prevention centers covering the state	\$579,595	107

Department of Justice Youth Diversion Program

DHS, in partnership with the Department of Justice and the Social Development Commission, Milwaukee, funded alcohol and other drug abuse education and treatment services for participants in that organization's youth diversion program, pursuant to Wis. Stat. §165.987.

In 2018, prevention, intervention, and treatment activities included:

- Educating youth and parents/guardians about alcohol, tobacco, and other drug abuse issues to identify the consequences of substance use, risk behaviors, and implement resilience coping skills, school engagement, communication, anger management, gang resistance, vocational skills, and drug-free recreation.
- Sharing information about the predatory practices of tobacco and alcohol companies and youth-focused alcohol, tobacco, and drug prevention efforts.
- Screening for substance misuse and addiction through client-centered interviews.
- Providing counseling services in an outpatient setting or referral to other treatment services.

Program Name	County Participating	Annual Funding Amount	People Served in 2018
DOJ Youth Justice Diversion	Milwaukee	\$281,600	1175

Community Improvement and Job Training Program

Wisconsin Community Services, Milwaukee, through a contract with DHS under Wis. Stat. §46.48(26), works with at-risk minority youth and young adults in Milwaukee to address job readiness, employability, gang affiliation, and substance use. In 2018, the Community Improvement and Job Training Program provided mentoring, job readiness workshops, career fairs, drivers’ education support, job skill education, substance use disorder prevention education, violence prevention workshops, community building activities, and internship placements.

Program Name	County Participating	Annual Funding Amount	People Served in 2018
Community Improvement Job Training	Milwaukee	\$250,000	118

Wisconsin Wins

Federal law imposes a penalty—a reduction in Substance Abuse Block Grant funds—if a state fails to meet an approved threshold (10% or less) on underage tobacco sales to minors. The measure is the percentage of minors who are able to purchase tobacco during merchant compliance checks.

Federal law requires states to conduct an annual survey to determine retailer violation rates for underage tobacco sales. Implemented in 2001, *Wisconsin Wins* is an evidence-based, statewide initiative designed to decrease youth access to tobacco products through retail compliance checks and retailer education. The program provides free, online training to retailers at www.WITobaccoCheck.org. Because of the activities of Wisconsin Wins, the state has stayed well below the national average of 10 percent noncompliance. In 2018, Wisconsin’s noncompliance rate was 5.8 percent.

Retail Cigarette Sales to Minors: Noncompliance Rates	
Year	Rate
2009	5.7%
2010	4.7%
2011	5.0%
2012	5.4%
2013	7.3%
2014	6.4%
2015	6.8%
2016	7.2%
2017	7.7%
2018	5.8%

Problem Gambling Awareness Campaign

According to published national studies, there are an estimated 232,525 persons in Wisconsin who have a problem with gambling. Their average debt in 2018 was \$76,821. The societal costs of problem gambling to Wisconsin are estimated at \$10,000 per gambler in lowered productivity, crime, and health care costs. DHS contracted with the Wisconsin Council on Problem Gambling to carry out a statewide problem gambling awareness campaign and to staff a 24-hour toll-free Helpline (1-800-GAMBLE-5), Text and Chat lines. The Helpline received 13,869 calls during 2018, including calls from individuals contemplating suicide, who committed crimes, in extreme debt, and without homes due to gambling. Callers are referred to counseling services and Gamblers Anonymous meetings in their communities. The Wisconsin Council on Problem Gambling also hosts an annual conference for professional counselors with workshops on how to serve people with problem gambling issues. The Wisconsin Council on Problem Gambling provides a 60-hour training program for therapists who want to treat compulsive gamblers. The therapists may become resources on the Helpline. The Wisconsin Council on Problem Gambling communicated through social media, including Facebook (adult and adolescent), Twitter, LinkedIn, Pinterest, and YouTube.

Program Name	Counties Participating	Annual Funding Amount	People Served in 2018
Problem/Compulsive Gambling Awareness, Wis. Stat. § 46.03(43)	Statewide	\$396,000	13,869 (helpline calls)

Tribal Initiatives

In 2018, DHS again provided more than \$1 million in SAPTBG funds to Wisconsin’s 11 federally recognized Native American tribes to address substance use disorder prevention, under the Tribal Family Services Program authorized by Wis. Stat. § 46.71(1). Tribes also received funding to provide Coordinated Services Teams (CST) initiatives. DHS staff worked with the tribes to identify the extent of the tribal prescription drug use problem and determine appropriate interventions, including scheduling speakers and ongoing treatment discussions for systems change meetings.

Program Name	Tribes Participating	Annual Funding Amount	No. of Persons or Families Served in 2018
Tribal Family Services	All 11 Tribes	\$1,138,900	2,249 (unduplicated)

FEDERAL DISCRETIONARY GRANTS FOR PREVENTION

Strategic Prevention Framework Partnerships for Success Grant (SPF-PFS) Program

In 2015, SAMHSA awarded Wisconsin an SPF-PFS grant for up to five years, primarily to address prescription drug misuse among people ages 12-25. This primary prevention program is designed to prevent the onset and reduce the progression of substance use and its related problems while strengthening prevention capacity and infrastructure at the state, tribal, and community levels. DHS subcontracted for evidence-based prevention efforts in 14 high-need counties and tribes. In 2018, oversight, training, technical assistance, and direct funding was provided by the Alliance for Wisconsin Youth's Regional Prevention Centers to local prevention coalitions in each of the 14 high-need communities. Specific local activities included public awareness, targeted education about the misuse of habit-forming prescription medications, prescription drug monitoring program training, safe medication disposal, surveillance of community substance-related data, and collaborative prevention activities with health care providers, schools, and law enforcement. The Great Lakes Inter-Tribal Council also received a Partnerships for Success (PFS) grant. While DHS has directly funded the Menominee Indian Tribe of Wisconsin, Great Lakes Inter-Tribal Council works with four additional tribes through its PFS grant. DHS staff collaborates with Great Lakes Inter-Tribal Council on shared grant priorities.

Community education efforts took place in all funded communities. Highlights of education efforts that took place in 2018 included:

- Media efforts included 16 billboards, 23 print ads in magazines and newspapers, 20 radio ads aired in seven counties, 16 television ads aired in four counties; nine counties had other media activities, including ads or PSAs in movie theaters and electronic banners at sporting events.
- Print items included the distribution of 44,204 brochures, 615 posters, and 213,166 other items such as magnets and calendars.
- There were a total of 73 community meetings with 7,555 attendees; 85 special events reaching 8,567 individuals; and 102 promotional activities reaching 31,758 individuals.
- One county implemented an education campaign (Generation Rx) on a college campus, reaching seven college students.
- Two-hundred-seventy (270) individuals participated in LifeSkills Training.
- One community held a prescriber education training with 65 attendees.
- Twenty-six (26) individuals participated in Substance Abuse Prevention Specialist Training.
- Eleven (11) individuals attended Question, Persuade, Refer presentations.
- Seventy (70) individuals participated in Drug Impairment Training for Educational Professionals.

Other notable successes included: holding Hiding in Plain Sight/mock bedrooms in several communities; showings of the "Written Off" documentary at community events; well attended Pow Wows; school and older adult-focused events; and creatively using prevention messaging on sports calendars, coffee sleeves, wrist bands, pop sockets, beach balls, and other items.

Law enforcement efforts in 2018 included:

- Fifteen (15) officers trained as drug recognition experts.
- Targeted interceptions of illegal drugs were conducted on eight occasions, resulting in 14 drug arrests and 15 misdemeanor drug charges.
- Fifteen (15) officers participated in Advanced Roadside Impaired Driving Enforcement training.

In 2018, the SPF-PFS grant funding also supported prescription drug security, collection, and disposal efforts in the funded communities. These efforts included:

- Lock boxes distributed: 2,627
- Disposal items distributed: 2,554

- Pounds of medication collected from drop boxes and through takeback events: 17,237
- New drop boxes installed: 1
- Takeback events: 61

Program Name	Counties/Tribes Participating	Annual Funding Amount
Strategic Prevention Framework Partnership for Success	Ashland, Columbia, Dane, Douglas, Eau Claire, Florence, Forest, Kenosha, Marinette, Menominee Tribe, Milwaukee, Oneida, Rock, and Vilas	\$1,648,188

Strategic Prevention Framework for Prescription Drugs

In 2016, DHS received a \$1,858,080 five-year grant (\$371,616 per year) to implement the Wisconsin Strategic Prevention Framework for Prescription Drugs (SPF Rx) project. SPF Rx aims to raise awareness about the dangers of sharing medications, promote safe opioid prescribing practices, reduce prescription drug misuse and related consequences, strengthen prevention capacity and infrastructure at the state and community levels, and leverage, redirect, and align statewide funding streams and resources for prevention. Through a data-driven needs assessment, the counties of Sauk and Dodge were identified as the target communities for this project.

In 2018, substance use prevention coalitions were formed in Sauk and Dodge counties. Coalition members had the opportunity to attend high-quality state and national substance use conferences to learn about prevention fundamentals as well as best practices in substance use prevention. These opportunities have helped members increase and develop the capacity of the coalitions, and will ensure that the coalitions have the resources to continue prevention work in the long term. Through this grant project, Drug Recognition Expert (DRE) training and Crisis Intervention Team (CIT) training was provided to community law enforcement. Drug Identification Training for Education Professionals (DITEP) was provided to local educational professionals. In late 2018, a mail-based community survey on prescription opioid use was distributed in Sauk and Dodge counties. The results of this baseline survey will help to monitor community perspectives on prescription opioids before, during, and after the Dose of Reality public education campaign is implemented in the counties of focus. The community survey results will also be used to monitor effectiveness of the campaign.

State Epidemiological Outcomes Workgroup

Surveillance of substance use issues and evaluation of prevention efforts are the tasks of the DHS State Epidemiological Outcomes Workgroup. This workgroup includes staff from DHS (divisions of Care and Treatment Services and Public Health), the Department of Public Instruction, the Department of Justice, the University of Wisconsin-Madison, Wisconsin Alcohol Policy Project, and the Great Lakes Inter-Tribal Council. The DHS State Epidemiological Outcomes Workgroup receives funds from SAMHSA. In 2018, this group produced and published fact sheets on suicide, mental health and substance use, and substance use and other mental health disorders among veterans. The fact sheets were distributed at conferences and trainings and through the Alliance for Wisconsin Youth to member coalitions and their prevention partners. The State Epidemiological Outcomes Workgroup worked on collecting data that is found in the biannual Wisconsin Epidemiological Profile on Alcohol and Other Drug Use Report, and the workgroup has started to coordinate and create data dashboards that have automated up-to-date data available on the DHS website.

TREATMENT AND RECOVERY-RELATED ACTIVITIES

Substance Abuse Prevention and Treatment Block Grant

Typically, approximately 75 percent of the Substance Abuse Prevention and Treatment Block Grant is expended for treatment and recovery support services. In 2018, more than \$60 million in block grant, county tax levy, county revenue, and other state and federal funds were expended by county agencies to provide substance use treatment and support services for 31,448 people.

In 2018, county agencies reported the following treatment service outcomes for people having substance use diagnoses:

Table 5. Wisconsin Addiction Treatment Outcomes

Outcome Measure	2018 Outcome
Completed treatment	59%
At discharge, no drug use in the past 30 days*	76%
Employed at discharge*	55%
Not Rearrested at discharge*	88%

*Includes data on people completing treatment only.
Source: DHS Program Participation System

Intoxicated Driver Program

DHS oversees county-designated screening, referral, treatment, and case management services for drivers convicted for operating under the influence per Wis. Stat. § 343.30(1q). The program's purpose is to engage the intoxicated driver in assessment, education, and treatment services that address the person's inclination to drive under the influence and their substance use problems so that the person may regain safe driving capability. The assessment program is self-supporting through collection of Intoxicated Driver Program assessment fees. In addition, the county retains approximately half of the driver improvement surcharge paid by offenders to support the treatment of impaired drivers. Supplemental or emergency funds are available to counties that face excess treatment costs of impaired drivers.

Program Name	Counties Participating	Annual Funding Amount	People Served in 2018
Intoxicated Driver Program	All	Self-supporting	24,450
Supplemental/Emergency Funds	16 counties	\$744,099	Not Available

Other Criminal and Juvenile Justice Alternatives

A principal point of entry into treatment and recovery is the justice system. DHS administers or serves as partner on four activities that address addiction treatment among justice system populations. Screening, assessment, treatment, and monitoring services are provided.

2018 Fact Sheet County Authorized People Served:	
31,448 in CY 2018	
Substance Use:	
Alcohol	55.2%
Opioids	16.4%
Marijuana	18.2%
Cocaine	8.5%
Methamphetamine	6.6%
Gender:	
Male	67.6%
Female	32.4%
Age:	
Under 18	2.5%
18-39	31.8%
30-39	29.1%
40-49	17.2%
50-59	14.0%
Over 59	5.3%
Race/ethnicity:	
White	78.1%
Black	9.6%
Amer. Indian	2.2%
Asian	3.0%
Multiracial	2.9%
Hispanic	6.2%
Treatment modality*:	
Outpatient	75.8%
Detox	19.0%
Day Treatment	0.5%
Residential-Short	4.3%
Inpatient	0.5%
<i>*Not including intakes, crisis services, daily living skills, case management</i>	

Program Name	Counties Participating	Annual Funding Amount	People Served in 2018
AODA Juvenile Justice, Wis. Stat. §§ 48.547 and 938.547	Dane, Kenosha, Milwaukee, Portage, Rock	\$1,338,000	1,516
Treatment Alternative Program, Wis. Stat. § 46.65	Dane, Dodge, Eau Claire, Rock	\$900,962 (\$726,300 SAPTBG; \$174,662 State Funds)	297*
Department of Corrections Youth and Adult Institution, Halfway House, and Community Treatment	Selected high-need populations throughout the state	\$1,347,417	544*
Prisoner Reintegration (housing, employment, education, and treatment), Wis. Stat. § 46.48(8)(b)	Milwaukee, via Wisconsin Community Services	\$250,000	253

* Number served was calculated from numbers estimated on the application/grant proposal and twice yearly performance reports submitted by the programs

Treatment Alternative Program (TAP)

DHS offers grants to agencies to provide alcohol or other drug abuse services as a treatment alternative in lieu of imprisonment. TAP funds are used to provide treatment, case management, and recovery coaching to eligible individuals. Eligibility is determined using evidence-based risk and needs assessments, and the programs enroll moderate to high-risk individuals. TAP programs are funded in part with SAPTBG and in part with GPR funds. TAP programs may work in cooperation with TAD-funded (DOJ) programs to enhance services or can be operated independently as pre-trial diversion programs. More than 3,550 days of incarceration have been averted through participation in these programs.

Department of Corrections (DOC)

DHS offers grants to the Wisconsin Department of Corrections to provide substance use services to justice-involved individuals both within state institutions as well as in the community. Four separate grants are offered to serve community corrections (including a tribal focus), youth, and females. The funds are used to provide substance use services to females prior to release into the community; residential treatment beds for those on probation, parole, or extended supervision; and youth services both within the facility and in the community.

Medication-Assisted Treatment (MAT) in a Jail Setting (\$750,000/year) Wis. Stat. § 46.47

State funds were awarded to counties or tribes to provide nonnarcotic, nonaddictive injectable medication to voluntary inmates in 15 county jails throughout the state. The inmates received the injection within the five days preceding release into the community. The county or tribe must have an established drug court and provide care coordination for inmates exiting county or tribal jails. Provisions for enrolling participants in Medicaid and continuation of treatment after the inmate leaves the jail setting are also required.

The program began in late 2018 and at the end of the first grant cycle (June 30, 2019) 395 participants had received 218 injections, 208 received ASAM screenings, and 262 were referred for treatment services. Additionally, 452 received case management services and 69 Medicaid applications were completed.

Prisoner Re-entry Program (\$125,000/year) Wis. Stat. § 46.48 (8)

The Prisoner Re-entry Program provides funds to target adult medium- to high-risk offenders who were inmates of the Milwaukee County House of Correction (HOC). The program fills the gap of needs not covered by the Wisconsin Department of Corrections reentry initiatives. Participants are residents of Milwaukee County who receive case coordination prior to their release on extended supervision or parole. This coordination assists in planning for and obtaining the housing, employment, education, and treatment needs that offenders will have upon release. A component of the program is that mentors must be used to assist with offender reintegration into the community. In 2018, 97 individuals were served by the program.

Treatment Alternatives and Diversion (TAD)

Treatment Alternatives and Diversion is a program administered through the Department of Justice in collaboration with DHS, the Department of Corrections, Office of the Director of State Courts, and county agencies. DHS works in collaboration with DOJ to train treatment court professionals in evidenced-based practices in order to address offender recidivism. Projects deliver treatment and diversion alternatives to jails and prisons for nonviolent adult offenders with assessed drug and alcohol problems. Beginning in 2020, TAD will fund 53 counties and three tribes, which support 57 treatment courts and 29 diversion programs throughout the state. These courts include drug treatment, veterans, OWI, mothers, families, mental health, hybrid, and tribal healing to wellness programs/courts. A 2014 evaluation of the program by the University of Wisconsin Population Health Institute showed that the program averted a total of 231,533 days of incarceration for the 2,895 participants discharged between 2007 and 2014.

Outreach and Treatment Program for People who Inject Drugs

Several activities in 2018 targeted outreach to people who inject drugs and to provide them with treatment. The AIDS Resource Center of Wisconsin engaged in a variety of injection drug use prevention and harm reduction activities in Milwaukee, Appleton, Beloit, Eau Claire, Green Bay, Kenosha, La Crosse, Madison, Superior, and Wausau. Outreach staff made contact and built rapport with people who inject drugs and their significant others to provide them information on HIV, Hepatitis C (HCV), injection drug use, and opioid overdose training. In 2018, approximately 1,521 potential fatal overdoses were averted due to these efforts. Furthermore, 13,266 people attended trainings on how to recognize and respond to drug overdoses, including first responders, people who use drugs and their significant others/family members, and drug treatment professionals.

Program Name	Counties/Tribes/Nonprofit Agencies Participating	Annual Funding Amount	People Served in 2018
Injection Drug Use Prevention	Kenosha County and Aids Resource Center of Wisconsin (ARCW)	\$555,000	Staff provided outreach and education through 72,518 contacts
Injection Drug Use Treatment	Milwaukee, Dane, Kenosha and Racine counties; and ARCW	\$1,429,514	559

Medication-Assisted Treatment Centers in Rural Areas

Calendar year 2018 marked the fourth year of operation for three opioid treatment centers created and funded under 2013 Wisconsin Act 195 (Heroin, Opioid, Prevention, and Education [HOPE] Act). In addition, 2018 was the first full year that these centers provided methamphetamine treatment services (authorized under 2017 Wisconsin Act 27). These centers included: (1) HSHS St. Vincent's Hospital Libertas of Marinette; (2) Family Health Center of Marshfield, Inc.; and (3) NorthLakes Community Clinic. In addition, two new opioid and methamphetamine treatment centers started operation during 2018, under 2017 Wisconsin Act 27. Family Health Center (FHC) of Marshfield established the FHC-Ladysmith Alcohol and Drug Recovery Center, and NorthLake Community Clinic partnered with Lake Superior Community Health Center to establish a recovery program to serve Douglas County. In 2018, these five centers served 876 persons. Services included assessments, abstinence-based treatment, medication-assisted treatment using buprenorphine and naltrexone, 24-hour residential care, outpatient counseling, and handoffs to county-authorized and private provider continuing care. Further information is contained in the *Opioid and Methamphetamine Treatment Centers: 2019 Report to the Legislature*, found at <https://www.dhs.wisconsin.gov/publications/p01240-2019.pdf>.

Program Name	Counties/Tribes Served by Program	Annual Funding Amount	People Served in 2018
Programs Providing Medication-Assisted Treatment in Rural Underserved Areas, Wis. Stat. § 51.422	Counties: Florence, Marinette, Menominee, Oconto, Forest, Oneida, Vilas, Iron, Price, Ashland, Bayfield, Burnett, Douglas, Sawyer, Washburn, Barron, Polk, Rusk. Tribes: Menominee Nation, Forest County Potawatomi Community, Lac du Flambeau Chippewa, Sokaogon Chippewa, Bad River Chippewa, Lac Courte Oreilles Chippewa, Red Cliff Chippewa, and Saint Croix Chippewa	\$2,682,667	876

Gender-Specific Outreach and Treatment

There are differences in the development and pattern of addiction, treatment needs, and treatment approaches for men and women. In 2018, DHS continued overseeing five projects that addressed women-specific outreach, treatment, and support needs by providing parenting education, vocational and housing assistance, care coordination, as well as intensive, women-specific, substance use treatment services, and prevention services.

Program Name	Counties Participating	Annual Funding Amount	People Served in 2018
Women's Outreach and Treatment for low income and multisystem involved people, Wis. Stat. § 46.86(6), and Urban/Rural Women's Treatment, Wis. Stat. § 46.55	Brown Co. via Family Services of Northeast Wisconsin; Dane Co. via ARC Community Services; Eau Claire Co. via Lutheran Social Services; Forest-Oneida-Vilas; Ho-Chunk Nation via six tribal clinics covering 14 counties, Walworth Co.	\$6,793,768	484 (Does not include Ho Chunk tribe data for second half of 2018)
Cocaine-affected Families, Wis. Stat. §§ 46.86(1), (2m), and (3m)	Milwaukee Co. via Community Advocates, Meta House, and United Community Center	\$1,105,000	321
Healthy Beginnings, Wis. Stat. § 46.48(29)	Dane Co. via ARC Community Services	\$175,000	44
Bureau of Milwaukee Child Welfare (parents and children), Wis. Stat. § 48.561(3)(a)(2)	Milwaukee Co. via Wisconsin Department of Children and Families, Division of Milwaukee Child Protective Services	\$1,583,000	828
Women and Dependent Children Services, Wis. Stat. § 46.86(5)	Dane Co. via ARC Community Services	\$235,000	33

Fetal Alcohol Spectrum Training for Professionals

Fetal alcohol spectrum disorders (FASDs) are a group of behavioral, intellectual, and physical conditions that can occur in a person whose mother drank alcohol during pregnancy. FASD increasingly is recognized as a significant public health problem with high potential for the prevention of future cases and the prevention of excess disability and premature mortality in people who are affected. There are at least 90 such births in Wisconsin each year. In 2017, the University of Wisconsin-Madison received \$75,000 in the Substance Abuse Prevention and Treatment Block Grant funds to provide technical assistance and training on FASD to

professionals working in agencies providing services to women. During 2018, this technical assistance and training program was temporarily discontinued in order to update and expand the program so that professionals can also be trained on the effects of all other substances during pregnancy, including opioids, stimulants, and tobacco, and also focus on Neonatal Abstinence Syndrome (NAS).

Underserved Populations

Wisconsin is home to many diverse racial and ethnic groups. These underserved populations make up nearly 16 percent of Wisconsin’s population. In general, substance use service providers across the state are reaching significant portions of underserved populations. In 2018, approximately 20 percent of people served through the public substance use service provider system were members of an underserved group. In 2018, DHS managed four initiatives addressing addiction treatment and support among underserved populations, including Urban Black and Hispanic Program, Substance Use Services for Hispanic People, and Inner City AODA Prevention and Intervention Services. Also, three tribes received SAPTBG funds to provide culturally specific AODA treatment and services, including women’s treatment and services for youth.

Program Name	Counties/Tribes Participating	Annual Funding Amount	People Served in 2018
Urban Black and Hispanic Program, Wis. Stat. § 46.975(2)(a)	Milwaukee via Community Advocates, Waukesha	\$200,000	162
Substance Use Services for Hispanic People, Wis. Stat. § 46.48(5)	Milwaukee via the United Community Center	\$220,842	101
Inner City AODA Prevention and Intervention Services	Dane, Kenosha, Racine, Rock	\$200,000	380
Tribal Alcohol and other Drug Abuse Treatment	Forest County Potawatomi Community, Lac du Flambeau Band of Lake Superior Chippewa, Sokaogon Chippewa Community	\$21,800	Not Available

Addressing Methamphetamine Addiction

Wisconsin has seen a new surge in methamphetamine use and addiction. In 2018, DHS continued offering evidence-based treatment training sessions on the MATRIX model. DHS also continued issuing federal Substance Abuse Prevention and Treatment Block Grant funds to counties in northwestern Wisconsin to help supplement methamphetamine treatment.

Program Name	Counties Participating	Annual Funding Amount	People Served in 2018
Methamphetamine Treatment	Barron, Burnett, Polk, St. Croix	\$200,000	193

Comprehensive Community Services

Comprehensive Community Services is a program for individuals of all ages who need ongoing services for mental health or substance use concerns beyond occasional outpatient care, but less than the intensive care provided in an inpatient setting. It is administered by DHS and operated by county and tribal agencies. The cumulative number of consumers served by 66 county agencies grew throughout 2018, from 6,191 persons at the end of the first quarter to 7,543 at the end of the fourth quarter. This represents a major increase from 2016,

when only 34 counties were serving consumers under this program. In addition, 24 percent of CCS consumers served in 2018 had a known substance use problem (excluding tobacco).

Consumer-Directed Activities

DHS supports activities that encourage people in recovery with lived addiction experience to participate openly in Wisconsin’s recovery efforts. Wisconsin Voices for Recovery brings together people who are in recovery or seeking recovery, along with their family members and allies. In 2018, Wisconsin Voices for Recovery partnered with more than 43 community recovery organizations to host Rally for Recovery at the state Capitol, community trainings, and other public awareness and capacity building activities that highlight and celebrate recovery. DHS allocated more than \$100,000 for this effort.

Federal Discretionary Grants for Opioid Treatment and Recovery

Medication-Assisted Treatment - Prescription Drug and Opioid Addiction (MAT-PDOA) Grant

In 2015, Wisconsin received a three-year grant of \$3 million from the Substance Abuse and Mental Health Services Administration to develop medication-assisted treatment services in Sauk and Columbia counties. The grant period ran from August 2015 through July 2018. One of the primary features of this grant project was the development of a system of care with rapid access to medication-assisted treatment services. In July 2018, the MAT-PDOA project met or exceeded its project goals, objectives, and targets. The yearly enrollment target was 100 enrolled consumers; the number of consumers actually enrolled was 254.

Program Name	Counties Participating	Annual Funding Amount	People Served in 2018
MAT-PDOA Program for Opioid Addiction	Sauk, Columbia	\$1,000,000	254

Grant to Prevent Prescription Drug/Opioid Overdose-Related Deaths

In 2018, DHS continued to implement a \$5 million grant from the Substance Abuse and Mental Health Services Administration to address prescription drug/opioid overdose-related deaths. The grant project began in September 2016. This is a five-year grant to:

- Increase Wisconsin’s capacity to provide evidence-based prevention services that educate the public on the dangers of sharing medications.
- Raise awareness among the pharmaceutical and medical communities on the risks of overprescribing.
- Implement a naloxone distribution system in communities of high need that will serve as a model for other high-need areas of the state.

Three high-need Wisconsin counties—Sauk, Kenosha, and Waukesha—are participating in this project. In 2018, 980 first responders and 2,575 community members were trained to administer naloxone. A total of 3,002 doses of naloxone were disseminated and 74 overdose reversals were reported in these three counties with the use of grant funds.

Other partners in this project include the AIDS Resource Center of Wisconsin, the State Council on Alcohol and Other Drug Abuse, community-based treatment providers, and county and tribal public health officials.

State Targeted Response (STR) and State Opioid Response (SOR) to the Opioid Crisis Grant

In 2017, Wisconsin received a two-year grant award of \$7,636,938 per year from the Substance Abuse and Mental Health Services Administration. Known as the State Targeted Response to the Opioid Crisis Grant, the focus of this grant program is to develop, implement, and expand opioid-specific treatment, prevention, and recovery services in high-need communities. The grant period runs from May 2017 through April 2019. Outcomes from the first year of the grant period (May 2017 through April 2018) showed that 740 individuals

received opioid-specific treatment services. Note that year one included time for program implementation within identified high-need areas of the state. Outcomes from the first half of the grant's second year (May 2018 through April 2019) showed 711 individuals receiving opioid-specific treatment services. The number of people being served for opioid use disorder is on track to double by the end of year two (April 2019). In September 2018, the state was awarded the State Opioid Response (SOR) grant in the amount of \$11,979,333 per year for two years, for the purpose of expanding upon and continuing initiatives implemented under the STR grant. The grant period runs from September 30, 2018, through September 29, 2020. In addition, DHS also received a one-time supplemental award in the amount of \$6,253,212 to be utilized throughout the two-year grant period. Outcomes from the first year of the SOR grant will be reported in 2019.

ADMINISTRATION

State Council on Alcohol and Other Drug Abuse

DHS provides staff services to the State Council on Alcohol and Other Drug Abuse (SCAODA), a council established under Wis. Stat. §§ 13.098 and 14.24 that coordinates substance use disorder planning and funding efforts in Wisconsin and advises the governor, legislature, and state agencies on prevention, treatment, and recovery matters. Its members represent most cabinet level agencies, two constitutional offices, the legislature, treatment providers, and citizens. The Council met four times in 2018, during the months of March, June, September, and December.

In 2018, SCAODA and its four standing committees—Prevention, Diversity, Intervention and Treatment, and Planning and Funding committees—continued providing statewide leadership on a wide variety of current substance use disorder issues. The Council and committees focused specifically on efforts to:

- Support and assist DHS, Division of Medicaid Services, with implementing the Section 1115 BadgerCare Waiver Project, which will allow the state to expand Medicaid reimbursement to cover SUD residential treatment.
- Continue advocating for an increase in Medicaid reimbursement rates for various substance abuse disorder services to a level meeting or exceeding the rates of other Midwest states.
- Partner with DHS staff to acquire and share information to stakeholders and policymakers on the most significant substance use disorder trends, needs, and best practice programming, focusing across all disorders and misuse, including opioid, methamphetamine, alcohol, and tobacco use disorders.
- Review the impact of 2017 Wisconsin Act 262, which modified certification requirements for the substance use disorder workforce, and partner with state agencies and stakeholders to seek guidance on the implementation of Act 262 requirements to align with Medicaid and Wis. Admin. Code ch. DHS 75 requirements.
- Provide feedback and input to DHS regarding potential changes to DHS 75 that would improve access to needed substance use disorder services, while also maintaining safeguards and requirements to promote high-quality services.
- Provide guidance and resources on efforts to increase diversity in the substance use disorder workforce, and for agencies to provide culturally friendly services that meet the specific needs of different underserved population groups.
- Continue supporting research, policies, and recommendations contained in the 2017 *Report on the Workforce for the Treatment of Substance Use Disorders in Wisconsin* to increase the number of persons who are recruited and choose to remain in the substance use treatment workforce.

Quality Improvement Activities

Strengthening Treatment Access and Retention-Quality Improvement Program

The Strengthening Treatment Access and Retention-Quality Improvement (STAR-QI) Program promotes implementation of “Plan-Do-Study-Act” quality improvement projects to improve access to and retention in substance use treatment. In 2018, DHS continued its partnership with UW-Madison and more than 35 Wisconsin treatment centers to increase admissions, reduce appointment no-shows, reduce waiting times, and increase successful treatment completion. The program also began projects to implement outcomes-informed care and address customer satisfaction. During 2018, the program received \$134,000 from the Substance Abuse Prevention and Treatment Block Grant.

Motivational Interviewing Training

Motivational interviewing is an evidence-based and cost-effective counseling method for addressing a range of behavioral health concerns. In 2018, DHS delivered four introductory trainings attended by 130 practitioners. Eleven multiday workshops were attended by 244 practitioners. Additionally, 86 technical assistance or coaching sessions were provided to practitioners and their organizations to strengthen initial implementation efforts.

Screening Brief Intervention and Referral Treatment (SBIRT) Professional Training

SBIRT is an evidence-based service for early intervention of those engaged in risky substance use who present in opportunistic settings such as health care clinics and schools. In 2018, DHS completed a 60-hour training with 22 case managers for implementation in HIV services. Hundreds of licensed providers also completed a DHS-approved four-hour training in order to become eligible for Medicaid reimbursement when delivering SBIRT in health care settings. Additionally, DHS partnered with the Department of Public Instruction to design technical assistance and follow-up training to promote uptake and delivery of SBIRT in school settings.

Webinars for Professionals on Substance Use Topics

In 2018, DHS collaborated with UW-Madison and the Center for Health Enhancement Systems Studies NIATx Program to offer free monthly webinars featuring evidence-based information from experts in the behavioral health field. Several hundred people participated in these webinars. The topics ranged from recovery-oriented systems of care, working with African Americans and other underserved groups, cultural and linguistic appropriate standards for service delivery, juvenile justice diversion, marijuana, opioid abuse treatment, mindfulness/impulsive behavior, dealing with barriers to engagement in services, recovery contingency management models, and SBIRT.

Trauma-Informed Care Training and Presentations

Trauma-Informed Care (TIC) is an approach to engaging people with histories of trauma that recognizes the presence of trauma symptoms and acknowledges the role that trauma has played in their lives. In 2018, DHS conducted 41 TIC training events throughout Wisconsin attended by 1,471 people. Of these events:

- Six of the TIC training sessions were for the Dane County 911 dispatchers as part of their Crisis Intervention Partners (CIP) training.
- Three events involved providing TIC technical assistance for various treatment program staff.
- One event was conducted at the Eau Claire Police Department as part of their Crisis Intervention Team (CIT) training.
- One event was a presentation at the Wisconsin Opioid Forum in Milwaukee.
- Other organizations who received training included Chippewa County Human Services; Arbor Place of Menomonie; Apricity of Neenah; and Sand Ridge Secure Treatment Center in Mauston.

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