

MICROFILM DIVIDER

OMB/RECORDS MANAGEMENT DIVISION

SFN 2053 (2/85) 5M



ROLL NUMBER

DESCRIPTION

23999

2001 SENATE HUMAN SERVICES

SB 2399

2001 SENATE STANDING COMMITTEE MINUTES

BILL/RESOLUTION NO. SB 2399

Senate Human Services Committee

Conference Committee

Hearing Date February 5, 2001

Tape Number	Side A	Side B	Meter #
2	X		35.6
3	X		
February 12, 2001 1		X	6
Committee Clerk Signature <i>Carol Holmberg</i>			

Minutes:

The hearing was opened on SB 2399.

SENATOR FISCHER introduced the bill. The bill is recommendations that were agreed to on the interim committee on health care. We will ask Murray Sagsveen to come and speak and get the minutes of the committee meeting.

JACK DALRYMPLE, Lieutenant Governor of ND, testified in support of the bill. The Hoeven administration is feeling 2399 provides excellent framework for discussion on what to do. We are bringing in a proposal for state wide tobacco amendment. The work is in progress.

SENATOR POLOVITZ: Senator Holmberg's bill looks at youth. Are you going to be more comprehensive? LIEUTENANT GOVERNOR: Yes. We need to combine all in one

comprehensive program. We do not have a preference. 2399 is probably more in sync with what we see as a true state wide program. We have no conflict with what was done in interim; we

would envision something a bit more focused and more detailed as far as money is spent. I don't know if it will all end up in statute or not. We think it needs to be structured more than what you see in this bill.

KEITH JOHNSON, RS, Administrator, Custer Health, supports bill with written testimony.

SENATOR KILZER: Mr. Sagsveen talked about a \$3000 grant per county. Do you have a stance on that? MR. JOHNSON: That would be the distribution of that money on page 2.

DARLENE BARTZ, Chief, Preventive Health Section, Dept of Health, offers written comments.

LINDA L. JOHNSON, Director of School Health Programs, provided written information regarding school preventative health programs in ND.

DR. JON RICE, citizen and President of the Red River Health Promotion Coalition, commented to reemphasize points. No 1 public health problem in this state is tobacco abuse and tobacco disease. It has been shown that with significant resources and comprehensive programs you can change that. Take this opportunity to develop statewide comprehensive programs; that we not shortchange the funding and that we not send out all the money in specified categories that will not allow the comprehensive program to work.

Hearing closed on SB 2399.

The hearing was reopened.

MURRAY SAGSVEEN, State Health Officer, explained what was done. (Written testimony)

Discussion was held.

The public hearing was closed.

February 12, 2001, Tape 1, Side B, Meter 6.0.

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Senate Human Services Committee
Bill/Resolution Number SB 2399
Hearing Date ~~February 5, 2004~~

2-12-01

SENATOR MATHERN moved a DO NOT PASS. SENATOR FISCHER seconded the motion.

Discussion was held. Roll call carried 6-0. SENATOR MATHERN will carry the bill.

Date: 2/12/01

Roll Call Vote #: /

2001 SENATE STANDING COMMITTEE ROLL CALL VOTES
BILL/RESOLUTION NO. 2399

Senate HUMAN SERVICES Committee

Subcommittee on _____

or

Conference Committee

Legislative Council Amendment Number _____

Action Taken Do Not Pass

Motion Made By Sen Mathern Seconded By Sen Fischer

Senators	Yes	No	Senators	Yes	No
Senator Lee, Chairperson	✓		Senator Polovitz	✓	
Senator Kilzer, Vice-Chairperson	✓		Senator Mathern	✓	
Senator Erbele	✓				
Senator Fischer	✓				

Total (Yes) 6 No 0

Absent 0

Floor Assignment Sen Mathern

If the vote is on an amendment, briefly indicate intent:

REPORT OF STANDING COMMITTEE (410)
February 12, 2001 1:31 p.m.

Module No: SR-25-3067
Carrier: T. Mathern
Insert LC: . Title: .

REPORT OF STANDING COMMITTEE

SB 2399: Human Services Committee (Sen. Lee, Chairman) recommends DO NOT PASS
(6 YEAS, 0 NAYS, 0 ABSENT AND NOT VOTING). SB 2399 was placed on the
Eleventh order on the calendar.

2001 TESTIMONY

SB 2399

TESTIMONY ON SB 2399
SENATE HUMAN SERVICES COMMITTEE
February 5, 2001
by Linda L. Johnson, Director of School Health Programs
328-4138
Department of Public Instruction

Madam Chairman and members of the committee:

My name is Linda Johnson and I am the Director of School Health Programs for the Department of Public Instruction. I am here to provide information regarding school preventative health programs in North Dakota.

Only since 1998 have schools receiving Safe and Drug Free Schools funds been learning about and applying *effective* prevention programs at the school district level. The Department of Public Instruction (DPI) propose adding the two million dollars for healthy schools grants (page 2.c.) for these same efforts and increasing the dollars available to schools through this structure that already exists. It is also necessary to retain some technical assistance dollars at the state level for training school staff. The Department of Public Instruction feels it is imperative to continue with these efforts with the additional use of these tobacco settlement dollars. A fiscal note will be submitted upon request. DPI has an existing process both for planning and accountability that could be used for these tobacco settlement school dollars.

DPI provides technical assistance to districts in effective program planning, use of a community advisory committee, research-based curriculum, and promising practices programs. This fall at regional meetings around the state for Safe and Drug Free school contacts, 22 districts with exemplary programs presented their programs to their peers. It was clearly evident by their enthusiasm and uniqueness of each program that ND is heading down the right track in implementing prevention programming.

Currently, districts get a basic grant of \$9.50 per student but may apply for additional competitive Greatest Need Grant dollars. It is these extra dollars that has enabled 19 communities to move to a higher level in their prevention programming. An example of a Greatest Need Grant application is attached. Just last week one of our sites called and

enthusiastically shared anecdotal successes of a newly formed after-school program, wanting assurance there would be funding to continue. One program even featured a video of their efforts, which is available for your viewing on request. Several unique peer programs have started around the state with these dollars. Many districts are beginning to use more research-based curriculum. Others are investigating *Project Northland*, a joint community, school, and law enforcement program for prevention that evidences great effectiveness.

Realizing prevention programs do not yield evidence of behavior change, the true outcome based measure, for a minimum of five years, it makes good sense to continue programs already begun rather than create a new system. It takes time to start a new program. Presently schools are moving toward true prevention programming. Schools are in varying stages of accomplishing the following tasks that lead to effect prevention programming. These steps are also features of the Centers for Disease Control Guidelines for School Tobacco Prevention.

- Community advisory teams are formed to plan and coordinate appropriate local prevention efforts.
- Needs assessments from a variety of sources are analyzed by local advisory teams.
- Research-based curriculums and programs that show promising practices are investigated.
- Plans are formulated to best meet the needs.
- Materials are ordered.
- Staff is hired and trained or existing staff retrained.
- An evaluation plan is established.

Let's band together to form a system of prevention at the school and communities level to make a difference with our youth. Let our united goal be to see our youth smoking and alcohol use rates toward the bottom of the list of states and not the top. Feel free to come to me for any information about schools and prevention programs. Are there any questions?

Greatest Need Grant Application
Hazen School District 2000-2001

Extent of Need

Hazen School District has surveyed its Grades 7-12 students in 1997 and 1999 with the Search Survey. The results did show some improvement but the results are still showing a high rate of usage among our youth. It appears that usage is occurring at an earlier age. Students are scheduled to retake this survey in Spring of 2001.

There is a need in Hazen to provide resource assistance to at-risk students through after-school programs, study centers, and resource day rooms. Staff, parents and students are requesting extra tutorial help for many students in the school system. Research has shown that academic mentoring and tutoring strategies are effective in reducing and preventing AOD use (Crum, Helzer, and Anthony, 1993; Thomas and Hsiu, 1993; Wiebusch, 1994). In addition, as the self esteem of the student improves a student would most likely be academically eligible for extra-curricular activities at the upper grade levels. Students would also be more inclined toward appropriate behavior inside and outside of school, and in turn, students would make better choices toward lifelong (career) decisions.

There is a constant need to train staff, parents, and community members in drug and violence prevention efforts. Research indicates that youth having parents/adults involved in their lives is the most effective drug deterrent and that kids view parents as their most influential role models (Search Institute). There is a need for the Hazen School District to develop a comprehensive approach in dealing with safety and violence.

DISTRICT PRIORITY

First Priority need is to expand the After-School Tutorial Program, Study Center, and implement a Resource Room within the school district.

Second Priority need is to provide up-to-date materials and training for schoolwide and community drug/alcohol programs to include training/education for staff, parents, and community members in drug and violence prevention efforts. A major focus will be to develop a systemic approach by implementation of the Respect & Protect program to address violence so that there will be district-wide discipline consistency.

DATA USED IN DETERMINING PROGRAM NEEDS:

Area I: High rates of alcohol and drug use among youth
Data Source: Search Survey Results, 1999, 1997 in parenthesis
44% (52%) used alcohol once or more in the last 30 days.
28% (32%) got drunk once or more in the last two weeks.
28% (31%) smoked cigarettes once or more in the last 30 days
29% (30%) used smokeless tobacco once or more in the last 12 months
09% (15%) sniffed or inhaled substances to get high once or more in the last 12 months
19% (20%) used marijuana once or more in the last 12 months
11% (12%) used other illicit drugs once or more in the last 12 months
29% (30%) drove after drinking once or more in the last 12 months
52% (57%) rode (once or more in the last 12 months) with a driver who had been drinking

Area III: High rates of arrest and conviction of youth for violent/drug or alcohol-related crimes
Data Source: Mercer County Sheriff's Department

Arrests and Convictions:

Minor in Possession/Minor in Consumption

1998	27	1999	16	2000	23 (1/1/00 - 9/30/00)
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Data Source: Bureau of Criminal Investigation for Mercer County

Arrests and Convictions:

Number of juvenile arrests for Mercer County

1996	38	1997	79	1998	79
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Number of juvenile arrests for DUI/MIP/MI

1996	02	1997	00	1998	02
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Number of juvenile arrests for Liquor Law Violations					
1996	11	1997	27	1998	20
Number of juvenile arrests for Curfew/Loitering					
1996	00	1997	10	1998	00

Area VII:

High rates of referral of youth to juvenile court

Data Source: South Central Judicial District Juvenile Court, Mercer County

Total Offenses

1997	195	1998	222	1999	144
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Number of cases brought to Juvenile Court for Possession of Alcohol

1997	45	1998	15	1999	48
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Number of cases with court sanction in Juvenile Court: driving restrictions

1999	11
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Number of cases with court sanction in Juvenile Court: D/A Coun/Eval

1999	11
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Number of cases with court sanction in Juvenile Court: Psych/Counseling Eval

1999	15
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Number of cases brought to Juvenile Court for MIP/MIC

1997	28	1998	59	1999	48
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Number of cases brought to Juvenile Court for Ungovernable Behavior

1997	13	1998	10	1999	101
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Rates of reported incidents of students with police

Data Source: Search Survey Results, 1999, 1997 in parenthesis

26% (22%) got into trouble with police once or more in the last 12 months

16% (17%) committed vandalism once or more in the last 12 months

Area VIII:

High rates of expulsions and suspensions of students from school

Data Source: Hazen Public School Records

1997-98 25 ATOD suspensions 1999-00 15 ATOD suspensions

1998-99 43 ATOD suspensions 2000-01 05 ATOD suspensions (as of 10-02-00)

Rates of in-school suspensions of students for violence related incidents

1997-98 02 1999-00 05

1998-99 09 2000-01 04 (as of 10-02-00)

Rates of observed violence incidents of students requiring detention

1997-98 31 1999-00 30

1998-99 07 2000-01 01 (as of 10-02-00)

Rates of reported violence incidents of students (self-reported)

Data Source: Search Survey Results, 1999, 1997 in parenthesis

36% (35%) hit someone once or more in the last 12 months

15% (10%) physically hurt someone once or more in the last 12 months

4% (1%) used a weapon to get something from a person once or more in the last 12 months

23% (20%) been in a group fight once or more in the last 12 months

8% (4%) carried a weapon for protection once or more in the last 12 months

34% (36%) threatened physical harm to someone once or more in the last 12 months

ANALYSIS OF DATA:

The above data indicates that there are high rates of alcohol and drug use, arrest and conviction, referral, and suspension among youth in our area. The data indicates that there is a need to be concerned about incidents of violence and drug use by youth in our area. According to the data, there is a need to coordinate prevention efforts into a comprehensive program which would include expanding the after-school program, purchasing study center materials, implementing a middle school resource room, updating drug/alcohol materials, and training staff, parents, and community members. A major focus will be to train staff utilizing the Respect and Protect program along with making the community/parents aware of this program. All students will benefit from these programs because all students are at-risk at some point in their lives.

