

**City of Lawrence  
2010 Alcohol Tax Funds  
Request for Proposals  
Calendar Year 2010 (January - December)  
Cover Page**

Agency Name: Ballard Community Services

Program Name: Ballard Community Services Early Education Program

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Request is for funding in the following categories and amounts:

<u>    X    </u>	Prevention	<u>  \$15,000  </u>
<u>          </u>	Treatment	<u>          </u>
<u>          </u>	Intervention	<u>          </u>
<u>          </u>	Coordination	<u>          </u>

**City of Lawrence  
2010 Alcohol Tax Funds  
Request for Proposal  
Ballard Community Center  
Narrative**

**Program Description:**

The Ballard Community Services Early Education Program is proposing funding to support continuation of a pre-school conflict resolution/interpersonal skills program called "Al's Pals: Kids Making Healthy Choices". We are excited to continue this project because research has shown that children who are classified as "undercontrolled" (i.e. impulsive, restless, and distractible) at age 3 were twice as likely as those who were "inhibited" or "well-adjusted" to be diagnosed with alcohol dependence at age 21. Aggressiveness in children as young as age 5 has been found to predict alcohol and substance use in adolescence. Childhood antisocial behavior is associated with alcohol-related problems in adolescence and alcohol abuse or dependence in adulthood. The National Institute on Drug Abuse (NIDA) has stated that "the risk of becoming a drug abuser involves the relationship among the number and type of risk factors such as, deviant attitudes and behaviors and protective factors such as parental support." The NIDA also states that "early intervention with risk factors (e.g., aggressive behavior and poor self-control) often has a greater impact than later intervention by changing a child's life path (trajectory) away from problems and toward positive behaviors." The population of children that are served by the Ballard Community Services Early Education Program includes children that typically fall in the highest category for those destined to become substance and alcohol abusers. These children come from very low-income families; there is often a high rate of substance abuse occurring in a number of the households where these children reside; and approximately 45% of these children exhibit aggressive, impulsive, distractible, and antisocial behavior. Unfortunately, there are currently no programs that are targeted towards these types of behaviors. The most serious of cases are referred to the school district for behavioral screening. However, there are a very low number of children who actually receive services due to the fact that the parents are required to participate by completing paperwork that is often overwhelming and stipulates that the child is being screened for "special education services." To the parents of these children, this identifies that their child has a learning disability and they refuse to participate so that their child is not "labeled" as they enter the public school system. Often, early education programs will refer children to the Bert Nash Mental Health Center. Again, the parents of our children are those that are very low-income families and they do not understand the system of working with a mental health facility and are often overwhelmed by the fact that their child is being referred in the first place. They often believe that their child may be removed from the home or that they will be judged on their parenting skills if they participate. That is why we are proposing to incorporate into our own early education program a curriculum that will involve parents and the children and will be proactive in the way that we deal with behavioral issues. This curriculum is rated by the United States Department of Justice as "effective in meeting the standards for conflict resolution/interpersonal skills in the

school/classroom environment". It is appropriate for all ethnicities, both male and female students, and can be adapted for children ages 3 to 8.

"Al's Pals: Kids Making Healthy Choices" curriculum is an early education program designed to increase the protective factor of social and emotional competence in young children and to decrease the risk factor of early and persistent aggression of antisocial behavior. The program follows from the premise that by intervening during the early years when children are forming patterns of behaviors and attitudes, reductions can be made in the likelihood of their later developing aggressive, antisocial, or violent behavior. Al's Pals is based heavily on resiliency research as a framework for developing an intervention. Its curriculum is designed to build resiliency by presenting children with real-life situations that introduce them to health-promoting concepts and pro-social skills. The program also recognizes the ongoing nature of resilience-building and trains teachers to use resilience-promoting concepts in their teaching and classroom management practices.

Al's Pals uses 46 interactive lessons to teach children how to practice positive ways to express feelings, relate to others, communicate, brainstorm ideas, solve problems, and differentiate between safe and unsafe substances and situations. Several studies of Al's Pals conducted in preschools, elementary schools, and childcare centers since the program was first piloted in 1993 show promising results. For example, a pilot evaluation study conducted in Virginia during the 1994-95 school year used a quasi-experimental design to assess program impacts on child social-emotional competence. This study was conducted with 10 intervention group classrooms (n=173) and 4 comparison group classrooms (n=48) in a variety of settings (rural, urban, suburban). Participating classrooms were chosen because they had children with similar characteristics, teachers with similar skill levels, and no other prevention or teacher training programs active in the school that year. Classrooms were randomly assigned a condition to the extent possible. There were no significant differences in demographic characteristics between intervention and control group children and teachers. Children were assessed by teachers before and after program participation using the project-developed Child Behavior Rating Scale (CBRS), a measure of social-emotional competencies in behavior, including appropriate expression of feelings, demonstration of self-control, and use of prosocial methods of problem solving.

Another pilot study conducted in Virginia during the 1995-96 school year used a quasi-experimental design to assess program impacts on child social-emotional competence and coping skills. This study was conducted with 16 intervention group classrooms (n=230) and 7 comparison group classrooms (n=103). Classrooms were randomly assigned to intervention and control groups. There were no significant differences in demographic characteristics between intervention and control group children and teachers. Children were assessed by teachers before and after program participation using the CBRS and the Teacher Report of Child Coping, an instrument used to measure coping styles.

In another study, an experimental design was used to evaluate Al's Pals in a large Michigan Head Start program during the 1996-97 school year. Seventeen classrooms (n=218) were randomly assigned to receive the intervention, and 16 classrooms (n=181) served as controls. The classroom sites were selected based on comparability and randomly assigned to intervention and control conditions. There were no significant differences in demographic characteristics between intervention and control group children and teachers. For both

intervention and control groups, the mean age of children entering the study was around 52 months, and gender was roughly evenly divided. About half of each group was white, one fourth African-American, and one Fourth Hispanic, biracial, or another ethnic group. Teachers assessed the children in the fall and spring of that school year, about 7 months apart. Measures used include the CBRS, the Teacher Report of Child Coping, and the Preschool and Kindergarten Behavior Scale, the last of which includes measure of social skills and problem behaviors.

### **Evaluation Outcome:**

For the 1994-95 study, results of repeated measures analysis of variance (known as ANOVA) showed that intervention children had significantly greater improvements in behavior than control group children. A similar analysis used in the 1995-96 study showed that intervention children had significantly greater improvements in behavior than control group children, as well as higher post-scores for positive coping and lower post-scores for negative coping.

Data from the 1996-97 Michigan study was analyzed using independent t-tests, paired t-tests, and repeated measures of variance to assess differences between intervention and control groups, to examine within-group pre-post changes, and to compare the degree of change experienced by both groups. The results of the analysis showed statistically significant improvements in pro-social skills in the intervention group. There was no significant improvement in pro-social skills for control group participants. In terms of problem behavior, there was no change for the intervention group, while problem behavior for the control group increased. As in previous studies, this analysis revealed a higher degree of positive change for the intervention group than for the control group. Findings from additional one-group pre-post replication studies conducted in Iowa, Michigan, Missouri, and Virginia from 1997 to 2000 had similar results, including higher degrees of positive change in the intervention groups, increases in pro-social behaviors and positive coping behaviors, and decreases in antisocial and negative coping behaviors.

### **Needs Assessment:**

As recently as October 2005, the Lawrence Journal World reported that alcohol usage at the high school dances were a serious matter—Saturday, October, 2005 JW Editorials—“According to the staffer who oversees drug and alcohol prevention efforts in the district, 42.9% of Free State seniors indicated in a survey last year that they had consumed five or more alcoholic drinks in a single sitting at least once in the previous two weeks. This year, that figure dropped to 42.2% but that’s well above the state average of 36.6%.” As reported in a February 2005 Journal World article by Joel Mathis, a 2004 survey by the Greenbush Institute, 10% of sixth graders said that they had at least one alcoholic drink in the past 30 days. These figures do not include information about the children in our community who are using substances other than alcohol.

As stated above, there are currently no programs available to children in community based early education programs. There are no services that community based early education programs can call to help with children who exhibit the violent and antisocial behaviors that are common predictors of alcohol and substance abuse. The most serious of cases are referred to

the school district for behavioral screening. However, there are a very low number of children who actually receive services due to the factor that the parents are required to participate by completing paperwork that is often overwhelming and stipulates that the child is being screened for “special education services.” To the parents of these children, this identifies that their child has a learning disability and they refuse to participate so that their child is not “labeled” as they enter the public school system. Often, early education programs will refer children to the Bert Nash Mental Health Center. Again, the parents of our children are those that are very low-income families and they do not understand the system of working with a mental health facility and are often overwhelmed by the fact that their child is being referred in the first place. They often believe that their child may be removed from the home or that they will be judged on their parenting skills if they participate. In particular, during the summer months there are absolutely no services available for any children needing intervention for antisocial and behavioral issues. These are the times when most early education program struggle the most.

**Outcomes:**

The Al’s Pals: Kids Making Healthy Choices program teaches staff members to identify the following:

- A. The risks that children face today and protective factors that shield them.
- B. How to apply the concepts of prevention, resiliency, risk, and protective factors to early childhood education.
- C. Key skills to effectively deliver the program such as techniques to guide children to brainstorm ideas, solve problems, make healthy decisions, and cope.
- D. Ways to establish an accepting, caring, cooperative classroom environment that fosters positive social-emotional growth and development in children and,
- E. Effective ways to communicate with families.

We will evaluate our progress in implementation of this curricula and success with our children by the following outcome measurements:

**Process Outcomes:**

- 1. Fifty percent of all teaching staff of the Ballard Community Services Early Education Program will be trained by May 2010.
- 2. Sixty-five percent of all teaching staff of Ballard Community Services Early Education Program will incorporate the Al’s Pals curriculum into the teaching strategies of their classrooms by May 2010.

**Behavioral Outcomes:**

- 1. During the last quarter of 2010 there will be a 25% reduction in the number of violent and aggressive outburst by the children enrolled in Ballard Community Services Early Education Program.

2. During the last quarter of 2010 there will be a 50% reduction in the number of phone calls to parents reporting violent behavior by the children enrolled in Ballard Community Services Early Education Program.

**Impact Outcome:**

There will be no children leaving Ballard Community Services Early Education Program (either by administrative disenrollment or parental disenrollment) due to violent and aggressive behavior.

**Coordination:**

The program involving the Al's Pals curriculum will lead to coordination among the community based early education programs in Lawrence in addressing behaviors that are risk factors for later substance use and abuse issues. Because community-based programs such as ours do not have direct funding for preventative resources, our intent is to share the successes and lessons of this project with other such programs in Lawrence. For instance, we would expect to have the Al's Pals curriculum specialist on our staff work with other early education programs' employees to assist in training to address antisocial and violent behaviors. We will promote the successes of this curriculum with other early education programs in order to broaden the scope of the benefits to hundreds of preschool children.

**Organizational Capacity**

Ballard Community Services is an independent human services agency with a rich tradition of serving the needs of low-income Douglas County residents. Ballard works to serve the "whole child" by providing early childhood education, food security programs, homelessness prevention programs such as rent and utility assistance and health maintenance programs. Ballard Community Services Early Education Program specifically serves the children of Low-income working families. Our early education program has been providing structured learning for children ages 1-5 for over 40 years, while meeting families' sustenance needs through our human service programs. In September of 2007, Ballard Community Services acquired Brookcreek Learning Center which increased the number of students served and also provides 13 infant slots to the program. The organization is led by Dianne Ensminger, the President/CEO, who has led early education programs (including Head Start programs) for more than 18 years. This particular project will be overseen by Jessica Haremza, Director of Early Education Curriculum and Training. Ballard Community Services maintains a professional teaching staff that includes teachers with specific training in early and special education. The proposed program is fitting seamlessly into the curriculum currently provided to our children, while increasing the scope of the educational and emotional content provided to these children to specifically address risk factors identified with later alcohol and substance abuse.

**Budget:**

Personnel: Float/special projects teacher, existing position	\$11,200
Fringe Benefits: Health insurance, employer's share	\$ 1,200
Training for Al's Pals program	\$ 1,200
Office Space:	\$ 0

Office Supplies:	\$ 0
Teaching and curriculum supplies	\$ 1,400
Equipment	\$ 0

**Other sources of funding for this specific program and amount**

The requested personnel funding will cover 50% of the wages and fringe benefits for this special position. We will match this funding with donations from private donors and other grantees, the attainment of which will be aided by publicity of this program. We will also provide volunteers, primarily university student volunteers, to assist with the provision of this program. Ballard Community Services' current facilities will be utilized without charge to this project. All of the teachers in our program will participate in this project, whose wages and benefits are provided through other fundraising and donations. We expect this program to continue beyond the funded year, and we would likely seek similar assistance for this program through the alcohol tax fund in future years.