

## NM DWI Coordinator's Affiliate

NM Legislative  
Health & Human Services Committee

Tasia Young,  
NM Association of Counties

Kelly Ford,  
Director, Lea County  
Chair, NM DWI Affiliate

Yolanda Cruz,  
DWI Coordinator, San Miguel County  
Vice Chair, NM DWI Affiliate



*33 Counties, 1 Goal.*  
Our goal is to reduce and prevent incidents of  
alcohol and drug related DWI.

## Proposed Changes to the Local DWI Program

### NM LDWI

#### Local DWI Grant Program - Statutory Authority

The 1993 New Mexico Legislature enacted Laws of 1993, Chapter 65. A portion of the law created the Local DWI Grant Program Act, compiled as Sections 11-6A-1 through 11-6A-6, NMSA 1978, as amended.

#### Local DWI Program Administration

The Local Government Division within the Department of Finance and Administration is designated to administer the Program. As defined in the NM Statutes, "Division" means the Local Government Division (LGD), which provides administrative services for the Local DWI Grant Fund, within the Department of Finance and Administration. LGD has established a rule, 2.110.4 NMAC, and Program Guidelines to provide guidance to local communities.

#### Program Oversight

The legislation, 11-6A-4 NMSA 1978 as amended, gives oversight of the Program to the DWI Grant Council. "Council" means the New Mexico DWI Grant Council, which was created under the Local DWI Grant Program Act. Membership of the Council consists of the president of the New Mexico Municipal League or a designee, the president of the New Mexico Association of Counties or a designee, the secretary of the Department of Health or the Secretary's designee, the secretary of the Department of Finance and Administration or the Secretary's designee, Chief of the Traffic Safety Bureau of the State Highway and Transportation Department, and two representatives of local governing bodies, appointed by the Governor. The Local DWI Grants are awarded by the DWI Grant Council upon their review and approval of the grant programs and plans contained in the county's annual grant application.

## NM LDWI

- In FY15, Local DWI Programs spent a total of \$17.2 million on programs and activities to reduce the incidence of DWI in New Mexico.
- Of the total funding expended, \$11.9 million were distribution funds, which are distributed to counties on a quarterly basis as the funds are collected.
- \$2.5 million was spent through competitive grants, which operate on a cash reimbursement basis and are awarded based on an application process.
- \$2.8 million was spent on detoxification grants, which are provided to six counties for social detoxification programs and alcohol treatment.

## Who are we?

- DWI program in all 33 Counties
- We provide services to offenders convicted of DWI in NM
- Each county has the opportunity for funding to provide wrap-around services for DWI convicted offenders
- Each program is tailored to provide the services which are needed for their communities on the local level
- Each program evaluates local gaps and needs and provides services to meet those needs
- Hence, not all programs are the same

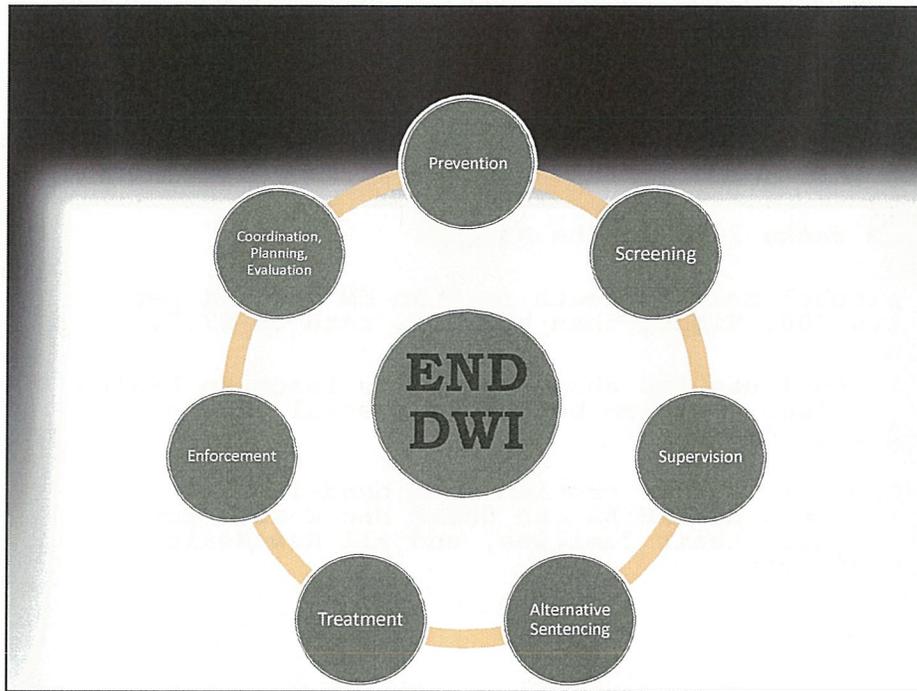
## What do we do?

We are multifaceted programs, providing

- Prevention
- Law Enforcement
- Screening
- Treatment
- Supervision
- Coordination Planning and Evaluation
- Domestic Violence Treatment
- Alternative Sentencing

## Statewide Goals, Local Efforts

- Each program provides new, innovative or model program/services
- Local governance ensures that program activities are culturally competent and address community readiness
- Activities must demonstrate effective model approaches
- Community participants, collaboration and planning
- Data informed decisions
- Performance measures & evaluation



## Just some of our numbers... FY 2015

### Prevention

- Changing community norms in 253 schools

### Alcohol Screenings

- 6,913 conducted

### Treatment

- 4,064 offenders were referred to substance abuse treatment

### Supervision

- 12,588 offenders currently being tracked and/or supervised

## Why...

NM ranks 29th in the Nation!

Alcohol-related death rate in NM is 51.4 per 100,000... Higher than the U.S. rate of 27.7%.

Alcohol use and abuse by adults leads to health problems, problem behaviors, social problems and/or death.

The services we provide work hand-in-hand to create a HEALTHIER and SAFER New Mexico for our clients, their families, and all New Mexico residents.

## HB302 2016 Legislature

Seeks to transfer  
administrative oversight of  
DWI programs from the

Department of Finance and  
Administration

to

Human Services Division

## Opposed by NMAC and the DWI Coordinator's Affiliate

### Detrimental To Supervision/Public Safety

- HSD was not originally aware that DWI Programs provide Supervision Monitoring/Tracking and will segregate services.
- Segregation of program services will end supervision component and law enforcement components.
- Supervision is the cohesive component of our programs and gives us the heavy handedness needed to enforce the treatment and prevention components in which HSD is focused on.

## Opposed by NMAC and the DWI Coordinator's Affiliate

### Detrimental To Supervision/Public Safety

- Without the ability to enforce treatment, it will start a vicious cycle of the offender not being in compliance of their probation and spending time in jail (already overcrowded) and not receiving needed treatment services - Treatment goes down, recidivism goes up.
- If the supervision component goes away, all current probation cases will be turned back to the Court or placed in jail. The Courts have already stated they do not want to oversee supervision. In essence, criminal offenders will be returned back into the communities with no monitoring of criminal behavior or placed in already overcrowded facilities.
- There will no longer be available funding for DWI activities and/or equipment for local law enforcement agencies.

## Opposed by NMAC and the DWI Coordinator's Affiliate

### Detrimental To Treatment

#### Forced Medicaid

- HSD believes the state will benefit from a 3 to 1 return on Medicaid dollars. Who receives this return... local counties?
- DWI Programs are not Medicaid providers, nor do we want to be.
- Many of our DWI offenders are not Medicaid eligible
- Most counties do not have access to counselors with the required licensure to quality as Medicaid providers, especially in rural areas.

## Opposed by NMAC and the DWI Coordinator's Affiliate

### Detrimental To Treatment

#### Forced Medicaid

- Many of our services enhance, complement, or fill gaps - they may not be Medicaid billable. For example, jail based treatment is ineligible.
- The only services provided which are currently eligible for Medicaid is Intensive Outpatient (IOP) services which are not provided in every county and is only a small portion of the clients being treated for substance abuse through local programs. Less intensive clients would not be eligible along with treatment dedicated to domestic violence offenders. Some group therapy is seen as substance abuse education by Medicaid.

## Opposed by NMAC and the DWI Coordinator's Affiliate

### Detrimental To Treatment

#### Forced Medicaid

- To bill Medicaid, programs or providers would have to hire additional trained dedicated staff to code and process Medicaid claims. This demands more budget dollars for increased staff. The programs currently do not bill for treatment services and it is provided as a part of well-rounded services in conjunction with probation services. As an example, in Sandoval County it costs less than \$3.00 a day for both treatment and supervision services to be provided.
- Offenders would not be assessed in a timely manner. The wait times for outside providers are often 6 months or longer to be initially screened compared to currently only an average of two weeks after being sentenced.

## Opposed by NMAC and the DWI Coordinator's Affiliate

### Detrimental To Treatment

#### Forced Medicaid

- The reimbursement process is long and cumbersome and not reimbursed in a timely manner.
- In addition, ethically, services could not be interrupted while awaiting approval for continued treatment since Medicaid only approves 6 weeks of service at a time. It will fall on the Counties to fund the treatment outside of Medicaid approval processes.
- We are concerned over a suggestion to open the statute and change the length of treatment to match Medicaid approval terms.

## Opposed by NMAC and the DWI Coordinator's Affiliate

### Detrimental To Local Counties

- This transfer will take our program services dollars.
- It will be left up to the Counties to support their programs from their general funds or allow the programs to close.
- If services are outsourced to outside providers for treatment and local programs/components go under, a great amount of local county employees will then be unemployed. Just under 400 FTEs, PTEs, and contract employees...
- Local communities will see a great increase in DWI occurrences and fatality rates.

## Opposed by NMAC and the DWI Coordinator's Affiliate

- DWI is a complex issue that can only be addressed in a multi-pronged manner.
- Our concerns with these issues are not being heard.
- There is an established positive and healthy working relationship with DFA.
- DFA oversight ensures local autonomy and effective fiscal accountability.
- Removing locally driven services will negatively affect the array of services available throughout the state.

## POTENTIAL OPPORTUNITIES

- We have requested that HSD take a year to meet regularly with the DWI Affiliate and work together, in partnership to determine if and how a proposed move might work. Perhaps a study and research group...?
- We are also offering the resolution that we change legislation to add a seat to our State DWI Grant Council so HSD can provide oversight for the treatment and prevention components where their expertise lies but not the entire program.
- We believe the focus of our programs and funding should be the DWI OFFENDER, as it was intended. The focus should not be to leverage Medicaid at the expense of our family, friends and communities.

## CONSEQUENCES

In summary, we do not see how this fits in with the Governor's DWI Initiative. If the programs are segregated and shut down, our hands are tied and we can no longer fight DWI through supervision of offenders or through the law enforcement proactive approach we currently fund.

Bottom line,  
the offender "goes free" and DWI occurrences and crashes go up and lives are lost.

We ask that you to please join us in opposition of this transfer and keep our programs whole.

## Questions?



## CONTACT INFORMATION

Kelly Ford  
Probation Director, Lea County  
Chair, DWI Affiliate  
kford@leacounty.net  
(575) 391-2956 Office  
(575) 605-6564 Cell

Yolanda Cruz  
DWI Coordinator, San Miguel County  
Vice Chair, DWI Affiliate  
ycruz@smcounty.net  
(505) 425-7998 Office  
(505) 617-0483 Cell

## FY15 Local DWI Program Overview

The program data below provides a summary to the New Mexico Legislature of the activities of the programs funded through the Local Driving While Intoxicated (LDWI) Grant Fund during fiscal year 2015. The statewide program is administered by the Local Government Division (LGD) of the Department of Finance and Administration (DFA) and funds locally controlled programs in each of the 33 counties in New Mexico.

The goal of the Local DWI programs throughout the state is to make a difference on a local level in reducing the incidence of DWI, alcoholism, and alcohol abuse. Each county is required to have local DWI planning councils, whose members are appointed by chief elected officials in each county. Their role is to identify the exact mix of services from this "menu" of components to meet local needs. The ultimate goal of the local DWI planning councils is to develop a set of strategies that will reduce DWI recidivism and prevent incidents before they happen.

### Services

In FY15, local programs provided services to New Mexicans in the eight different component areas in order to reduce the incidence of DWI in New Mexico. Below is a summary of reported services provided and the number of clients reached throughout New Mexico:

#### Screening

- 6,913 total offenders screened (including DWI, domestic violence and other alcohol related offenders)

activities, which means approximately 19 contacts per student.

- 253 schools at which prevention activities occurred statewide

#### Treatment

- 4,064 offenders were referred to treatment
- 73,925 treatment hours provided and/or
- 14,168 treatment sessions provided

#### Compliance Monitoring/Tracking

- 12,588 offenders currently being tracked

#### Enforcement

- 327 LDWI funded check points, saturation patrols, and other enforcement activities
- 133 DWI arrests
- 31 open container citations
- 45 under 21 possession or consumption citations

#### Alternative Sentencing

- 1,051 clients served in the Bernalillo County Community Custody Program
- 36 youth served in the Bernalillo County AYUDA program
- 1,433 teens served by Teen Courts statewide
- 264 clients in nineteen county programs were placed on electronic and/or alcohol monitoring devices
- 431 clients served at the San Juan County jail-based treatment facility

#### Prevention

- 265,714 students (K-college) contacts (duplicated) through 13,685 prevention

### Coordination, Planning & Evaluation

- 252 local DWI Planning Council meetings conducted
- 507 training/meetings activities attended by local program staff
- 126 training/meetings activities provided by local program staff

### Domestic Violence

- 463 offenders referred to a domestic violence treatment program

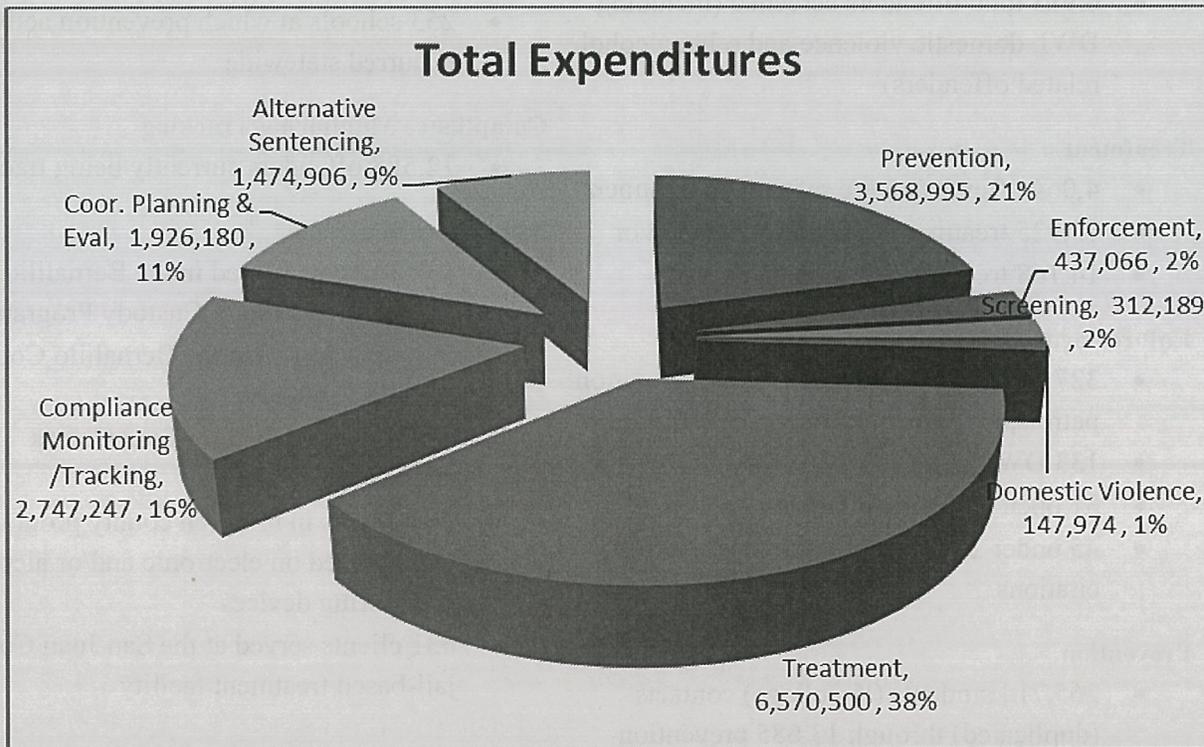
### Detoxification Services

- 1,194 clients served at the Santa Fe County Detoxification facility
- 3,202 clients served at the Bernalillo County Detoxification facility
- 6,257 clients served by the Public Inebriate Intervention Program in Bernalillo County
- 4,018 clients served at the San Juan County Detoxification facility

### Funding

LDWI funding is allocated to all 33 counties through three different funding streams: distribution, competitive grants, and six alcohol detoxification grants. In FY15, Local DWI Programs spent a total of \$17.2 million on programs and activities to reduce the incidence of DWI in New Mexico. Of the total funding expended, \$11.9 million were distribution funds, which are distributed to counties on a quarterly basis as the funds are collected; \$2.5 million was spent through competitive grants, which operate on a cash reimbursement basis and are awarded based on an application process; and \$2.8 million was spent on detoxification grants, which are provided to six counties for social detoxification programs and alcohol treatment.

The pie chart below shows the total FY15 expenditures by component area with all funding combined:



## Demographic Profile of the DWI Offender

All local programs that receive funding are required to screen and track DWI offenders in the DFA approved screening program. The following offender profile information is based on data entered by local programs in FY15. The numbers below reflect only individuals convicted and screened for DWI offenses.

### Demographics of DWI offenders:

- 6,650 total were screened
- 73% were male
- 27% were female
- 81% were between the ages of 21 and 50 (with an average age of 34)
- 48% were Hispanic
- 216% were Native American
- 24% were White
- 39% had 12 years of education
- 20% had 11 years or less of education
- 45% had an annual income of less than \$10,000
- 20% had an annual income of between \$10,001 and \$20,000
- 76% were employed at the time of their arrest
- 24% were not employed in the year prior to their arrest
- 54% worked nine months or less during the year prior to their arrest

### Assessment Profile

- 2% were categorized as having no apparent alcohol problem
- 24% were categorized as having an established problem
- 39% were categorized as having a severe problem

## LDWI Accomplishments

In FY15, DFA/LGD remained focused on improving the ADE, Inc. database which is used for screening and tracking of DWI Offenders. We also have improved the reporting efforts for the prevention and law enforcement data. All of the LDWI data collection is done to better track local DWI program accountability and improve program reporting. These improvements will enable LGD to enhance their capacity for evaluation, drive improvements in the planning and delivery of services, and consequently should become more effective in reducing DWI incidents and accidents throughout New Mexico.

### Program Evaluation

The LDWI Program has in place an ongoing statewide evaluation system through its screening and tracking program. During FY15, the Department of Health (DOH), Epidemiology and Response Division (ERD), through a Memorandum of Understanding (MOU) with DFA, continued design improvements to the current system. The goal of these improvements will be to enable the reporting of program performance against program goals. All new evaluation components being added to the

overall evaluation system will be automatically populated with data from ADE. This will reduce the data entry burden on programs related to performance reporting.

In FY15, county programs continued to collect detailed information on activities funded through the Prevention component. The information is collected using Center for Substance Abuse Prevention (CSAP) strategies. The data includes goals for each activity along with the number of times the activity occurred, the number of people reached by each activity and whether or not the activity is considered evidence based. The data is entered into a database which was developed by ADE, Inc. with direction from LGD Staff. See attached example of reporting requirements, Exhibit 1.

Each Local county DWI program, has hired a local evaluator who will be evaluating prevention, compliance and/or treatment components of the local DWI Programs. LGD/DWI program plans to have a statewide evaluation plan which will roll up each of the county plans into the statewide plan to present to the legislature by January 2018. A sample of a local DWI Program evaluation report is attached as Exhibit 2.

#### **Treatment**

Treatment is an important focus of the LDWI Program. By statute (Section 11-6A-3.G, NMSA 1978), 65% of *grant* funds must be awarded for treatment. In FY15, 78% of *grant* funds were awarded for treatment. Most counties refer offenders to treatment whether the treatment is funded by LDWI or other funding sources, and in FY15, 3,601 DWI offenders and 463 domestic violence offenders were referred to treatment. Treatment services are available for any offender convicted of an alcohol related offense who is sentenced by the court to the county misdemeanor compliance program.

#### **Compliance Monitoring**

In most of New Mexico counties, the local DWI programs provide misdemeanor compliance monitoring services to DWI offenders. Many of the Magistrate Courts in the state rely on these services to help offenders complete their court ordered sanctions and to reduce recidivism. Without these programs, thousands of misdemeanants would not be supervised, and therefore, would not receive support to complete their sentencing requirements.

In FY15, three county Compliance Monitoring Programs (CMP), Lea, Sandoval and San Juan, applied and were accepted by the New Mexico Adult Misdemeanor Compliance Professional Standards Council to be the first CMP's to become accredited in the state. Accreditation, through the New Mexico Association of Counties, will bring a higher level of consistency and increased accountability across county programs.

In FY15, the DWI Affiliate, of the New Mexico Association of Counties (NMAC), worked closely with DFA and the Administrative Office of the Courts (AOC) to continue to provide the curriculum for a basic training course for compliance officers. The curriculum includes modules on authority, ethics, self-defense, and motivational interviewing. Eighteen compliance officers from county compliance programs completed the week long training course in September 2015. LDWI Guidelines require that all new compliance officers attend the Court Officer Basic Training within two years of their hire.

### Prevention Activities

The Local DWI prevention programs include educating children, adolescents, families and communities by directly addressing risk factors for DWI and alcohol related incidents. Working in concert with partners, the prevention programs are an effective way to influence communities in a positive manner. Law enforcement plays an integral part to educate the public of the perceived risk of arrest and work closely with the LDWI Programs.

In FY15, the Prevention Programs provided 45 distinct Center for Substance Abuse Prevention (CSAP) school-based activities for a total of 13,685 distinct school-based visits reaching 265,714 students statewide. School-based prevention activities included curriculums such as Protecting You/Protecting Me, Alcohol Literacy Challenge, All-Stars, Above the Influence, Prime for Life, Too Good for Drugs, Dare To Be You, Envision Your Future, Girls Circle, and Life of an Athlete. Other school-based prevention activities included Red Ribbon Week, Sticker Shock, alcohol-free events, and drunk-driving simulation.

Evidence-based ‘individual strategy/direct service,’ prevention that takes place in schools, require intensive amount of time and manpower. Many Local DWI prevention programs have focused their efforts on more ‘environmental’ strategies to include working collaboratively on a community level in order to have the widest overall prevention impact. Community wide efforts and classroom curriculum combination make differences that impact not only school age students but add benefit to the general population. Evidence based strategies such as the Bernalillo County’s Be “Above the Influence” media campaign include the schools/students and populations at the community level, creating a larger impact. Many prevention programs incorporate environmental strategies as an approach that have a wider prevention reach with limited prevention resources. Prevention efforts as a rule take a number of years of concentrated efforts to produce outcomes that can be evaluated. Programs have leveraged funds for maximum impact in reducing alcohol related incidences.

### Law Enforcement

In FY15, Local DWI programs funded 327 law enforcement activities including checkpoints and saturation patrols resulting in 133 DWI arrests. There is evidence that when enforcement activities are done in conjunction with media campaigns associated with those activities, the number of people drinking and driving goes down. In FY15, over 48 million people (duplicated) were reached by DWI billboards, newspaper articles and public service announcements media campaigns. That translates to roughly 24 media hits per New Mexican. By way of context, consider that the average annual number of alcohol ads seen by youth watching television increased from 217 in 2001 to 366 in 2009, approximately one alcohol ad per day. (**Youth Exposure to Alcohol Advertising on Television, 2001-2009** [www.camyo.org](http://www.camyo.org))

### Native American Programs/Activities

In FY15, 26 Local DWI programs in New Mexico provided screening and tracking services for Native American DWI offenders. Total Offenders and the portion that were Native American statewide and in selected counties were as follows:

<b>Geographical Area</b>	<b>Total DWI Offenders</b>	<b>Native American DWI Offenders</b>	<b>Percent Native American</b>
Bernalillo	1409	231	16%
Cibola	151	100	66%
McKinley	289	267	92%
San Juan	803	563	70%
Sandoval	621	152	24%
Statewide Total	6,927	1,470	21%

In addition to screening and tracking services, twelve counties provide other services directly to Native American Communities, including, detoxification services, prevention, enforcement, and treatment.

#### **Audits and Technical Assistance**

As per the LDWI Guidelines it is required that every DWI Program in the state is visited annually by DFA/LGD DWI Program Managers. The visit can be for a program audit or technical assistance. Many local DWI programs are visited more often than once annually depending on local need. In FY15, all 33 counties were visited at least once by DFA/LGD DWI Program Managers or the DWI Program Auditor for a total of 46 on site visits with county LDWI Programs.

The LGD staff will audit all 33 counties at least once over a three year period. During FY15, staff conducted ten audits of local DWI programs throughout the state. Of the ten audits conducted, there were no findings to report for the audit scope. It was also determined that any prior audits findings have been resolved.

LGD staff conducted two mandatory workshops for the Local DWI County Coordinators to provide technical assistance on the application process and the implementation of budgets and grant agreements. Agenda items included reviewing reimbursement request forms, database updates and speakers from the NM Department of Health and Safer New Mexico Now.

#### **Local Program Collaboration**

Local DWI Coordinators work collaboratively with county health councils, school health councils, drug courts, magistrate court judges and staff, mental health professionals, prevention and treatment organizations to coordinate the use of resources and ensure that services are being received by those who need them.

#### **Conclusion**

The Local DWI Program aims to reduce DWI, alcoholism, and alcohol abuse through a multi-pronged approach, which includes treating the offender through screening, treatment, compliance monitoring,

and alternative sentencing, as well as preventing DWI before it starts through prevention and enforcement activities. This approach has made a positive impact on reducing DWI. According to the Traffic Safety Bureau of the NM Department of Transportation, alcohol involved traffic fatalities have fallen consistently from 231 in 1995 to 137 in 2013, however the alcohol involved traffic fatalities rose in 2014 to 166; a 17% one year increase. This proves that more work must be done to keep our highways and the citizens of New Mexico safe.

In the following section of this annual report is information provided by each county DWI program. This information is provided from each local program and includes data, activities and outcomes for FY15.

Any questions on the following data should be directed to the County DWI Program Coordinator.

This report can be found on the DFA website at:

<http://nmdfa.state.nm.us/dwi-program-information.aspx>

A list of the County DWI Program Coordinators can be found at:

<http://nmdfa.state.nm.us/dfa-approved-screening-program-ade-inc-.aspx>

Exhibit 1 – Sample MDS report requirements  
**County Actuals - Sandoval**  
**Quarter 4 2015**

**Prevention**

Dissemination Of Information																				
Activity	Evidence Based	Strategy	Main Risk Factor	Underage Drinking Activity	Number of Activities/Interventions Provided During Reporting Quarter	Number of People Reached/C contacts (Unduplicated)	Number of People Reached/C contacts (Duplicated)	Type of Contact	Strategy Notes	School Based	School Name	Grade	Number Male	Number Female	Time Spent in Classroom Each Visit?	Pre Test Done?	Curriculum Completed for Entire Course?	Post Test Done?	Percentage Completed	Percentage Change Reported through Pre/Post Tests
Speaking Engagement	No	Speaking Engagements	Low perceived risk of alcohol	Yes	36	720		Listeners												
Red Ribbon Week	No	Speaking Engagements	Social norms that accept and/or encourage underage drinking	Yes	0	0		Listeners												
Newspaper Article/Add	No	Media Campaigns	Low perceived risk of alcohol	Yes	2	23500		Viewers												
Public Service Announcements (Radio,	No	Radio/TV PSAs	Easy access and availability	Yes	4	2085300		Viewers												

Web, or TV)																			
Brochures, Fact Sheet, Newsletter and Handout	No	Brochures, Fact Sheets, Newsletters and Handouts	Low perceived risk of alcohol	Yes	1000	710													
Health Fairs	No	Health Fairs/Health Promotion	Easy access and availability	Yes	6	2000													
Billboards	No	Media Campaigns	Easy access and availability	Yes	2	6174000													
Community Outreach	Yes	Other Information Dissemination	Social norms that accept and/or encourage underage drinking	Yes	0	0													

Prevention Education																				
Activity	Evidence Based	Strategy	Main Risk Factor	Underage Drinking Activity	Number of Activities/Interventions Provided During Reporting Quarter	Number of People Reached/C contacts (Unduplicated)	Number of People Reached/C contacts (Duplicated)	Type of Contact	Strategy Notes	School Based	School Name	Grade	Number Male	Number Female	Time Spent in Classroom Each Visit?	Pre Test Done?	Curriculum Completed for Entire Course?	Post Test Done?	Percentage Completed	Percentage Change Reported through Pre/Post Tests
Dare to	Yes	Ongoing Classroom/Small	Low perceived	Yes	6	120	720	Student		Yes	CUBA MIDDLE	Middle	80	40	45 minutes	Yes		Yes		

Be You		Group Sessions	risk of alcohol					Cont acts				School							
Dare to Be You	Yes	Ongoing Classroom /Small Group Sessions	Low perceived risk of alcohol	Yes	7	64	448	Student Cont acts		Yes	SANTO DOMINGO ELEMENTARY	Middle School	29	35	45 minutes	Yes	No	Yes	
Dare to Be You	Yes	Ongoing Classroom /Small Group Sessions	Low perceived risk of alcohol	Yes	6	88	528	Student Cont acts		Yes	BERNALILLO MIDDLE	Middle School	50	38	45 minutes	Yes	No	Yes	
Dare to Be You	Yes	Ongoing Classroom /Small Group Sessions	Low perceived risk of alcohol	Yes	32	28	896	Student Cont acts		Yes	INDEPENDENCE HIGH SCHOOL	High School	10	18	45 minutes	Yes	No	Yes	
Dare to Be You	Yes	Ongoing Classroom /Small Group Sessions	Low perceived risk of alcohol	Yes	0	46	0	Student Cont acts		Yes	COCHITI MIDDLE	Middle School	25	21	45 minutes	Yes	No	Yes	
Media Literacy	Yes	Ongoing Classroom /Small Group Sessions	Low perceived risk of alcohol	Yes	7	62	434	Student Cont acts		Yes	INDEPENDENCE HIGH SCHOOL	High School	48	14	45 minutes				
Media Literacy	Yes	Ongoing Classroom /Small Group Sessions	Low perceived risk of alcohol	Yes	8	79	632	Student Cont acts		Yes	CUBA HIGH	High School	36	43	45 minutes				

Alternative Activities

Activity	Evidence Based	Strategy	Main Risk Factor	Underage Drinking Activity	Number of Activities/Interventions Provided During Reporting Quarter	Number of People Reached/Contacts (Unduplicated)	Number of People Reached/Contacts (Duplicated)	Type of Contact	Strategy Notes	School Based	School Name	Grade	Number Male	Number Female	Time Spent in Classroom Each Visit?	Pre Test Done?	Curriculum Completed for Entire Course?	Post Test Done?	Percentage Completed	Percentage Change Reported through Pre/Post Tests
Sobriety Powwow	Yes	Other Alternative Activities	Social norms that accept and/or encourage underage drinking	Yes	1	550		Attendees												
Cultural Competency Training/Cultural Events	Yes	Drug-Free Social, Recreational, and/or Cultural Activities	Social norms that accept and/or encourage underage drinking	Yes	8	155		Attendees												
Project Graduation/ Alcohol Free Prom	No	Drug-Free Social, Recreational, and/or Cultural Activities	Social norms that accept and/or encourage underage drinking	Yes	1	300		Student Contacts		Yes	BERNAL ILLO HIGH	12	150	150	1 Day Event	No	No	No		

Community Based Processes																					
Activity	Evidence Based	Strategy	Main Risk Factor	Underage Drinking Activity	Number of Activities/Interventions Provided During Reporting Quarter	Number of People Reached/C contacts (Unduplicated)	Number of People Reached/C contacts (Duplicated)	Type of Contact	Strategy Notes	School Based	School Name	Grade	Number Male	Number Female	Time Spent in Classroom Each Visit?	Pre Test Done?	Curriculum Completed for Entire Course?	Post Test Done?	Percentage Completed	Percentage Change Reported through Pre/Post Tests	
Coalition Building/Community Mobilization	Yes	Community Team-Building	Social norms that accept and/or encourage underage drinking	Yes	10	100		Attendees													
Capacity Building	Yes	Multi-Agency Coordination and Collaboration/Coalition	Social norms that accept and/or encourage underage drinking	Yes	5	50		Attendees													

Environmental Approaches																				
Activity	Evidence Based	Strategy	Main Risk Factor	Underage Drinking Activity	Number of Activities/Interventions Provided During Reporting Quarter	Number of People Reached/Contacts (Unduplicated)	Number of People Reached/Contacts (Duplicated)	Type of Contact	Strategy Notes	School Based	School Name	Grade	Number Male	Number Female	Time Spent in Classroom Each Visit?	Pre Test Done?	Curriculum Completed for Entire Course?	Post Test Done?	Percentage Completed	Percentage Change Reported through Pre/Post Tests
Designated Driver Sponsorship	Yes	Modifying Alcohol Practices	Low perception of harm	Yes	3	127		Attendees												

## Enforcements

Enforcements										
Activity	Date Of Activity	Number of DWI Arrests	Number of Open Container Citations	Number of Under 21 Possessions/Consumption Citations	Number of Other Citations	Number of Written Warnings	Number of Other Arrests	LDWI Funding for Overtime or Full-time Officer? (drop down with choice)	Total Law Enforcement Hours Funded for Activity	Total Number of Officers Funded
Saturation Patrol	4/3/2015	0	0	0	46	6	0	Overtime	24	6
Saturation Patrol	4/3/2015	0	0	0	8	2	3	Overtime	8	2
Saturation Patrol	4/9/2015	0	0	0	5	1	0	Overtime	8	2
Saturation Patrol	4/17/2015	0	0	0	0	0	3	Overtime	8	2
Saturation Patrol	4/17/2015	0	0	0	8	1	0	Overtime	8	2
Saturation Patrol	4/17/2015	0	0	0	5	1	0	Overtime	4	1
Saturation Patrol	4/19/2015	0	0	0	38	10	1	Overtime	20	5
Saturation Patrol	4/24/2015	0	0	0	7	1	0	Overtime	4	1
Saturation Patrol	4/24/2015	1	2	0	5	1	0	Overtime	8	2
Party Patrol	5/2/2015	0	0	1	15	6	0	Overtime	20	5

Party Patrol	5/8/2015	0	0	0	14	5	2	Overtime	24	6
Checkpoint	5/15/2015	2	0	0	44	0	1	Overtime	57	13
Party Patrol	5/16/2015	0	0	0	0	0	0	Overtime	8	2
Party Patrol	5/21/2015	0	0	0	0	0	0	Overtime	8	2
Party Patrol	5/21/2015	0	0	0	0	0	0	Overtime	8	2
Party Patrol	5/22/2015	0	0	0	5	5	0	Overtime	8	2
Saturation Patrol	5/22/2015	0	0	0	6	5	0	Overtime	8	1
Party Patrol	5/23/2015	0	0	0	0	0	0	Overtime	8	2
Saturation Patrol	5/24/2015	0	0	0	0	0	0	Overtime	4	1

### Coordination, planning and evaluation

Coordination, planning and evaluation	
Total number of component programs operated (distribution and grant)	8
Total number of staff members full-time equivalent (FTE)	14
Total number of LADACS on staff	8
Total number of substance abuse interns on staff	0
Total number of Certified Prevention Specialists on staff or contracted	1
Total number of staff or contractors in prevention certification training	1
Total number of Courts Compliance Officers on staff or contracted (not trackers)	4
Total number of DWI Planning Council voting members	11
Total number of DWI Planning Council meetings conducted	1
Average DWI Planning Council member attendance (per meeting)	9
Total number of non-voting participants at all DWI Planning Council meetings	6
Total number of DWI related meetings attended by staff/contracted employees	67
Total number of training activities attended by staff/contracted employees	11
Total number of staff/contracted employees at training activities	28
Total number of training activities provided	6
Total number of participants at provided training activities	99
Total number of media interviews given	1

Comments	
Comments	Sandoval County provides office space, utilities and DWI Program provides treatment to many Drug Court clients.

**Exhibit 2 – Sample Evaluation Report**  
**Sandoval County LDWI Program**  
**Executive Summary: FY 2015 Final Report Findings**  
**Reporting Period: July 1, 2014 – June 30, 2015**

The Community Survey was implemented in FY 2012 and in 2014 and 2015 to determine whether social access to alcohol was decreased by reducing the number of adults who provide alcohol to minors. The survey would also measure perceived risk of legal consequences for breaking alcohol related laws. Media campaign activities including information that will raise awareness and consequences for breaking alcohol related laws and publicizing all available drinking related law enforcement activities were completed throughout the year.

The following tables illustrate community survey findings for multiple years. The arrows indicate whether there was an increase or decrease between years. The table points out whether lower or higher is better as it relates to the indicators outlined within its content category. The percentages of alcohol use for the total sample decreased between 2014 and 2015 except for the Past 30-Day use of alcohol where it increased by 11.5 percentage points. Perceptions of easy access decreased showing an improvement between years. Although there was an intense effort to publicize the risk and legal consequences for breaking ATOD laws, the perception of risk and legal consequences indicators decreased demonstrating unexpected outcomes between years. Those areas highlighted in “blue” represent positive results.

**Perceptions of risk/legal consequences of alcohol consumption**

Access to Alcohol (Lower is Better)	2012 N=266	2014 N=289	2015 N=297	
	Somewhat Easy or Very Easy	Somewhat Easy or Very Easy	Somewhat Easy or Very Easy	Increase/Decrease from 2014
Ease of access to alcohol by teens in the community	-	87.2%	63%	↓
Ease of access to alcohol by teens in the community from stores and restaurants. No difference between males and females.	54.7%	31.2%	32.2%	↓
Perception of risk/legal consequences (Higher is Better)	Not Very Likely and Not At All Likely	Not Very Likely and Not At All Likely	Not very Likely and Not At All Likely	Increase/Decrease from 2014
Likelihood of police breaking up parties where teens are drinking. Females more than males.	24.5%	28.1%	19.4%	↓
Likelihood of police arresting an adult for giving alcohol to someone under 21. Females more than males.	20.1%	23.6%	13.7%	↓
Likelihood of someone being arrested if caught selling alcohol to a drunk or intoxicated person. Females more than males.	23.7%	27.7%	23.9%	↓
Likelihood of being stopped by police if driving after drinking too much. Females more than males.	16.6%	22.8%	15.9%	↓
Likelihood of being convicted if stopped and charged with DWI. Females more than males.	15.9%	15%	10.3%	↓

**Percentages of alcohol use outcomes overall and by sex (Lower is better)**

Outcomes	% of Yes 2012 N=266	% of Yes 2014 N=289	% of Yes 2015 N=297	
Past 30-day alcohol use (males more than females). Lower than the state and the comparison group (2014).	54.6%	34.5%	46.4%	↑
Binge Drinking (5 or more drinks in 1 occasion – males more than females). Significantly lower than the state and the comparison group (2014).	27.8%	16.0%	14.2%	↓
DWI (males more than females). Lower than the state and the comparison group (2014).	3.1%	3.8%	.7%	↓
Binge Drinking and Driving (Driving after having had 5 or more drinks – males more than females). Significantly lower than the state and the comparison group (2014).	4.1%	1.7%	1.7%	Remained the same
Provided alcohol for minors past year. Males more than females. Lower than the state and the comparison group (2014).	2.2%	2.8%	2.5%	↓

The Dare to Be You (DTBY) curriculum was implemented in middle schools and high schools in Sandoval County. The objective is to increase student self-reported self-esteem, problem, solving and self confidence among youth participating in the program. The Strategies for Success Survey Module A and Module D were given to students to measure changes in behavior, attitude, and perception. The following tables indicate changes reported in FY15 for both middle and high school students.

**Self-reported ATOD use among middle school participants who report any ATOD use: Alcohol use (-39/9%) showed positive change (reduced rates of use) from pre to post. Binge drinking increased from baseline to posttest.**

Substance Baseline users (n)	% Pretest	% Posttest	% Change
Alcohol (n=36)	27.8	16.7	-39.9
Binge Drinking (n=36)	5.6	11.1	98.2

**SFS: Module D with participating middle school students (internal resiliency-risk and protective factor indicators)**

Scale	Range	Baseline Mean	Post-Test Mean	F-test & sig. (indicated by asterisk[s])	Effect size <sup>a</sup>	Desired Outcome
Cooperation and Communication	0-3	2.15	2.06	.001	.000	⦿
Self-efficacy	0-3	2.24	2.27	.667	.003	⦿
Empathy	0-3	2.06	2.02	.415	.002	⦿
Problem Solving	0-3	2.03	1.90	6.861	.027	⦿
Self-awareness	0-3	2.37	2.35	.365	.001	⦿
Goals and Aspirations	0-3	2.68	2.70	.259	.001	⦿

All of the six scales shown above indicated very good baseline values and changed little from pretest to posttest. On a possible range of values from 0 – 3 (higher the better), all values were above 2, except for “Problem Solving” at 1.90. This item also showed the largest change from pre to post, but unfortunately in the wrong direction. As for the other measures of internal resiliency, whether the means moved higher or lower the magnitudes were very small. These scales showed pretest scores at or near 2 on a scale ranging from 0 – 3. While not indicative of an extreme “ceiling effect” it does suggest a strong level of internal resiliency among this cohort at baseline, and also at posttest. For high school students only Cooperation and Communication and Self-efficacy showed a slight improvement with no significant value.

**Self-reported ATOD use among high school participants (male and female):** Alcohol use (-22.8% males and 0% females) and binge drinking (-15.0% males and -11.0% females) showed positive change (reduced rates of use).

Substance	Pretest		Posttest		% Change	Pretest		Posttest		% Change
	n	%	n	%		n	%	n	%	
	Boys					Girls				
Total sample N=56										
Alcohol	13	23.2	10	17.9	-22.8	14	22.6	14	22.6	0.0
Binge Drinking	6	10.7	5	9.1	-15.0	9	14.5	8	12.9	-11.0

**Past 30-day ATOD use<sup>a</sup> differences from pre-test to post-test among any ATOD user at baseline and had no missing values at both baseline and posttest.**

Substance Baseline users (n)	% Pretest	% Posttest	% Change
Alcohol, n=54	51.9	38.9	-25.05
Binge Drinking, n=53	30.2	22.6	-25.17

**Perceptions of risks of drinking alcohol at school or in the community (high school students)**

Perception of risk/legal consequences	%		t-test
	Baseline-Likely	Posttest-Likely	
Likelihood of being caught by teachers or staff when drinking alcohol at school (n=116)	70.7	74.6	-1.00
Likelihood of getting into trouble with school if got caught drinking at school (n=118)	89.0	88.1	.242
Likelihood of being caught by police when drinking alcohol in the community (n=118)	52.5	52.5	.000
Likelihood of getting arrested or cited by police when drinking alcohol in the community (n=118)	56.8	59.3	-.479

Most of the ATODA measures taken of this Sandoval County high school sample reflect relatively low numbers and rates of problematic ATOD use. For a High School sample, there doesn’t seem to be much evidence of overly problematic behaviors, except perhaps in the area of alcohol and marijuana use. Some of the credit for this should probably go to the presence of a prevention program at the school.



## 2014 NM DWI Affiliate Strategic Plan Executive Summary Report

The 2014 NM DWI Affiliate Strategic Plan was developed July 21-22, 2014 by the DWI Coordinators who are funded by the Local DWI Grant Program, Local Government Division, Department of Finance and Administration (DFA). An environmental scan that was completed by the affiliate membership and the 2013 Needs Assessment helped the group determine the trends and the implications in the community and within the affiliate they may impact the group's success in achieving the identified goals. They helped pinpoint the Affiliate's current strengths and challenges and opportunities it is likely to face over the next four years. This process facilitated a context for establishing priority of needs and developing goals, objectives and activities.

The group selected three (3) of the eight (8) component areas funded by DFA as areas for focusing their work for the next four years: 1. Prevention; 2. Compliance; and 3. Treatment. The following are the priority areas identified for each of the three components and the objectives developed for each priority:

### Prevention:

#### **Priority 1: Education to Local Officials on the Concepts of Prevention**

**Objective:** Increase the number of elected officials that understand the concepts of evidence-based prevention starting FY15 and completed by the end of FY18.

#### **Priority 2: Training Opportunities**

**Objective:** Increase the number of DWI individuals having access to presentation trainings by two per year starting FY15 to FY18.

### Treatment:

#### **Priority 1: Education to judges and community about the benefits of treatment**

**Objective:** Increase court referrals to appropriate treatment for DWI offenders by 5% by 2016.

#### **Priority 2: Mandatory Treatment For All Offenders**

**Objective:** Decrease statewide recidivism by 5% by 2016.

### Compliance:

#### **Priority 1: Complete Accreditation**

**Objective:** Identify 3 local programs applying for accreditation process by June 30, 2015.

#### **Priority 2: Courts Participation**

**Objective:** To increase the courts that are not utilizing or under utilizing local programs by 10% by June 30, 2015.

#### **Priority 3 For Each Component: Evaluation of Prevention, Compliance, and Treatment Programs**

**Objective:** Increase the capacity of DWI Prevention Programs to prove the effectiveness of their respective prevention strategies by 50% by FY18.

If you would like to see the complete Strategic Plan or find out additional information about the DWI Programs, please visit the DWI Affiliate website



NEW MEXICO DEPARTMENT OF TRANSPORTATION  
 FATALITY SUMMARY BY COUNTY  
 TRAFFIC RECORDS BUREAU  
 2013-2014-2015-2016  
 7/31/2016

	2016		2016		2015		2015		2014		2014		2013		2013	
	ALC	NO/ALC	UNK	UNK	ALC	NO/ALC	UNK	UNK	ALC	NO/ALC	UNK	UNK	ALC	NO/ALC	UNK	UNK
BERNALILLO	26	33			35	29			34	35			23	27		
CATRON									1				2	4		
CHAVES	1	10			3	10			4	3			5	5		
CIBOLA		8			7	5			1	6			6	10		
COLFAX		2			2	2			3	4			2	4		
CURRY	1	2			2				1	3			1	3		
DE BACA		1				3							2	2		
DONA ANA	8	7			5	13			11	8			6	8		
EDDY	1	6			1	9			2	14			2	13		
GRANT	3				1	2			1	1			1	4		
GUADALUPE	1	6			1	7			1	6			1	5		
HARDING		2								2				1		
HIDALGO		1				3				10			1	1		
LEA	3	4			5	8			9	22			5	7		
LINCOLN		4			1				3	2			4			
LOS ALAMOS										2						
LUNA	4	5			1	5				1			2	4		
MCKINLEY	5	5			12	11			30	18			17	9		
MORA		4			1	1			2	1			3	3		
OTERO	1				2	8			9	4			3	5		
QUAY		2			2	9			2	9			1	5		
RIO ARRIBA	3	3			6	6			4	5			6	7		
ROOSEVELT		1			3	2			1	1			1	3		
SAN JUAN	12	2			17	13			18	21			15	12		
SAN MIGUEL	4	1				4			2	1			4	3		
SANDOVAL	5	4			2	3			4	10			5	13		
SANTA FE	3	5			4	10			7	13			6	3		
SIERRA	1	2			1	2			2				2	2		
SOCORRO	2	11			2	2			1	6			2	6		
TAOS		3			2				6	4			3	3		
TORRANCE	4	5			2	8			3	2			6	4		
UNION		1							1					1		
VALENCIA		2			3	2			7	3			1	1		
<b>TOTAL</b>	<b>88</b>	<b>142</b>			<b>121</b>	<b>177</b>	<b>0</b>	<b>0</b>	<b>169</b>	<b>217</b>	<b>0</b>	<b>0</b>	<b>133</b>	<b>177</b>	<b>0</b>	<b>0</b>



NEW MEXICO DEPARTMENT OF TRANSPORTATION  
 TRAFFIC RECORDS BUREAU  
 Fatality Summary 2015-2016  
 7/31/2016

Months	Total	Total	Alcohol	Alcohol	No-Alcohol	No-Alcohol	Alcohol	Alcohol
	2016	2015	Involved	Involved	Involved	Involved	Unk	Unk
			2016	2015	2016	2015	2016	2015
January	21	16	10	13	11	3	0	0
February	35	17	14	5	21	12	0	0
March	27	30	8	12	19	18	0	0
April	47	18	22	9	25	9	0	0
May	32	19	16	5	16	14	0	0
June	31	32	13	12	18	20	0	0
July	37	27	5	14	32	13	0	0
August	0	0						
September	0	0						
October	0	0						
November	0	0						
December	0	0						
<b>Totals</b>	<b>230</b>	<b>159</b>	<b>88</b>	70	<b>142</b>	89	<b>0</b>	0
			<b>38%</b>	44%	<b>62%</b>	56%		
<b>TOTALS</b>	<b>2016</b>	2015						
Total known	230	159						
Total unknown	0	0						

Total Fatalities 2016=	230
Total Fatalities 2015=	159
Percent of <b>INCREASE</b> in Total Fatalities 2016 vs. 2015 =	45%
Percent of <b>INCREASE</b> on Alcohol Involved Fatalities 2016 vs. 2015	26%
Percent of <b>INCREASE</b> Non-Alcohol Involved Fatalities 2016 vs. 2015	60%

NOTE: THE NMDOT FATALITY SUMMARY REPORTS ARE PRELIMINARY AND NUMBERS ARE SUBJECT TO CHANGE



**Local DWI Grant Program Budgets By Component - Combined Funding: Grant, Distribution & Detox**  
**Approved Budgets Allocated April 26, 2016**  
**Fiscal Year 17 July 1, 2016 - June 30, 2017**

County	Prevention	Enforcement	Screening	Domestic Violence	Treatment	Compliance Monitoring & Tracking	Coord., Planning, & Eval.	Alternative Sentencing	Total Budgeted
Bernalillo	1,070,155	180,000	0	0	3,900,000	115,000	660,000	650,000	6,575,155
Catron	65,295	3,000	0	1,700	2,000	9,670	10,335	0	92,000
Chaves	96,000	50,500	12,500	54,000	128,800	46,857	84,900	13,000	486,557
Cibola	65,049	0	0	0	41,000	92,919	56,104	20,136	275,208
Colfax	63,492	0	0	0	10,000	48,491	15,000	0	136,983
Curry	188,670	25,768	0	16,600	29,179	12,179	12,538	30,000	314,934
De Baca	76,575	500	0	0	0	0	24,925	0	102,000
Dona Ana	350,535	15,000	0	30,000	326,831	580,704	44,571	30,000	1,377,640
Eddy	272,870	32,302	67,489	0	65,324	45,457	78,396	0	561,839
Grant	105,841	23,000	0	0	45,000	68,780	41,079	0	283,700
Guadalupe	53,293	0	33,407	0	11,982	22,838	5,480	0	127,000
Harding	49,000	0	0	0	0	3,900	24,100	0	77,000
Hidalgo	70,064	2,000	0	0	0	23,000	17,000	0	112,064
Lea	200,572	36,641	0	0	198,207	228,109	43,879	0	707,408
Lincoln (Ruidoso)	96,033	24,925	0	0	0	20,442	59,053	0	200,453
Los Alamos	37,911	1,115	1,371	0	7,744	18,873	5,368	4,618	77,000
Luna	79,445	0	0	0	8,700	72,095	22,547	28,886	211,673
McKinley	127,001	0	104,000	0	150,000	192,400	170,807	32,000	776,208
Mora	49,400	0	0	0	12,000	28,300	9,800	0	99,500
Otero	112,306	10,000	1,000	52,650	21,800	93,210	33,221	32,161	356,348
Quay	46,046	0	0	0	0	31,518	16,505	0	94,069
Rio Arriba	134,280	2,000	0	0	414,000	67,697	143,227	0	761,204
Roosevelt (Portales)	76,397	0	0	0	0	6,000	41,500	22,000	145,897
San Juan	0	0	23,505	0	915,516	323,267	0	479,877	1,742,165
San Miguel	122,874	5,330	1,500	0	0	30,016	99,801	0	259,521
Sandoval	112,867	40,000	22,971	69,755	387,575	268,266	92,688	5,000	999,122
Santa Fe	687,096	74,200	19,482	30,000	300,000	277,600	280,500	30,000	1,698,878
Sierra	12,000	7,000	0	0	25,000	68,592	31,936	0	144,528
Socorro	0	5,000	0	2,000	157,480	90,520	40,201	5,000	300,201
Taos	87,558	0	0	0	0	173,352	23,522	30,000	314,432
Torrance	66,325	11,500	7,500	0	18,500	8,000	23,383	27,466	162,674
Union	16,263	2,000	0	0	0	43,778	14,959	0	77,000
Valencia (Los Lunas)	65,408	38,192	0	0	55,706	201,326	89,007	0	449,639
<b>Total Funds</b>	<b>4,656,620</b>	<b>589,973</b>	<b>294,725</b>	<b>256,705</b>	<b>7,232,344</b>	<b>3,313,156</b>	<b>2,316,332</b>	<b>1,440,144</b>	<b>20,100,000</b>
% of Available Funds	23.17%	2.94%	1.47%	0.46%	35.98%	16.48%	11.52%	7.16%	99%
<b>Grants Only</b>	<b>279,279</b>	<b>38,500</b>	<b>11,984</b>	<b>87,355</b>	<b>4,044,340</b>	<b>60,000</b>	<b>120,768</b>	<b>57,774</b>	<b>4,700,000</b>
% of Available Funds	5.94%	0.82%	0.25%	1.86%	86.05%	1.28%	2.57%	1.23%	100.00%
<b>Distribution Only</b>	<b>4,377,342</b>	<b>551,473</b>	<b>282,741</b>	<b>169,350</b>	<b>3,188,004</b>	<b>3,253,156</b>	<b>2,195,564</b>	<b>1,382,370</b>	<b>15,400,000</b>
% of Available Funds	28.42%	3.58%	1.84%	1.10%	20.70%	21.12%	14.26%	8.98%	100.00%

\*Treatment totals includes all detox funds

