



State of Wisconsin
Department of Health Services

Tony Evers, Governor
Karen E. Timberlake, Secretary

April 11, 2022

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) 2020 Annual Report to the Governor on Activities relating to Substance Use 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 use treatment and prevention services. The report highlights substance use disorder 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 opportunities for success.

Sincerely,

A handwritten signature in black ink, appearing to read "Karen E. Timberlake".

Karen E. Timberlake
Secretary-designee

Enclosure

2020 Annual Report to the Governor on Activities Relating to Substance Use Prevention and Treatment



Division of Care and Treatment Services
P-01023 (04/2022)

TABLE OF CONTENTS

BACKGROUND	2
Need for Activities Relating to Substance Use	2
PREVENTION-RELATED ACTIVITIES.....	3
Substance Abuse Prevention and Treatment Block Grant	3
Alliance for Wisconsin Youth.....	5
Department of Justice Substance Abuse Prevention and Treatment Block Grant Youth Prevention and Intervention Program.....	5
Community Improvement and Job Training Program	6
Wisconsin Wins.....	6
Problem Gambling Awareness Campaign	6
Tribal Initiatives	7
FEDERAL DISCRETIONARY GRANTS FOR PREVENTION	7
Strategic Prevention Framework Partnerships for Success (SPF-PFS)	7
Strategic Prevention Framework for Prescription Drugs	8
State Epidemiological Outcomes Workgroup.....	9
TREATMENT AND RECOVERY-RELATED ACTIVITIES.....	10
Substance Abuse Prevention and Treatment Block Grant	10
Intoxicated Driver Program.....	10
Other Criminal and Juvenile Justice Alternatives.....	11
Treatment Alternative Program.....	11
Department of Corrections	11
Medication-Assisted Treatment in a Jail Setting.....	12
Prisoner Re-Entry Program	12
Treatment Alternatives and Diversion	12
Outreach and Treatment Program for People Who Inject Drugs.....	12
Medication-Assisted Treatment Centers in Rural Areas.....	13
Gender-Specific Outreach and Treatment.....	13
Underserved Populations.....	14
Addressing Methamphetamine Use	15
Comprehensive Community Services	15
Peer Specialists.....	15
Consumer-Directed Activities.....	16
Federal Discretionary Grants for Opioid Treatment and Recovery	16
State Council on Alcohol and Other Drug Abuse	17
Quality Improvement Activities.....	17
Citations	19

This report is published annually in accordance with Wis. Stat. § 51.45(4)(p).

BACKGROUND

In 2020, the Wisconsin Department of Health Services (DHS) administered \$27,916,217 in federal Substance Abuse Prevention and Treatment Block Grant funds and more than \$24 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 body appointed by the governor that is responsible for promoting effective substance use disorder prevention and treatment policies.

Need for Activities Relating to Substance Use

National. Substance use has significantly affected individuals, families, and communities. In 2020, approximately 58.7 percent of people in the United States aged 12 and older used a substance in the past month (Substance Abuse and Mental Health Services Administration [SAMSHA], 2021). The costs related to the loss of productivity, health, and crime related to substance use total more than \$740 billion annually (National Institute on Drug Abuse, 2017). It is estimated that for people aged 12 and older in 2020 about 41.1 million people were in need of substance use treatment; about 4 million people received substance use treatment (SAMSHA, 2021).

Wisconsin drug overdose deaths increased from **10.9** (2010) to **25.9** (2020) per 100,000 population.

Wisconsin. Substance use poses significant health, social, public safety, and economic problems in Wisconsin (National Institute on Drug Abuse, 2017; DHS, 2016). In 2019, the most recent data available at the time this report was compiled, approximately 7.66 percent of people in Wisconsin had a substance use disorder, which is higher than the national average of 7.32 percent (SAMHSA, 2021).

Table 1 presents the prevalence of Wisconsin’s youth and adults who used various mood-altering, habit-forming substances and compares Wisconsin against the U.S. for different measures from the National Survey on Drug Use and Health. Wisconsin consistently reports higher percentages of both alcohol use and binge drinking. Furthermore, 38.5 percent of people aged 12 and older in Wisconsin report a lower perception of great risk from having five or more drinks of an alcoholic beverage once or twice a week compared to 44.8 percent of people in the United States (SAMHSA, 2020). More specifically, youth ages 12-17 report a much lower perception of risk (36.2 percent) from five or more alcoholic drinks than what national youth report (43.4 percent) (SAMHSA, 2020).

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

Substance Use Measure	2017-2018 Survey		2018-2019 Survey	
	Wisconsin	U.S.	Wisconsin	U.S.
Past month alcohol use	59.6%	51.4%	59.9%	50.9%
Past year marijuana use	13.6%	15.5%	14.6%	16.7%
Past year cocaine use	2.3%	2.1%	2.0%	2.0%
Past year heroin use	0.4%	0.3%	0.4%	0.3%
Past year pain reliever misuse	4.2%	3.9%	3.4%	2.8%

Source: SAMSHA, 2017; SAMHSA, 2021 (National Survey on Drug Use and Health).

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 deaths in 2010 to 27.2 deaths per 100,000 population in 2020 (Table 2; Wisconsin Interactive Statistics on Health [WISH], 2021).

Table 2. Wisconsin Drug Overdose Death Rate

Drug Involvement	2010	2014	2018	2020
Total drug overdose deaths	10.9	14.9	19.3	25.9
Drug overdose deaths involving any opioid	7.2	11.0	15.3	21.1
Drug overdose deaths involving prescription opioids	4.9	5.8	12.4	5.8
Drug overdose deaths involving synthetic opioids	1.1	1.6	9.4	18.1
Drug overdose deaths involving heroin	1.7	4.9	6.0	4.5
Drug overdose deaths involving cocaine	1.3	1.7	5.0	6.8
Drug overdose deaths involving psychostimulants	0.2	0.8	2.2	4.6

Source: WISH, 2021. Age-adjusted rate per 100,000 people.

The impacts of drug use, specifically opioids, are demonstrated in hospital data as well as death records. The age-adjusted rate of opioid-related discharges has increased from 270.0 in 2010 to 329.0 per 100,000 population in 2020; the age-adjusted rate of prescription-related hospital discharges increased from 19.6 in 2010 to 20.9 per 100,000 population in 2020. Heroin-related hospital encounters increased from 7.1 in 2010 to 37.0 per 100,000 population in 2020 (WISH, 2021).

To fully understand the prevalence of substance use disorder, it is important to understand the factors that shape it. These include individual aspects such as perception of risk, physical and mental health, and trauma. These factors also include community aspects such as access to service providers, availability of peer networks, stigma, and policies that promote racial and health equity. These individual and community factors help tell the story behind prevalence rates.

The “2019 Wisconsin Behavioral Health System Gaps Report,” a report commissioned by DHS and compiled by the University of Wisconsin-Madison Population Health Institute, which was published in 2020, provides more information to help understand the landscape in Wisconsin around substance use. Stakeholders and consumers expressed a need for more psychiatrists, crisis stabilization centers, translation services, and wraparound services, as well as better transportation options and workforce diversity. Furthermore, this report noted, “marginalized social groups experience disproportionate risk of behavioral health challenges as a result of coping with historical and ongoing systematic reduction of community resources, incarceration, displacement, social alienation, and state violence” (Vigna & Connor, 2020).

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 use 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 treatment services for people who identify as female. Prevention services funded under the block grant must be evidence-based to ensure the greatest impact and highest quality services. In 2020, the following priority areas were targeted by prevention service providers:

- Underage drinking (ages 12–20)
- Adult binge drinking (ages 18–34)
- Drinking among pregnant people
- 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	2017–2018		2018–2019	
	Wisconsin	U.S.	Wisconsin	U.S.
Any alcohol use in the past month	10.5%	9.4%	11.1%	9.4%
Past year marijuana use	11.7%	12.5%	12.0%	12.8%
Past year cocaine use	0.6%	0.5%	0.6%	0.4%
Past year heroin use	0.1%	0.1%	0.03%	0.02%
Past year pain reliever misuse	3.2%	2.9%	2.6%	2.5%

Source: SAMSHA, 2017; SAMHSA, 2021 (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 2020 compared to their distribution in the general population.

Table 4. Race/Ethnicity Distribution: General Population vs. People Reached, 2020

Race/Ethnicity	Percent of General Population	Percent of People Reached Through Prevention Programs
Native American	1.2%	1%
Asian	3.0%	3%
African American	6.7%	12%
Hispanic/Latino	6.9%	9%
Caucasian	87.1%	78%

Source: SAP-SIS, DHS 2020.

Table 5 provides a snapshot of the types of county and other local prevention services provided across the state in 2020

Table 5. Types of Prevention Programs, 2020

Prevention Program Type	Percent of Prevention Programs (n=246)
Population Risk Level Classification	
Universal Indirect (coalitions; policies)	41%
Universal Direct (general population; unknown risk)	30%
Selective (at-risk populations)	15%
Indicated (substance users; high-risk populations)	12%
Most Common Types of Activities	
Multiagency coordination and collaboration; coalitions	16%
Ongoing classroom and/or small group sessions	19%
Other activity	24%
Education programs for youth groups	11%
Parenting and family management	8%
Media Campaigns	3%

Source: SAP-SIS, DHS 2020.

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 members to positively impact youth by preventing substance use and other behavioral health concerns. The Alliance for Wisconsin Youth supported 109 community coalitions across the state in 2020.

The Alliance for Wisconsin Youth also supports 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 2020, the regional prevention centers:

- Awarded mini-grants to community coalitions to work on the state’s five prevention priorities and implement the Strategic Prevention Framework.
- Awarded scholarships to community coalitions to attend the Wisconsin Alcohol Policy Seminar.
- Provided training, technical assistance, and support on:
 - How to become culturally competent in programming.
 - How to identify impaired people and types of substances through the Drug Impairment Training for Educational Professionals presentations for teachers, health care providers, law enforcement, youth serving agencies, and parents.
 - How to establish secure medication take back and drop-off sites.
 - How to implement community alcohol policy changes.
 - How to influence a county agency’s use of the 20 percent block grant set-aside for prevention activities.
 - How to use the Strategic Prevention Framework through Substance Abuse Prevention Skills Training events.
 - How to help law enforcement officers identify impaired drivers through Advanced Roadside Impaired Driving Enforcement Training.
- Hosted trainings on ethics for prevention professionals.
- Hosted quarterly meetings with community coalitions.

Program Name	Counties Participating	Annual Funding Amount	Organizations Served in 2020
Alliance for Wisconsin Youth	Five regional prevention centers; 65 counties with member coalitions	\$579,595	109

Department of Justice Substance Abuse Prevention and Treatment Block Grant Youth Prevention and Intervention Program

DHS, in partnership with the Department of Justice (DOJ) and the Social Development Commission, Milwaukee, fund substance use education and treatment services for participants in the Social Development Commission’s youth diversion program, pursuant to Wis. Stat. §165.987. Due to the COVID-19 pandemic, the Social Development Commission was unable to perform school-based and in-person services for the majority of 2020, resulting in a significant decrease in prevention and counseling cases. The Social Development Commission pivoted to zoom presentations and telehealth to ensure continuation of services.

In 2020, prevention, intervention, and treatment activities included:

- Educating youth and parents/guardians on the consequences of substance use and risk behaviors.
- Helping youth and parents/guardians implement coping skills, engage in school, communicate better, manage anger, resist gang activities, grow their vocational skills, and find drug-free recreation activities.
- Sharing information about the predatory practices of tobacco and alcohol companies.

- Screening for substance use.
- Providing substance use counseling services.

Program Name	County Participating	Annual Funding Amount	People Served in 2020
DOJ Substance Abuse Prevention and Treatment Block Grant Youth Prevention and Intervention Program	Milwaukee	\$281,600	1,033

Community Improvement and Job Training Program

Wisconsin Community Services, Milwaukee, through a contract with DHS under Wis. Stat. §46.48(26) works with vulnerable minority youth and young adults in Milwaukee County. In 2020, the Community Improvement and Job Training Program provided mentoring, job readiness workshops, career fairs, driver 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 2020
Community Improvement Job Training	Milwaukee	\$250,000	116

Wisconsin Wins

Federal law imposes a penalty—a reduction in Substance Abuse Prevention and Treatment Block Grant funds—if a state fails to meet an approved threshold (10 percent 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. In 2020, the annual survey to calculate the noncompliance rate was not completed due to the COVID-19 pandemic.

Retail Tobacco Sales to Minors: Noncompliance Rates	
Year	Rate
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%
2019	5.5%
2020	NA

Problem Gambling Awareness Campaign

According to published national studies, there are an estimated 232,525 people in Wisconsin who have a problem with gambling. Their average debt in 2020 was \$30,377. The societal costs of problem gambling to Wisconsin are estimated at \$10,000 per gambler in productivity, crime, and health care costs. DHS contracts with the Wisconsin Council on Problem Gambling (WCPG) to carry out a statewide problem gambling awareness campaign and to staff a free, 24-hour helpline (1-800-GAMBLE-5). The helpline received 16,779 calls during 2020. Callers are referred to counseling services and Gamblers Anonymous meetings in their communities. In addition, the WCPG hosts an annual conference for professional counselors with workshops on how to serve people with problem gambling issues. The WCPG also provides a 60-hour training program for therapists who want to treat people with a gambling disorder. The WCPG presents at schools, colleges, prisons, and other organizations as requested.

Program Name	Counties Participating	Annual Funding Amount	People Served in 2020
Problem/Compulsive Gambling Awareness, Wis. Stat. § 46.03(43)	Statewide	\$396,000	16,779 (helpline calls)

Tribal Initiatives

In 2020, under the Tribal Family Services Program authorized by Wis. Stat. § 46.71(1), DHS again provided more than \$1 million in Substance Abuse Prevention and Treatment Block Grant funds to Wisconsin’s 11 federally recognized tribal nations to address substance use disorder prevention. Tribes also received funding to provide Coordinated Services Teams (CST) Initiatives. DHS staff worked with the tribes to identify the extent of tribal substance use disorders and determine appropriate interventions, including scheduling speakers and ongoing treatment discussions for systems change meetings.

Program Name	Tribes Participating	Annual Funding Amount	Number of People or Families Served in 2020
Tribal Family Services	All 11 federally recognized tribes	\$1,138,900	2,936

Small Talks: How Wisconsin Prevents Underage Drinking

Parents and caregivers are the most powerful influence on children’s choices about underage drinking. Research shows that kids are 50 percent less likely to drink when parents start talking about the risks as early as age eight. That is why the Wisconsin Department of Health Services developed the Small Talks campaign in 2018. Small Talks focuses on helping parents and caregivers get the facts about underage drinking, getting the conversation started, and feeling confident tackling the tough questions kids may have. In 2020 the Small Talks campaign continued to grow with cross-sectoral partnerships, statewide paid media initiatives, and campaign ambassadors. In 2020, activities included:

- Billboard, radio, video, digital and social paid media throughout the state totaling 24.7 million impressions and driving nearly 25,000 parents/caregivers across the state to SmallTalksWi.org.
- Production and distribution of campaign materials supporting 76 organizations throughout the state including schools, law enforcement, and prevention partners, 19 of which placed paid media in their communities through movie theater ads, billboards, and radio spots.
- Brand ambassadorship with Wisconsin sports icons Montee Ball and Chellsie Memmel.
- Partnering with 20 social media influencers who focus on parenting related content. These influencers shared experiences of their Small Talks with their kids, which led to high engagement and 1,056 users to the Small Talks website.

FEDERAL DISCRETIONARY GRANTS FOR PREVENTION

Strategic Prevention Framework Partnerships for Success (SPF-PFS)

In 2015, SAMHSA awarded Wisconsin a SPF-PFS grant of \$1,648,188 per year for up to five years, primarily to address prescription drug misuse among people ages 12–25. This program was designed to prevent the onset and reduce the progression of substance use and its related problems while strengthening prevention capacity and infrastructure at all levels. DHS subcontracted for evidence-based prevention efforts in 14 high-need counties and tribes. In 2020, oversight, training, technical assistance, and direct funding was provided by the Alliance for Wisconsin Youth’s regional prevention centers to community coalitions in each of the high-need communities. Specific local activities included public awareness campaigns, targeted education about the misuse of habit-forming prescription medications, prescription drug monitoring program training, safe medication disposal programs, surveillance of community substance use 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 grant. While DHS directly funded the Menominee Indian Tribe of Wisconsin, Great Lakes Inter-Tribal Council worked with four additional tribes through its PFS grant. DHS staff collaborated with the Great Lakes Inter-Tribal Council on shared grant priorities. Community education efforts took place in all funded communities.

The first year of the grant was a planning year with no implementation of prevention strategies, which made carryover funds available each subsequent year. In 2020, SAMHSA awarded Wisconsin \$710,065 and allowed the unobligated balance of \$938,123 to be utilized, for a total of \$1,648,188. In 2020, activities included:

- Community education efforts in all funded communities, including:
 - The implementation of Botvin LifeSkills® Training, only eight students were able to complete the program due to the COVID-19 pandemic.
 - A community prescriber education training with six attendees.
 - Question, Persuade, Refer presentations with 32 participants.
 - Drug Impairment Training for Educational Professionals trainings with 34 participants.
- Awareness raising activities, including:
 - Two billboards, 21 print or web advertisements, and two radio ad campaigns.
 - The distribution of 14,211 printed materials (brochures, posters, magnets, calendars, etc.).
 - The hosting of 70 events (community meetings, special events, and promotional activities) with 4,143 participants.
- Trainings for law enforcement efforts, including:
 - Four officers trained as Drug Recognition Experts and 12 officers recertified.
 - Twenty-five officers enrolled in Advanced Roadside Impaired Driving Enforcement training.
- Prescription drug security, collection, and disposal efforts, including:
 - The distribution of 4,278 lock boxes.
 - The distribution of 3,878 deactivation units.

Program Name	Counties/Tribes Participating	Annual Funding Amount
Strategic Prevention Framework Partnerships for Success	Ashland, Columbia, Dane, Douglas, Eau Claire, Florence, Forest, Kenosha, Marinette, Menominee Indian Tribe of Wisconsin, 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, Sauk and Dodge counties were identified as the target communities for this project. The Alliance for Wisconsin Youth provides technical assistance to the coalitions of Sauk and Dodge counties in implementing strategies under this grant with an outcome evaluation conducted by the University of Wisconsin-Madison’s Population Health Institute.

In 2020, the coalitions in Sauk and Dodge counties struggled to connect with their communities due to the COVID-19 pandemic. They held regular coalition meetings virtually and shifted to electronic communications and awareness campaigns. Both coalitions widely distributed prescription lock boxes and bags and prescription disposal units through local pharmacies, public health departments, and the few in-person community events that were held. Both coalitions collaborated with community partners and stakeholders to support the ability to

prevent and respond to substance misuse within the community. The coalitions promoted strategies to prevent the misuse of prescription opioids through billboards, online display advertisements, pre-roll videos, and email messaging tied to the statewide Dose of Reality campaign. Through this grant, a survey on prescription opioid use was mailed to all residents of Sauk and Dodge counties to monitor community perspectives on prescription opioids and public perception of the Dose of Reality campaign.

Program Name	Counties Participating	Annual Funding Amount
Strategic Prevention Framework for Prescription Drugs	Dodge and Sauk	\$371,616

State Epidemiological Outcomes Workgroup

The State Epidemiological Outcomes Workgroup oversees surveillance of substance use issues and the evaluation of prevention efforts. This workgroup includes staff from DHS, the Department of Public Instruction, the Department of Justice, the University of Wisconsin-Madison’s Population Health Institute, Wisconsin Alcohol Policy Project, and the Great Lakes Inter-Tribal Council.

In 2020, this group hosted presentations on place of last drink data and Youth Risk Behavior Survey data. These presentations helped members identify areas of opportunity for collaborations and data sharing. Additionally, the DHS opioid data dashboards were updated and new alcohol data dashboards were launched. An alcohol narrative dashboard webpage was created and launched to explain the story of alcohol use in Wisconsin. Members discussed and provided feedback on new data dashboards — one related to stimulants one related to self-harm and suicide.

The State Epidemiological Outcomes Workgroup received funds from SAMHSA under the Partnership for Success (PFS) 2015 grant award, which ended in 2020. A survey was sent to members to gauge interest in continuing to meet and how they could continue to collaborate and assist with data collection, analyzing, and reporting.

TREATMENT AND RECOVERY-RELATED ACTIVITIES

Substance Abuse Prevention and Treatment Block Grant

Each year, approximately 75 percent of the Substance Abuse Prevention and Treatment Block Grant is expended for treatment and recovery support services. In 2020, more than \$60 million in block grant, county tax levy, county revenue, and other federal and state funds were expended by county agencies to provide substance use treatment and support services for 23,402 people. The ongoing COVID-19 pandemic resulted in temporary suspension of services, reduced capacity of treatment facilities, a reduced provider and staff workforce, and a lower utilization of substance use treatment and recovery support services than in previous years.

In 2020, county agencies reported the following treatment service outcomes for people having substance use diagnoses:

Table 5. Wisconsin Addiction Treatment Outcomes

Outcome Measure	2020 Outcome
Completed treatment	54.4%
At discharge, no drug use in the past 30 days*	83.2%
Employed at discharge*	63.9%
Not rearrested at discharge*	80.7%

*Includes data on people completing treatment only.

Source: DHS Program Participation System.

Intoxicated Driver Program

DHS oversees county and tribal designated screening, referral, treatment, and case management services for drivers convicted for operating under the influence per Wis. Stat. § 346.63. The goal of the Intoxicated Driver Program is to engage those who drive under the influence in an assessment for education and treatment services. This screening provides a critical intervention to reduce future occurrences of operating while intoxicated offenses. The program is self-supporting through the fees paid for assessments. Additionally, each county retains approximately half of the driver improvement surcharge (Wis. Stat. § 346.655) paid by offenders to support the treatment of impaired drivers, specifically those who may be underinsured or uninsured. Each year, DHS offers supplemental funding to counties and tribes to cover excess costs for the treatment of impaired drivers.

In 2019, an evaluation revealed compliance with Intoxicated Driver Program driver safety plans was 87 percent, leading to longer periods in which the person is actively engaged in treatment. Recent research from the University of Wisconsin also found that re-arrest rates within five years among those convicted of operating while intoxicated who participated in the Intoxicated Driver Program and complied with their driver safety plan was significantly lower (19 percent) compared to participants who did not comply with their driver safety plan (32 percent) and to those who bypassed the entire Intoxicated Driver Program process by failing to comply with the court order to obtain an assessment (34 percent). Participation in the Intoxicated Driver Program is associated with reduced recidivism at all ages (UW Population Health Institute, 2021).

2020 Fact Sheet County Authorized People Served:

23,402 in CY 2020

Substance Use:

Alcohol	52.9%
Opioids	18.2%
Marijuana	21.4%
Cocaine	12.1%
Methamphetamine	9.5%

Gender:

Male	66.7%
Female	33.3%

Age:

Under 18	2.2%
18–39	28.4%
30–39	31.3%
40–49	17.9%
50–59	14.3%
Over 59	6.2%

Race/Ethnicity:

White	79.5%
Black	9.8%
Amer. Indian	2.7%
Asian	1.6%
Multiracial	3.2%
Hispanic or Latino	6.7%
Not Hispanic/Latino	86.6%

Treatment Modality*:

Outpatient	79.6%
Detox	15.2%
Day Treatment	1.7%
Residential-Short	2.8%
Inpatient	0.7%

*Not including intakes, crisis services, daily living skills, case management

Program Name	Counties Participating	Annual Funding Amount	People Served in 2020
Intoxicated Driver Program	All	Self-Supporting	22,098
Supplemental/Emergency Funds	14 counties	\$1,000,000	Not Tracked

Other Criminal and Juvenile Justice Alternatives

Many people enter into treatment and recovery through the justice system. DHS administers or serves as partner on four activities that address substance use treatment among justice-involved populations. Screening, assessment, treatment, and monitoring services are provided.

Program Name	Counties/Tribes/Nonprofit Agencies Participating	Annual Funding Amount	People Served in 2020
Community Partnership Diversion Youth Justice	Brown, Dane, Door, Portage, Trempealeau, Washburn, Wood, and Bad River Tribe	\$1,636,129	133*
Treatment Alternative Program, Wis. Stat. § 46.65	Dane, Dodge, Eau Claire, and Rock	\$900,962 \$726,300 block grant; \$174,662 state funds	219
Department of Corrections Youth and Adult Institution, Halfway House, and Community Treatment	Statewide	\$1,347,417	327
Prisoner Reintegration (housing, employment, education, and treatment), Wis. Stat. § 46.48(8)(b)	Milwaukee (Wisconsin Community Services)	\$125,000	11
Non-Narcotic, Non-Addictive Injectable Medication-Assisted Treatment Services within Jail and Community Settings	Bayfield, Brown, Columbia, Dane, Dodge, Kenosha, Lac du Flambeau, Manitowoc, Racine, Rock, Shawano, Sheboygan, Unified Services (Grant/Iowa), Washington	\$750,000	976

*Fewer youth were served due to the COVID-19 pandemic. Schools as a referral source declined, especially in rural areas. Transition to telehealth services was impacted by lack of broadband internet access and home computer access for many participants.

Treatment Alternative Program

DHS offers grants to agencies to provide substance use services as a treatment alternative in lieu of incarceration. Treatment Alternative Program funds are used to provide treatment, case management, and recovery services to eligible people who are referred from criminal justice system partners. Eligibility is determined using evidence-based risk and needs assessments. These programs enroll a variety of justice-involved individuals based on the county's needs and program design. Treatment alternative programs are funded in part with Substance Abuse and Prevention and Treatment Block Grant funds and in part with state general purpose revenue funds. Treatment alternative programs may work in cooperation with Treatment Alternatives and Diversion-funded programs to enhance services or can be operated independently as diversion programs. Each year, more than 3,500 days of incarceration are averted through participation in these programs. During 2020, 219 participants received services under the four grant-funded programs.

Department of Corrections

DHS offers grants to the Department of Corrections to provide substance use services to justice-involved individuals both within state prisons as well as in the community. Four separate grants are offered to serve community corrections. The funds are used to provide substance use services to people who identify as female

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. A total of 327 people were served within the four grant programs during 2020, with 56 percent of participants successfully completing services and activities.

Medication-Assisted Treatment in a Jail Setting

Under Wis. Stat. § 46.47, state funds (\$750,000/year) are awarded to counties or tribes to provide non-narcotic, non-addictive injectable medication to jail residents who volunteer for the program within the five days preceding their release into the community. Currently, 14 county jails throughout the state are participating in the program. The county or tribe must have an established drug court, provide care coordination for residents exiting county or tribal jails, and enroll participants in Medicaid for the continuation of care after release. In 2020, 976 injections were provided to jail residents prior to release and within the community.

Prisoner Re-Entry Program

Under Wis. Stat. § 46.48(8), the Prisoner Re-entry Program provides state funds (\$125,000/year) to assist justice-involved people in Milwaukee County transition from incarceration to community living by engaging participants with pre-release planning and improving continuity between pre- and post-release services. The program fills the gap of needs not covered by the re-entry initiatives managed by the Department of Corrections. Through the use of liaisons, mentors, and case managers, participants receive case coordination prior to their release. This coordination assists in planning for and obtaining the housing, employment, education, and treatment needs that offenders will have upon release. In 2020, 11 people were served by the program, a much lower number than previous years due to the COVID-19 pandemic. Program staff were not allowed to visit the Milwaukee County House of Corrections after mid-March 2020.

Treatment Alternatives and Diversion

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, the State Public Defender's Office, and county agencies. DHS works in collaboration with DOJ to train treatment court professionals in evidenced-based practices in order to address offender treatment needs and ultimately reduce recidivism rates. Projects deliver treatment and diversion alternatives to jails and prisons for nonviolent adult offenders with assessed substance use problems.

Outreach and Treatment Program for People Who Inject Drugs

In 2020, Vivent Health engaged in a variety of injection drug use prevention and harm reduction activities in Brown, Dane, Eau Claire, Kenosha, La Crosse, and Milwaukee counties. Outreach activities in the targeted communities were provided to people who inject drugs through one-on-one education, group education, opioid overdose prevention training, tools for preventing transmission of disease, and outreach events. Other injection drug use prevention efforts were conducted by the Kenosha County Department of Human Services-Division of Aging and Disability Services. Activities included offering education opportunities on the risks and impact of injection drug use, prevention strategies, and resources. Screening, assessing, and implementing evidence-based treatment practices for people who inject drugs were conducted by the following agencies: Dane County Department of Human Services, Racine County Human Services Department, Milwaukee County Behavioral Health Division, Kenosha County Department of Human Services-Division of Aging and Disability Services, and Vivent Health. Treatment services provided to people who inject drugs were significantly impacted by the COVID-19 pandemic. Although fewer people were served, agencies continued to meet the service needs of program participants by offering virtual visits, phone consults, and in-person sessions following COVID-19 safety protocols. In 2020, training on how to recognize and respond to an opioid overdose related in 485 lives were saved. Furthermore, program staff presented at treatment centers, correctional facilities, and homeless shelters, reaching 9,713 people at risk of substance use or HIV/HCV infection, with 1,514 people within these facilities receiving education on how to recognize and respond to an opioid overdose.

Program Name	Counties/Tribes/Nonprofit Agencies Participating	Annual Funding Amount	People Served in 2020
Injection Drug Use Prevention/Intervention	Kenosha County and Vivent Health	\$555,000	22,879
Injection Drug Use Treatment	Milwaukee, Dane, Kenosha, and Racine counties; Vivent Health	\$1,429,514	298

Medication-Assisted Treatment Centers in Rural Areas

In 2020, the opioid treatment programs created under 2013 Wisconsin Act 195 served 795 people in rural areas of the state. See the [Opioid and Methamphetamine Treatment Centers: 2021 Report to the Legislature](#) for more information.

Program Name	Counties/Tribes Participating	Annual Funding Amount	People Served in 2020
Programs Providing Medication-Assisted Treatment in Rural Underserved Areas, Wis. Stat. § 51.422	Counties: Ashland, Barron, Bayfield, Burnett, Clark, Florence, Iron, Jackson, Langlade, Manitowoc, Marinette, Menominee, Oconto, Oneida, Polk, Portage, Price, Rusk, Sawyer, Shawano, Vilas, Washburn, Wood Tribes: Bad River Band of Lake Superior Chippewa, Forest County Potawatomi, Ho-Chunk Tribal Nation, Lac Courte Oreilles Band of Lake Superior Chippewa, Lac du Flambeau Band of Lake Superior Chippewa, Menominee Nation, Red Cliff Band of Lake Superior Chippewa, Sokaogon Chippewa Tribes and St. Croix Chippewa Indians of Wisconsin	\$2,262,667	795

Gender-Specific Outreach and Treatment

There are differences in the development and pattern of substance use disorders, treatment needs, and treatment approaches for each gender identity. People who are pregnant and parenting with a substance use disorder have complex needs related to health and wellness, postpartum physical and mental health, parenting, and familial relationships. In addition, children that have a parent with a substance use disorder are more likely than other children to face increased difficulties in academic and social settings. They are also more likely than other children to experience a lower socioeconomic status and to experience difficulties with family functioning.

In 2020, DHS continued overseeing five community programs that provide comprehensive and wraparound care to people who identify as female and their families, including substance use treatment services, parent education, support services for the children of enrolled participants, vocational assistance, and housing assistance. Providers collaborate within a multidisciplinary system for the planning and delivery of services.

The purpose of these programs is to reduce the prevalence and associated harms of substance use disorders and to increase access to substance use treatment services for people who identify as female with a substance use disorder, including people who are pregnant and postpartum and people with dependent children. Additionally, the purpose of family-centered treatment services is to address the comprehensive needs of families, including children affected by familial substance use. Several community programs are funded through the Substance Abuse Prevention Treatment Block Grant which sets aside 10 percent of the total allocation for treatment for people who identify as female.

Program Name	Counties/Tribes/Nonprofit Agencies Participating	Annual Funding Amount	People Served in 2020
Outreach and treatment for low income and multisystem involved people, Wis. Stat. § 46.55, and Urban/Rural Women’s Treatment, Wis. Stat. § 46.86(6)	Brown (Family Services of Northeast Wisconsin), Dane (ARC Community Services and Wisconsin Women’s Health Foundation), Eau Claire (Lutheran Social Services), Forest-Oneida-Vilas (Human Service Center), Grant (Unified Community Services), Ho-Chunk Nation (six tribal clinics covering 14 counties), Milwaukee (Meta House and United Community Center), and Walworth.	\$2,484,631	397*
Milwaukee Family Centered Treatment, Wis. Stat. §§ 46.86(1), (2m), and (3m)	Milwaukee (Community Advocates, Meta House, and United Community Center)	\$1,105,000	135*
Healthy Beginnings, Wis. Stat. § 46.48(29)	Dane (ARC Community Services)	\$175,000	38**
Division of Milwaukee Child Protection Services Substance Use Disorder Services, Wis. Stat. § 48.561(3)(a)(2)	Milwaukee (Wisconsin Department of Children and Families, Division of Milwaukee Child Protective Services)	\$1,583,000	582
Women and Dependent Children Services, Wis. Stat. § 46.86(5)	Dane (ARC Community Services)	\$235,000	54**

*Fewer people were served in 2020 due to the COVID-19 pandemic. Many inpatient and residential service providers temporarily suspended services or reduced capacity at the onset of the pandemic. Outpatient service providers experienced a decline in participation during the transition to telehealth at the onset of the pandemic. Staff shortages also impacted how many clients were served.

**Number served was calculated from state fiscal year 2021 reports covering activities from July 1, 2020, through June 30, 2021.

Underserved Populations

Wisconsin is home to many racial and ethnic groups that are underserved. In general, substance use service providers across the state are reaching significant portions of underserved populations. In 2020, approximately 21 percent of people served through the public substance use service provider system were members of a racial/ethnic underserved group. In 2020, DHS managed four initiatives addressing substance use treatment and support among underserved populations, including the Urban Black and Hispanic Program, Substance Use Services for Hispanic People, and Urban Youth Prevention Services. Also, three tribes received Substance Abuse Prevention and Treatment Block Grant funds to provide culturally specific alcohol and other drug abuse treatment and services, including women’s treatment and services for youth.

Program Name	Counties/Tribes Participating	Annual Funding Amount	People Served in 2020
Urban Black and Hispanic Program, Wis. Stat. § 46.975(2)(a)	Milwaukee (Community Advocates), Waukesha	\$200,000	21*
Substance Use Services for Hispanic People, Wis. Stat. § 46.48(5)	Milwaukee (United Community Center)	\$220,842	60*
Urban Youth Prevention	Kenosha, Milwaukee, Rock, and Waukesha	\$200,000	1,830
Tribal Alcohol and other Drug Abuse Treatment	Forest County Potawatomi, Lac du Flambeau Band of Lake Superior Chippewa Indians, Sokaogon Chippewa Community	\$21,800	15*

*Fewer people were served in 2020 due to the COVID-19 pandemic. Many inpatient and residential service providers temporarily suspended services or reduced capacity at the onset of the pandemic. Outpatient service providers experienced a decline in participation during the transition to telehealth at the onset of the pandemic. Staff shortages also impacted how many clients were served.

Addressing Methamphetamine Use

Wisconsin continues to experience a surge in methamphetamine use, particularly in the northwestern and western regions. In 2020, DHS continued offering training sessions on the Matrix Model for the treatment of stimulant use disorders. DHS also continued issuing Substance Abuse Prevention and Treatment Block Grant funds to four counties in northwestern Wisconsin to cover costs related to treatment for people addicted to methamphetamine. Fewer people were served in 2020 due to the challenges presented by the COVID-19 pandemic. Furthermore, DHS staff continued supporting a consortium of counties and providers in northwestern Wisconsin that met and communicated periodically to discuss evidence-based prevention and treatment practices.

Program Name	Counties Participating	Annual Funding Amount	People Served in 2020
Methamphetamine Treatment	Barron, Burnett, Polk, and St. Croix	\$200,000	101

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 the 70 county and three tribal agencies offering the program grew throughout 2020, from 8,897 people enrolled at the beginning of the first quarter to 10,078 at the end of the fourth quarter. In addition, 21 percent of Comprehensive Community Services participants served in 2020 had a known substance use problem (excluding tobacco).

Peer Specialists

The Wisconsin Peer Specialist Employment Initiative trains and certifies peer specialists and parent peer specialist to work in a variety of mental health and substance use settings. Certification is awarded after successful completion of a DHS-approved training and passage of a DHS-approved exam. A certified peer

specialist is an individual with experience with mental health and/or substance use issues that is trained to provide support to others struggling to find a path to recovery. A certified parent peer specialist is an individual with experience raising a child with behavioral health challenges trained to utilize their experience navigating services in support of other parents. Approximately \$163,000 in Substance Abuse Prevention and Treatment Block Grant funds were used to support peer specialist training and certification activities. In 2020, 179 people earned the peer specialist certification with 876 people certified in total. Also in 2020, 15 parents became certified parent peer specialists with 41 parents certified in total.

Consumer-Directed Activities

DHS supports activities that encourage people in recovery with lived experience with a substance use disorder 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 2020, Wisconsin Voices for Recovery partnered with community recovery organizations to host a virtual Rally for Recovery, provide community trainings, and deliver other public awareness activities to highlight and celebrate recovery. DHS allocated more than \$100,000 to these activities.

Federal Discretionary Grants for Opioid Treatment and Recovery

Prescription Drug/Opioid Overdose-Related Deaths

In 2020, DHS continued to implement a \$5 million grant from the SAMHSA 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 counties identified as high-need — Sauk, Kenosha, and Waukesha — are participating in this project. In 2020, these counties distributed 1,955 naloxone kits to first responders and community members. Eighty-eight overdose reversals were reported in these counties. These counties hosted 179 naloxone and overdose response virtual trainings throughout the year, training 630 community residents.

Other partners in this project include Vivent Health, the State Council on Alcohol and Other Drug Abuse, community-based treatment providers, pharmacies, and county and tribal public health officials.

State Opioid Response Grant

In 2020, Wisconsin received about \$13.2 million in State Opioid Response funds from the Substance Abuse and Mental Health Services Administration. The original two-year award ended in September 2020, with a new two-year award effective in October 2020. The purpose of the this grant is to address the opioid epidemic by increasing access to medication-assisted treatment, reducing unmet treatment needs, and reducing opioid overdose-related deaths. This purpose is accomplished by supporting prevention, harm reduction, treatment, and recovery activities. As of October 2020, this grant can also be used for services related to stimulants.

Grant funding supported 40 counties, agencies, and tribal nations in their efforts to expand access to medication-assisted treatment, develop new or improve current service delivery models, bolster their existing treatment and wraparound services, and implement recovery support services. Outcomes from the past year showed that 1,219 uninsured people received grant funded treatment for an opioid use disorder. Of these 1,219 uninsured people, 1,154 received medication-assisted treatment, including 451 people receiving injectable naltrexone, 528 people receiving buprenorphine, and 175 people receiving methadone.

In addition to improving treatment services, prevention activities included partnerships with community coalitions to implement specific strategies aimed at reducing the availability of and access to opioids and

stimulants for nonmedical purposes and to raise awareness about the consequences of opioid and stimulant use and misuse. Recovery activities included a statewide helpline that helps people find substance use treatment and recovery services and the ED2 Recovery project, which connects peer specialists and recovery coaches with hospitals across the state to respond to people in emergency departments who have survived an overdose. In 2020, the statewide helpline received 5,449 calls, chats, and texts, and the ED2 Recovery Project provided ongoing recovery support services to 446 recoverees.

Harm reduction activities included the NARCAN® Direct Program. The NARCAN® Direct Program provides NARCAN® at no cost to selected community agencies that engage in community training and distribution activities. In 2020, 9,726 NARCAN® kits were distributed through this program. Participating agencies reported that 128 opioid overdoses were averted as a result of NARCAN® provided through this program.

ADMINISTRATION

State Council on Alcohol and Other Drug Abuse

DHS provides staff services to the State Council on Alcohol and Other Drug Abuse, a group established under Wis. Stat. §§ 13.098 and 14.24 to coordinate substance use disorder planning and funding efforts in Wisconsin and advise the governor, legislature, and state agencies on prevention, treatment, and recovery matters. Meetings are held quarterly. In 2020, in response to COVID-19, meetings were held remotely in June, August, September, and December.

In 2020, the State Council on Alcohol and Other Drug Abuse and its four standing committees — Prevention, Cultural Diversity, Intervention and Treatment, and Planning and Funding — continued providing statewide leadership on a wide variety of current substance use disorder issues. This work included:

- The provision of guidance and resources on efforts to increase diversity in the substance use disorder workforce.
- The provision of guidance on providing culturally appropriate services that meet the specific needs of different underserved population groups, including integration of CLAS (Culturally and Linguistically Appropriate Services) into strategic planning, policy development, and program implementation.
- Review and analysis of the “2019 Wisconsin Behavioral Health System Gaps Report.”
- Sharing information with stakeholders and policymakers on the trends and needs regarding substance use disorder and best practices for service delivery.
- Partnerships with DHS, the Department of Safety and Professional Services, counties, and providers to clarify certification requirements for the substance use disorder workforce, promote alignment with Medicaid and Wis. Admin. Code ch. DHS 75 requirements, and promote continued education and training for people seeking to enter the substance use treatment workforce.
- Feedback and input to DHS regarding the launch of the new Medicaid benefit for residential substance use disorder treatment.
- Feedback and input to DHS regarding revisions to Wis. Admin. Code ch. DHS 75.
- Support for 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 people recruited and retained 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 Program promotes implementation of “Plan-Do-Study-Act” quality improvement projects to improve access to and retention in substance use treatment. In 2020, DHS continued its partnership with the UW-Madison, Department of Family Medicine and Community Health, and 36 Wisconsin treatment centers. The goal of this program is to increase access to and retention in treatment. The program also implemented projects to address staff recruitment and retention,

compassion fatigue, and self-care, and the need for more school-based mental health services. During 2020, 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 2020, DHS provided seven workshops involving 57 staff across eight provider agencies. Following training with these agencies, DHS facilitated 47 implementation team meetings, provided 25 consultation sessions, and completed 10 process evaluations using “Plan-Do-Study-Act” model. DHS published a [report](#) documenting the outcomes of these activities within the community forensics system.

Screening, Brief Intervention, and Referral Treatment Professional Training

Screening, Brief Intervention, and Referral Treatment (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 2020, hundreds of licensed providers completed an online training in order to become eligible for Medicaid reimbursement when delivering SBIRT in health care settings. Additionally, DHS provided technical assistance on school SBIRT to the Wisconsin Safe and Healthy Schools Center. A [report](#) was published documenting the outcomes that 259 students experienced statewide.

Trauma-Informed Care Training and Presentations

Trauma-informed care 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 2020, DHS scheduled 42 training/consultation events throughout Wisconsin. Thirteen events were cancelled due to the COVID-19 pandemic. A total of 29 training/consultation events were held either in person (prior to March 13, 2020) or via virtual platforms. The training events were attended by 2,141 people in total.

- Fifteen events were related to trauma-informed care.
- Two events focused on trauma-informed care and secondary traumatic stress.
- Three events focused on secondary traumatic stress and vicarious trauma.
- Two events focused on trauma-informed supervision.
- Seven events focused on trauma-informed consultation and technical assistance.
- One event was held as part of Crisis Intervention Training for the UW-Madison Police Department.

The organizations that received trauma-informed care training in 2020 included: Department of Justice, Acadia Healthcare, La Crosse County Department of Human Services, UW-Madison School of Social Work, Arbor Place, and Vistacare.

Citations

1. National Institute on Drug Abuse. (2017, April). Trends and Statistics. Retrieved from: <https://www.drugabuse.gov/related-topics/trends-statistics>.
2. Substance Abuse Mental Health Services Administration (SAMSHA), Center for Behavioral Health Statistics and Quality. (2020). *2017 and 2018 National Survey on Drug Use and Health: Model-Based Prevalence Estimates*. Substance Abuse and Mental Health Services Administration, Rockville, MD. Retrieved from: <https://www.samhsa.gov/data/report/2017-2018-nsduh-state-specific-tables>.
3. Substance Abuse Mental Health Services Administration (SAMSHA), Center for Behavioral Health Statistics and Quality. (2021). *2018 and 2019 National Survey on Drug Use and Health: Estimated Totals by State*. Substance Abuse and Mental Health Services Administration, Rockville, MD. Retrieved from: <https://www.samhsa.gov/data/report/2018-2019-nsduh-estimated-totals-state>.
4. Substance Abuse Mental Health Services Administration (SAMSHA), Center for Behavioral Health Statistics and Quality. (2021). *Key substance use and mental health indicators in the United States: Results from the 2020 National Survey on Drug Use and Health*. Substance Abuse and Mental Health Services Administration, Rockville, MD. Retrieved from: <https://www.samhsa.gov/data/report/2020-nsduh-annual-national-report>.
5. Wisconsin Department of Health Services (2016). *Wisconsin Epidemiological Profile on Alcohol and Other Drug Use, 2016*. Report prepared by the Division of Care and Treatment Services, the University of Wisconsin Population Health Institute and the Office of Health Informatics, Division of Public Health. Retrieved from: <https://www.dhs.wisconsin.gov/publications/p4/p45718-16.pdf>.
6. Wisconsin Interactive Statistics on Health (WISH), Wisconsin Department of Health Services, Office of Health Informatics (2021). *WISH-Opioid Module*. Retrieved from: <https://www.dhs.wisconsin.gov/wish/opioid/index.htm>.
7. Vigna, A.J., Connor, T. The 2019 Behavioral Health Gaps Report for the State of Wisconsin. Madison, WI: University of Wisconsin Population Health Institute, October 2020. <https://uwphi.pophealth.wisc.edu/publications-2/evaluation-reports-2/>.
8. Moberg, D. P. and Kao, D. (2017). *Five Year Recidivism after Arrest for Operating While Intoxicated: A Large-scale Cohort Study*. Report prepared for the Intoxicated Driver Program, Wisconsin Department of Health Services, Bureau of Prevention Treatment and Recovery. UW Population Health Institute.