



State of Wisconsin
Department of Health Services

Tony Evers, Governor
Kirsten L. Johnson, Secretary

February 2, 2024

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) 2022 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 their opportunities for success.

Sincerely,

A handwritten signature in black ink, appearing to read "Kirsten L. Johnson".

Kirsten L. Johnson
Secretary-designee

2022 Annual Report to the Governor on Activities Relating to Substance Use Prevention and Treatment



**WISCONSIN DEPARTMENT
of HEALTH SERVICES**

Division of Care and Treatment Services

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

BACKGROUND

In 2022, the Wisconsin Department of Health Services (DHS) administered \$27,427,864 in federal Substance Abuse Prevention and Treatment Block Grant (SAPTBG) funds, more than \$12 million in SAPTBG Coronavirus Response and Relief Supplement Appropriations Act (CAA) funding, more than \$22 million in SAPTRBG American Rescue Plan Act (ARPA) funding, 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. In 2020, the most recent data available at the time this report was compiled, approximately 58.7 percent of people in the United States age 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, about 41.1 million people are in need of substance use treatment. Only about 4 million people, less than 10 percent, receive substance use treatment (SAMSHA, 2021).

Wisconsin drug overdose deaths increased from **10.9** (2010) to **29.4** (2021) per 100,000 population.

Wisconsin. In 2021, the most recent data available at the time this report was compiled, approximately 8.4 percent of people in Wisconsin had a substance use disorder, which is lower than the national average of 9.1 percent (SAMHSA, 2023).

Table 1 presents the prevalence of Wisconsin 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, 41.8 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 48.6 percent of people in the United States (SAMHSA, 2023). More specifically, youth ages 12-17 report a much lower perception of risk (37.4 percent) from five or more alcoholic drinks than what national youth report (42.4 percent) (SAMHSA, 2023).

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

Source: SAMSHA, 2021; SAMHSA, 2023 (National Survey on Drug Use and Health).

Substance Use Measure	2018-2019 Survey		2021 Survey	
	Wisconsin	U.S.	Wisconsin	U.S.
Past month alcohol use	59.9%	50.9%	57.4%	47.6%
Past year marijuana use	14.6%	16.7%	16.6%	18.7%
Past year cocaine use	2.0%	2.0%	2.0%	1.7%
Past year heroin use	0.4%	0.3%	N/A	N/A
Past year pain reliever misuse	3.4%	2.8%	2.9%	3.1%

Table 2 shows the most recently available alcohol and drug use data among Wisconsin youth ages 12-17.

Table 2. Wisconsin Substance Use Percentage Estimates Ages 12-17

Substance Use Measure	2018-2019		2021	
	Wisconsin	U.S.	Wisconsin	U.S.
Any alcohol use in the past month	11.1%	9.4%	10.1%	7.0%
Past year marijuana use	12.0%	12.8%	11.9%	12.4%
Past year cocaine use	0.6%	0.4%	N/A	N/A
Past year heroin use	0.03%	0.02%	N/A	N/A
Past year pain reliever misuse	2.6%	2.5%	1.9%	2.2%

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 29.4 deaths per 100,000 population in 2021 (Data Direct, Opioid Summary Module, DHS 2022, and Data Direct, Stimulant Death Module, DHS 2022).

Table 3. Wisconsin Drug Overdose Death Rate

Drug Involvement	2010	2014	2018	2020	2021
Total drug overdose deaths	10.9	14.9	19.3	25.9	29.4
Drug overdose deaths involving any opioid	7.2	11.0	15.3	21.1	24.6
Drug overdose deaths involving prescription opioids	4.9	5.8	12.4	5.8	6.1
Drug overdose deaths involving synthetic opioids	1.1	1.6	9.4	18.1	22.3
Drug overdose deaths involving heroin	1.7	4.9	6.0	4.5	2.8
Drug overdose deaths involving cocaine	1.3	1.7	5.0	6.8	9.5
Drug overdose deaths involving psychostimulants	0.2	0.8	2.2	4.6	6.4

Source: Data Direct, Opioid Summary Module, DHS 2022.

The impacts of drug use, specifically opioids, are demonstrated in hospital data, as well as death records. The age-adjusted rate of emergency room hospitalizations for opioid overdoses has more than tripled from 17.1 per 100,000 population in 2010 to 53.7 per 100,000 population in 2021 (Data Direct, Opioid Hospitalization Module, DHS 2022).

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. The 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.

Substance Abuse Prevention and Treatment Block Grant (SAPTBG)

The SAPTBG 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 primary 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-RELATED ACTIVITIES

Prevention services funded under the SAPTBG must be evidence-based to ensure the greatest impact and highest quality services. In 2022, the following priority areas were targeted by primary 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).

DHS collects information from counties and other local prevention providers funded by the SAPTBG through the Substance Abuse Prevention-Services Information System (SAP-SIS).

Table 4 shows the number of people reached with prevention program services in 2022 compared to their distribution in the general population.

Table 4. Race/Ethnicity Distribution: General Population vs. People Reached, 2022

Race/Ethnicity	Percent of General Population	Percent of People Reached Through Prevention Programs
American Indian/Alaska Native	1.0%	1.23%
Native Hawaiian/Other Pacific Islander	0.0%	0.06%
Asian	3.0%	2.52%
Black or African American	6.4%	6.58%
Hispanic/Latino	7.6%	8.57%
White	80.4%	73.64%
More than one race	6.1%	4.17%

Source: SAP-SIS, DHS 2022; 2020 U.S. census

Table 5 provides a snapshot of the types of county and other local prevention services provided across the state in 2022.

Table 5. Types of Prevention Programs, 2022

Prevention Program Type	Percent of Prevention Programs (n=235)
Universal Indirect (population-based programs and environmental strategies, such as policies or media campaigns)	22.6%
Universal Direct (interventions that directly serve an identifiable group of participants with unknown risk, such as afterschool programming or parenting classes)	59.6%
Selective (interventions that serve at-risk populations, such as mentorship programs)	8.5%
Indicated (activities that serve people in high-risk settings, such as student and employee assistance programs)	8.5%
*Did not report prevention program type	0.8%
Most Common Types of Activities	
Multiagency coordination and collaboration; coalitions	17.4%
Ongoing classroom and/or small group sessions	17.9%
Other activity	22.1%
Education programs for youth groups	8.5%
Parenting and family management	3.0%
Media campaigns	6.8%
Radio and TV public service announcements	2.1%
Recreational activities	1.3%
Speaking engagements	1.7%
Resource directory	0.4%
Systematic planning	0.9%
Mentors	1.7%
Health fairs and other health promotion	1.7%
OUI/OWI education programs	0.4%
Drug-free dances and parties	1.3%
Community team building	1.3%
Community drop-in centers	0.9%
Community volunteer training	0.4%
Clearinghouse/information resource centers	0.9%
Brochures	0.9%
Accessing services and funding	0.9%
*Did not report type of activity	5.1%

Source: SAP-SIS, DHS 2022.

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 (AWY), which provides a statewide prevention infrastructure to support local prevention coalitions with training, technical assistance, and resources. AWY supported 106 community coalitions across the state in 2022.

DHS contracts with AWY regional prevention centers (RPCs). In 2022, the five prevention regions were served by three RPCs. This structure allows for all communities throughout the state to receive the support, tools, and resources needed to reduce substance use at a local level. In 2022, the regional prevention centers:

- Awarded mini-grants to community coalitions to work on the state’s prevention priorities and implement the Strategic Prevention Framework (SPF), a data-driven planning process endorsed by the SAMHSA.
- Developed and hosted four sessions of Substance Use Prevention Skills Training to instruct coalitions in the use of SPF.
- Covered registrations for community coalition members to attend prevention-related state conferences and trainings.
- Hosted quarterly meetings with community coalitions for networking and sharing opportunities.
- Provided one-on-one technical assistance as requested by community coalitions.
- Hosted trainings on a variety of topics, including:
 - How to build coalition capacity.
 - How to become culturally competent with prevention programming.
 - Current drug trends and best practices to address substance use prevention.
 - How to implement community alcohol policy changes.
 - How to address health disparities through prevention.
 - The difference between prevention and harm reduction and how to support the continuum of care efforts.
 - How to collect data and evaluate progress.
 - Develop sustainability of the coalition and its efforts.
 - How to connect with health and human services and public health agencies to further expand and partner on prevention efforts.

Program Name	Tribal Nations/Counties with Member Coalitions	Annual Funding Amount	Organizations Served in 2022
Alliance for Wisconsin Youth	7 tribal nations and 65 counties	\$604,595	106 coalitions

Department of Justice SAPTBG Youth Prevention and Intervention Program

DHS, in partnership with the Department of Justice (DOJ), contracts with the Social Development Commission (SDC) in Milwaukee to fund substance use prevention education, intervention, and treatment services for participants in the SDC’s youth diversion program as required under Wis. Stat. §165.987. Clients are referred for substance use education or anger management, live in situations with no adult male role model, and have very few positive community connections.

Accomplishments in 2022 included:

- Educating youth and caregivers on the consequences of substance use and risk behaviors.
- Helping youth and caregivers 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 alcohol and tobacco companies.
- Screening for substance use.
- Providing wraparound services.

Program Name	Service Area	Annual Funding Amount	People Served in 2022
DOJ SAPTBG Youth Prevention and Intervention Program	Milwaukee County	\$281,600	1,849

Community Improvement and Job Training Program

Wisconsin Community Services in Milwaukee through a contract with DHS under Wis. Stat. §46.48(26) works with vulnerable, underserved youth and young adults in Milwaukee County. In 2022, 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	Service Area	Annual Funding Amount	People Served in 2022
Community Improvement and Job Training	Milwaukee County	\$250,000	73

Wisconsin Wins

Federal law requires states to conduct an annual survey to determine retailer violation rates for underage tobacco sales. Implemented in 2001, *Wisconsin Wins* is a statewide initiative designed to decrease youth access to tobacco products through retail compliance checks and retailer education. The program provides free training to retailers at www.WITobaccoCheck.org. In 2022, Wisconsin's noncompliance rate was 11.9 percent. In December 2019, the Tobacco 21 federal law raised the minimum age of purchase of tobacco products from 18 to 21. Currently, Wisconsin state law does not align with the Tobacco 21 federal law, which has generated significant confusion and resulted in increased noncompliance rates. Activities in 2022 to address the confusion and reduce the noncompliance rate included compliance investigations using a positive reinforcement protocol, law enforcement involvement, promotion of www.WITobaccoCheck.org, and community outreach activities.

Retail Tobacco Sales to Minors: Noncompliance Rates	
Year	Rate
2013	7.3%
2014	6.4%
2015	6.8%
2016	7.2%
2017	7.7%
2018	5.8%
2019	5.5%
2020	NA
2021	14.1%
2022	11.9%

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 2022 was \$45,046. 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 staff a free, 24-hour helpline (1-800-GAMBLE-5). The helpline received 15,192 calls in 2022. Helpline callers are referred to counseling services and Gamblers Anonymous meetings in their communities. Additionally, 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. The WCPG also hosted a webinar series in 2022. Educational presentations were given to 1,550 students and 15 across 45 classrooms.

Program Name	Service Area	Annual Funding Amount	People Served in 2022
Problem Gambling Awareness Campaign, Wis. Stat. § 46.03(43)	Statewide	\$396,000	15,192 (helpline calls)

Tribal Initiatives

In 2022, under the Tribal Family Services Program authorized by Wis. Stat. § 46.71(1), DHS provided more than \$1 million in SAPTBG funds to Wisconsin’s 11 federally recognized tribal nations to address substance use disorder prevention. DHS staff worked with the tribal nations to identify the extent of local substance use disorders and determine appropriate interventions, including scheduling speakers and ongoing treatment discussions for systems change meetings.

Program Name	Service Area	Annual Funding Amount	Number of People or Families Served in 2022 (Estimated)
Tribal Family Services	All 11 federally recognized tribes	\$1,138,900	1,297

Small Talks: How Wisconsin Prevents Underage Drinking

Caregivers are the most powerful influence on a young person’s choices about underage drinking. Research shows that children are 50 percent less likely to drink when caregivers start talking about the risks as early as age 8. DHS developed the Small Talks campaign in 2020 to encourage these conversations. Small Talks focuses on helping caregivers get the facts about underage drinking, start talking, and feel confident tackling the tough questions from children. In 2021, the Small Talks campaign included:

- A paid media buy of online ads, social media ads, and billboards
- Production and distribution of over 50,000 campaign materials delivered to 150 organizations throughout the state for distribution in their communities.

TREATMENT AND RECOVERY-RELATED ACTIVITIES

Each year, approximately 75 percent of the SAPTBG is expended for treatment and recovery support services. In 2022, 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 the people of Wisconsin. In 2022, county agencies reported the following treatment service outcomes for people having substance use diagnoses:

Table 6. Wisconsin Addiction Treatment Outcomes

Outcome Measure	2022 Outcome
Completed treatment	54.5%
At discharge, no drug use in the past 30 days*	78.1%
Employed at discharge*	68.2%
Not rearrested at discharge*	86.4%

*Includes data on people completing treatment only.

Intoxicated Driver Program

DHS oversees tribal nation and county 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 tribal nations and counties to cover excess costs for the treatment of impaired drivers. There were almost 23,000 convictions for operating while intoxicated (OWI) driving offenses in Wisconsin in 2022.

2021 Fact Sheet	
County Authorized People Served:	
21,836 in CY 2021*	
Substance Use:	
Alcohol	51.1%
Marijuana	20.5%
Opioids	14.7%
Cocaine	12.0%
Amphetamine	10.1%
Gender:	
Male	66.9%
Female	33.1%
Age:	
Under 18	2.1%
18-24	13.2%
25-44	57.8%
45-64	24.7%
65+	2.4%
Race/ethnicity:	
White	78.4%
Black	9.5%
Amer. Indian	<1%
Nat. Hawaiian/Pacific Isl.	<1%
Asian	2.8%
Multiracial	3.9%
Hispanic or Latino	7.2%
Not Hispanic/Latino	86.9%
Treatment modality**:	
Outpatient	86.6%
Detox	9.8%
Day Treatment	1.5%
Residential-Short	1.2%
Inpatient	0.6%
*Most current year data is available	
**Not including crisis services, daily living skills, case management	

Program Name	Service Area	Annual Funding Amount	People Served in 2022
Intoxicated Driver Program	Statewide	Self-supporting	24,656
Supplemental/emergency funds	9 counties	\$417,989 awarded	Not tracked

Criminal and Youth Justice Programs

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

Program Name	Grantees	Annual Funding Amount	People Served in 2022
Community Partnership Diversion Youth Justice	Brown, Dane, Door, Portage, Trempealeau, Washburn, Wood counties;	\$1,636,129	280 youth in programs, 2,921 by

	Bad River Band of Lake Superior Chippewa		outreach activities
Treatment Alternative Program, Wis. Stat. § 46.65	Lutheran Social Services, Dodge, Milwaukee, and Rock counties	\$900,962 \$726,300 block grant; \$174,662 state funds	235
Youth and Adult Institution, Halfway House, and Community Treatment	Department of Corrections	\$1,347,417	499
Prisoner Reintegration (housing, employment, education, and treatment), Wis. Stat. § 46.48(8)(b)	Wisconsin Community Services	\$125,000	80
Nonnarcotic, Nonaddictive Injectable Medication-Assisted Treatment Services within Jail and Community Settings	Bayfield, Brown, Columbia, Dane, Dodge, Kenosha, Manitowoc, Racine, Rock, Shawano, Sheboygan, Washington counties and Unified Services (Grant/Iowa counties);	\$750,000	712

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 with SAPTBG funds and state general purpose revenue funds. Treatment alternative programs may work in cooperation with Treatment Alternatives and Diversion 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.

Department of Corrections

DHS offers grants to the Department of Corrections (DOC) 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. In collaboration with DOC, a certified peer specialist program provides support for Division of Community Corrections clients from the beginning of the recovery process.

Medication-Assisted Treatment in a Jail Setting

Under Wis. Stat. § 46.47, state funds (\$750,000/year) are awarded to tribal nations and counties to provide nonnarcotic, nonaddictive, injectable medication to jail residents who volunteer for the program within the five days preceding their release into the community. In 2022, 13 county jails throughout the state participated in the program. Participating counties must have an established drug court, provide care coordination for residents exiting county jails, and enroll participants in Medicaid for the continuation of care after release.

Prisoner Reentry Program

Under Wis. Stat. § 46.48 (8), the Prisoner Reentry 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 prerelease planning and improving continuity between prerelease and post-release services. The program fills the gap of needs not covered by the reentry initiatives managed by DOC. 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.

Treatment Alternatives and Diversion

The purpose of the program is to provide substance use screening, assessment and treatment services to justice involved individuals who are referred from the criminal justice system. Evidence-based treatment programming and case management which addresses criminogenic risk and need will be used to reduce recidivism and incarceration rates for individuals who are involved in the criminal justice system primarily due to a substance use disorder. Substance use treatment should be used in lieu of incarceration. Funding is allocated under the Substance Abuse Prevention and Treatment Block Grant in combination with state funds authorized under Wis. Stat. §46.55. Seventy-five percent of each grant award is to be used to provide treatment services to clients in the program.

Outreach and Treatment Program for People Who Inject Drugs

In 2022, Vivent Health, Public Health Madison and Dane County, and Waukesha County Department of Health and Human Services implemented a variety of injection drug use prevention and harm reduction services throughout Wisconsin, including in Adams, Columbia, Dane, Dodge, Douglas, Fond du Lac, Green, Iowa, Jefferson, Juneau, Kenosha, La Crosse, Manitowoc, Marinette, Milwaukee, Racine, Rock, Sauk, Sheboygan, Vilas, Waukesha, Waupaca, and Winnebago counties. Injection drug use prevention services focus on outreach and education, pre-treatment services, and naloxone training and distribution. Screening, assessing, and implementing evidence-based treatment practices for people who inject drugs were conducted by the following agencies: Milwaukee County Behavioral Health Division, Waukesha County Department of Health and Human Services, Vivent Health, United Community Center and Unity Point Meriter. At Unity Point Meriter, 43 people who were pregnant were treated at the outpatient clinic in 2022. Of the 43, 33 were identified as people who inject drugs, 27 had an opioid use disorder, 16 had a cocaine use disorder, 11 had a stimulant use disorder, 12 had an alcohol use disorder, and 11 had a cannabis use disorder. Data indicate people often used multiple substances. The grantees also worked to identify and prioritize people who inject drugs who were uninsured or underinsured.

Program Name	Grantees	Annual Funding Amount	People Served in 2022
Injection Drug Use Prevention/Intervention	Public Health Madison Dane County, Vivent Health, Waukesha	\$749,961	25,200
Injection Drug Use Treatment	Milwaukee, Waukesha, United Community Center, Unity Point Meriter, and Vivent Health	\$1,268,659	876

Opioid and Methamphetamine Treatment Programs in Underserved, High-Need Areas

In 2022, the opioid treatment programs created under 2013 Wisconsin Act 195 and 2017 Wisconsin Act 27 served 597 people in rural areas of the state. See the [Opioid and Methamphetamine Treatment Centers: 2023 Report to the Legislature](#) for more information.

Program Name	Grantees	Annual Funding Amount	People Served in 2022
Opioid and Methamphetamine Treatment Programs in Underserved, High-Need Areas, Wis. Stat. § 51.422	HOPE Consortium, Family Health Center-Ladysmith Alcohol and Drug Recovery Center, Lake Superior Community Health Center, Northeast Wisconsin Heroin Opioid Prevention Education, NorthLakes Community Clinic	\$2,262,667	597

Gender-Specific Outreach and Treatment

In 2022, DHS managed seven community programs in partnership with tribal nations, counties, and community providers to provide services to people who identify as female, parents, and families. These services included substance use prevention efforts, substance use treatment, parent education, support services for parents and their children, vocational assistance, and housing assistance.

Program Name	Grantees	Annual Funding Amount	People Served in 2022
Outreach and treatment for low income and multisystem involved people, Wis. Stat. § 46.55, and urban/rural treatment for people who identify as female, Wis. Stat. § 46.86(6)	ARC Community Services, Ho-Chunk Nation, Meta House, United Community Center, Waukesha County	\$2,397,151	384
Milwaukee family-centered treatment, Wis. Stat. §§ 46.86(1), (2m), and (3m)	Community Advocates, Meta House, United Community Center	\$1,105,000	123
Healthy beginnings, Wis. Stat. § 46.48(29)	ARC Community Services	\$175,000	21*
Division of Milwaukee Child Protection Services substance use services, Wis. Stat. § 48.561(3)(a)(2)	Department of Children and Families, Division of Milwaukee Child Protective Services	\$1,583,000	349
Women and dependent children services, Wis. Stat. § 46.86(5)	ARC Community Services	\$235,000	42*
Temporary Assistance for Needy Families – substance use services, Wis. Stat. § 46.48(30)	Milwaukee	\$4,394,595	753
Perinatal substance use screening, early intervention, and referral	Wisconsin Women’s Health Foundation	\$186,500	243

*Number served calculated from state fiscal year 2023 reports covering activities from July 1, 2022, through June 30, 2023.

Underserved Populations

Substance use services providers across the state aim to reach and meet the needs of underserved populations. In 2021, approximately 21 percent of people served through the public substance use services system were members of a racial/ethnic underserved group. In 2022, DHS supported four initiatives addressing substance use treatment and support for underserved populations, including the Urban Black and Hispanic Program, bilingual residential treatment, and urban youth prevention services. Also, three tribal nations received SAPTBG funds to provide culturally specific substance use services.

Program Name	Grantees	Annual Funding Amount	People Served in 2022
Urban Black and Hispanic Program, Wis. Stat. § 46.975(2)(a)	Community Advocates, Waukesha County	\$200,000	42
Bilingual residential treatment, Wis. Stat. § 46.48(5)	United Community Center	\$220,842	46
Urban youth prevention	Brown, Kenosha, Milwaukee, Rock, and Waukesha counties	\$200,000	Not available
Tribal nation substance use treatment	Lac du Flambeau Band of Lake Superior Chippewa Indians, Forest County Potawatomi Community, Sokaogon Chippewa Community	\$21,800	30

Addressing Methamphetamine Use

Wisconsin continued to experience a surge in methamphetamine use, particularly in northwestern and western Wisconsin. In 2022, DHS continued offering evidence-based treatment training sessions on the Matrix Model, Contingency Management, and/or other evidence-based treatment services. DHS also continued issuing SAPTBG funds to four counties in northwestern Wisconsin to help supplement methamphetamine treatment. Providers in these four counties worked diligently to meet the needs of their communities despite the workforce shortages in their area.

Program Name	Grantees	Annual Funding Amount	People Served in 2022
Methamphetamine Treatment	Barron, Burnett, Polk, and St. Croix counties	\$200,000	152

Comprehensive Community Services

Comprehensive Community Services is a program for people 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 tribal nation and county agencies. The cumulative number of consumers served by the three tribal agencies and 70 county agencies offering the program grew throughout 2022, from 10,711 people enrolled at the beginning of the first quarter to 11,354 at the end of the fourth quarter. In addition, 22 percent of Comprehensive Community Services participants served in 2022 had a known substance use concern (excluding tobacco).

Peer Specialists

The Wisconsin Peer Specialist Employment Initiative trains and certifies peer specialists and certified parent peer specialists 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. A certified parent peer specialist is an individual with experience raising a child with behavioral health challenges. SAPTBG funding is used to support peer specialist training and certification activities.

SAPTBG Coronavirus Response and Relief Supplement Appropriations Act Supplemental Funding

In 2021, DHS was awarded \$25,492,891 in SAPTBG funding through the Coronavirus Response and Relief Supplement Appropriations Act (CAA). The funding period began March 15, 2021. It will end March 14, 2024, through a funding extension granted by SAMHSA. In 2022, SAPTBG CAA funding supported direct supplemental funding to counties and tribal nations, harm reduction efforts such as the distribution of naloxone, behavioral health workforce development, and expansion of substance use treatment services for women. The CAA funding has also supported the expansion of peer recovery centers and expanded prevention campaigns that targeted underage drinking and tobacco use.

SAPTBG American Rescue Plan Act Supplemental Funding

In 2021, DHS was awarded \$22,016,587 in SAPTBG funding through the American Rescue Plan Act (ARPA). The funding period began September 1, 2021. It will end September 30, 2025. In 2022, SAPTBG ARPA funding supported the distribution of NARCAN® to law enforcement agencies, substance use prevention campaigns, and the development of an opioid overdose alert dashboard.

State Opioid Response Grant

A total of \$16,728,087 of State Opioid Response Grant funding from SAMSHA was available from October 2021 through September 2022 to address the opioid epidemic and the misuse of stimulants. An additional \$7,084,319 was approved in March 2022 for a total of \$23,812,406.

DHS used this funding to support unmet treatment needs, the expansion of medication-assisted treatment options, opioid treatment centers, mobile opioid treatment units, telehealth services, and recovery supports. In 2022, 1,156 people received treatment services for an opioid use disorder and 1,163 people received treatment services for a stimulant use disorder. A total of 2,551 people received recovery support services, including coaching, housing, and assistance in finding and keeping a job.

Other projects funded by State Opioid Response funds in 2022 included:

- The NARCAN® Direct Program. This program provides NARCAN® at no cost to selected community agencies that engage in community training and distribution activities. In 2022, 4,176 doses were distributed through this program. Participating agencies reported 1,254 opioid overdoses that were reversed as a result of NARCAN® distributed through this program.
- Fentanyl Test Strips Direct Program. This purchased 100,900 fentanyl test strips that were distributed to select community agencies. The participating agencies distributed 17,495 fentanyl test strips in 2022.
- The Wisconsin Addiction Recovery Line. This treatment referral service received 6,515 calls, chats, and texts with 830 individuals connected to a peer support/recovery coach.
- The ED2Recovery Project. This program connected 815 people who experienced an opioid overdose to a recovery coach, 430 of these people received on-going recovery support services.

- The Opioids, Stimulants, and Trauma Summit. Nearly 800 people attended this event either in person in La Crosse or virtually.
- Provider trainings. About 2,000 people from 37 different agencies attended one of these sessions.

STATE COUNCIL ON ALCOHOL AND OTHER DRUG ABUSE

DHS provides staff services to the State Council on Alcohol and Other Drug Abuse (SCAODA), a group established under Wis. Stat. §§ 13.098 and 14.24 to coordinate substance use disorder planning and funding efforts in Wisconsin. SCAODA also advises the governor, legislature, and state agencies on prevention, treatment, and recovery matters. Meetings are held in March, June, September, and December.

In 2022, SCAODA 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.

QUALITY IMPROVEMENT ACTIVITIES

Motivational Interviewing Implementation

Motivational interviewing (MI) is a proven approach to address a range of behavioral health concerns. In 2022, DHS delivered 15 days of skills-based training with 250 multidisciplinary professionals. [Training evaluation](#) showed positive results. Following training, DHS provided 87 consultations (MI coaching, use of data, quality improvement) and facilitated 106 team meetings across several sites in the MI Implementation Project.

Screening, Brief Intervention, and Referral to Treatment Professional Training

Screening, Brief Intervention, and Referral to Treatment (SBIRT) is a proven approach to address risky substance use in health care and school settings. In 2022, hundreds of providers completed the DHS online training to become eligible for Medicaid reimbursement when delivering SBIRT in health care settings. Additionally, DHS provided technical assistance on the statewide School SBIRT Implementation Project. [Project evaluation](#) conducted by DHS showed positive results for 221 students.

CITATIONS

- National Institute on Drug Abuse. (2017, April). Trends and Statistics. Retrieved from: <https://www.drugabuse.gov/related-topics/trends-statistics>.
- 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>.
- 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>.
- 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>.
- 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>.
- Wisconsin Department of Health Services. Data Direct, Opioid Summary Module. Retrieved from <https://www.dhs.wisconsin.gov/opioids/deaths-county.htm>.
- Wisconsin Department of Health Services. Data Direct, Opioid Hospital Visits. Retrieved from <https://www.dhs.wisconsin.gov/opioids/hospitalizations-county.htm>.
- 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/>.
- 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.