

PART I - FACE SHEET

APPLICATION FOR FEDERAL ASSISTANCE <small>Modified Standard Form 424 (Rev.02/07 to confirm to the Corporation's eGrants System)</small>		1. TYPE OF SUBMISSION: Application <input checked="" type="checkbox"/> Non-Construction														
2a. DATE SUBMITTED TO CORPORATION FOR NATIONAL AND COMMUNITY SERVICE (CNCS): 01/25/11	3. DATE RECEIVED BY STATE:	STATE APPLICATION IDENTIFIER:														
2b. APPLICATION ID: 11TN124867	4. DATE RECEIVED BY FEDERAL AGENCY: 01/25/11	FEDERAL IDENTIFIER: 10TNHWI001														
5. APPLICATION INFORMATION																
LEGAL NAME: Sokaogon Chippewa Community DUNS NUMBER: 038771614 ADDRESS (give street address, city, state, zip code and county): 3051 Sand Lake Road Crandon WI 54520 - 8815 County: Forest	NAME AND CONTACT INFORMATION FOR PROJECT DIRECTOR OR OTHER PERSON TO BE CONTACTED ON MATTERS INVOLVING THIS APPLICATION (give area codes): NAME: Tim Murphy TELEPHONE NUMBER: (715) 478-7523 FAX NUMBER: (715) 478-5275 INTERNET E-MAIL ADDRESS: Timmurphy777@yahoo.com															
6. EMPLOYER IDENTIFICATION NUMBER (EIN): 391180139	7. TYPE OF APPLICANT: 7a. Indian Tribe 7b.															
8. TYPE OF APPLICATION (Check appropriate box). <input type="checkbox"/> NEW <input type="checkbox"/> NEW/PREVIOUS GRANTEE <input checked="" type="checkbox"/> CONTINUATION <input type="checkbox"/> AMENDMENT If Amendment, enter appropriate letter(s) in box(es): <input type="text"/> <input type="text"/> A. AUGMENTATION B. BUDGET REVISION C. NO COST EXTENSION D. OTHER (specify below):	9. NAME OF FEDERAL AGENCY: Corporation for National and Community Service															
10a. CATALOG OF FEDERAL DOMESTIC ASSISTANCE NUMBER:94.006 10b. TITLE: AmeriCorps Indian Tribes	11.a. DESCRIPTIVE TITLE OF APPLICANT'S PROJECT: TAP AmeriCorps Project 11.b. CNCS PROGRAM INITIATIVE (IF ANY):															
12. AREAS AFFECTED BY PROJECT (List Cities, Counties, States, etc): The primary target population of this proposal includes the eleven Tribes of Wisconsin. The secondary target population includes youth, ages 5 to 18, who participate in out-of-school time activities (afterschool, before school, and summer	13. PROPOSED PROJECT: START DATE: 09/01/11 END DATE: 08/31/12 14. CONGRESSIONAL DISTRICT OF: a.Applicant <input type="text" value="WI 008"/> b.Program <input type="text" value="WI 008"/>															
15. ESTIMATED FUNDING: Year #: <input type="text" value="2"/> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <tr> <td style="width: 20%;">a. FEDERAL</td> <td style="text-align: right;">\$ 253,500.00</td> </tr> <tr> <td>b. APPLICANT</td> <td style="text-align: right;">\$ 99,430.00</td> </tr> <tr> <td>c. STATE</td> <td style="text-align: right;">\$ 0.00</td> </tr> <tr> <td>d. LOCAL</td> <td style="text-align: right;">\$ 0.00</td> </tr> <tr> <td>e. OTHER</td> <td style="text-align: right;">\$ 0.00</td> </tr> <tr> <td>f. PROGRAM INCOME</td> <td style="text-align: right;">\$ 0.00</td> </tr> <tr> <td>g. TOTAL</td> <td style="text-align: right;">\$ 352,930.00</td> </tr> </table>	a. FEDERAL	\$ 253,500.00	b. APPLICANT	\$ 99,430.00	c. STATE	\$ 0.00	d. LOCAL	\$ 0.00	e. OTHER	\$ 0.00	f. PROGRAM INCOME	\$ 0.00	g. TOTAL	\$ 352,930.00	16. IS APPLICATION SUBJECT TO REVIEW BY STATE EXECUTIVE ORDER 12372 PROCESS? <input type="checkbox"/> YES. THIS PREAPPLICATION/APPLICATION WAS MADE AVAILABLE TO THE STATE EXECUTIVE ORDER 12372 PROCESS FOR REVIEW ON: DATE: <input checked="" type="checkbox"/> NO. PROGRAM IS NOT COVERED BY E.O. 12372	
a. FEDERAL	\$ 253,500.00															
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f. PROGRAM INCOME	\$ 0.00															
g. TOTAL	\$ 352,930.00															
17. IS THE APPLICANT DELINQUENT ON ANY FEDERAL DEBT? <input type="checkbox"/> YES if "Yes," attach an explanation. <input checked="" type="checkbox"/> NO																
18. TO THE BEST OF MY KNOWLEDGE AND BELIEF, ALL DATA IN THIS APPLICATION/PREAPPLICATION ARE TRUE AND CORRECT, THE DOCUMENT HAS BEEN DULY AUTHORIZED BY THE GOVERNING BODY OF THE APPLICANT AND THE APPLICANT WILL COMPLY WITH THE ATTACHED ASSURANCES IF THE ASSISTANCE IS AWARDED.																
a. TYPED NAME OF AUTHORIZED REPRESENTATIVE: Tim Murphy	b. TITLE:	c. TELEPHONE NUMBER: (715) 478-7523														
d. SIGNATURE OF AUTHORIZED REPRESENTATIVE:		e. DATE SIGNED: 05/06/11														

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Executive Summary

The goal of the Tribal AmeriCorps Program (TAP) is to strengthen the capacity of community coalitions in the 11 Tribal Nations of Wisconsin to reduce and prevent alcohol and other drug abuse among youth statewide. TAP places members in tribal coalitions to support culturally appropriate, evidence-based approaches to prevent youth substance use, including out-of-school time activities. TAP works closely with Tribal governments to engage leadership that empowers and supports local capacity.

Rationale and Approach

COMPELLING NEED More than two decades ago the U.S. Congress passed P.L. 99-570, the Indian Alcohol and Substance Abuse Prevention and Treatment Act (1986), 25 U.S.C. §2411. The Act was based on findings that "alcohol and substance abuse are the most severe health and social problems facing Indian tribes and people today and nothing is more costly to Indian people than the consequences of alcohol and substance abuse measured in physical, mental, social, and economic terms." This proposal is being submitted by the Sokaogon Chippewa Community, in partnership with the 11 federally-recognized Indian Tribes of Wisconsin, Marshfield Clinic Center for Community Outreach (CCO) and Northwoods Coalition, to develop a statewide, multi-site Tribal AmeriCorps Program (TAP) that will provide an infrastructure for local community health improvement activities focused on youth substance abuse reduction and prevention.

WHY THIS NEED In 2008, Gannett Co., Inc., a leading news and information company, published a series of stories entitled "State of Drinking" that documented the deep-rooted culture of drinking and alcohol's widespread impact on Wisconsin. Wisconsin has the worst alcohol problem in the United States, costing an estimated at \$4.6 billion (1). While Tribal-specific data on youth and adult alcohol and other drug use (AODA) is sparse, conventional wisdom is unequivocal about the severity of AODA and related problems among Wisconsin's Tribes. In a survey of over 60 American Indian (AI) reservations in North America, 70 percent of respondents rated substance abuse problems among the top three health priorities (2). There are 60,671 AI living in Wisconsin as of 2008(3), there are

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approximately 25,000 youth ages 5 to 18 years of age (4). AI people comprise about 1% of the Wisconsin population (5), yet they are disproportionately affected by risk factors associated with substance abuse. A 2002 survey of Wisconsin AI adults shows that AI who use are at higher risk of developing a substance abuse disorder than the general population(6).

In 2005, 10 of the 11 Tribes in Wisconsin became participants in the \$5.5 million Tribal Strategic Prevention Framework State Incentive Grant (Tribal SPF SIG). The focus of this project is to build substance abuse prevention capacity and infrastructure within the Tribes. Tribal Coalitions developed during the project, organizations consisting of individuals from all social and economic sectors working collaboratively on prevention, are conducting needs assessments in their communities with early indications pointing to underage substance abuse as a major focus(7).

HOW NEED WAS IDENTIFIED

In 2009, the Sokaogon Chippewa Community, acting as fiscal agent on behalf of the 11 Tribes in Wisconsin and in partnership with Marshfield Clinic Center for Community Outreach (CCO), procured a Tribal AmeriCorps Planning (TAP) grant through the Corporation for National and Community Service (CNCS). The planning focus was the development of a multi-site AmeriCorps program that would serve to build prevention capacity within the Tribes by placing members in coalitions working to address substance abuse. The project established a collaborative process involving the Tribal State Collaborative for Positive Change (TSCPC), a coalition of behavioral health specialists representing the 11 Tribes and CCO. CCO is home to the Marshfield Clinic AmeriCorps program, which is in its 9th year of funding. Marshfield Clinic AmeriCorps places 50 members in coalitions through the Northwoods Coalition, a network of prevention coalitions serving 40 counties in Wisconsin. Under TSCPC guidance, CCO prevention staff met with coalitions at all 11 Tribal communities to garner support for TAP. Tribal governments were asked to consider Resolutions of Support for a full implementation TAP. Seven of the 11 Tribes passed resolutions, an unprecedented show of support for addressing substance abuse. The TAP proposal includes a seamless integration with the Marshfield Clinic AmeriCorps program and

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Northwoods Coalition. A Tribal Advisory Team will ensure ongoing tribal influence, decision-making and autonomy for cultural and operational adaptation.

NEEDS DOCUMENTATION

Several risk factors are of special concern for the Wisconsin AI population: POVERTY: 21.7% live below the poverty level, considerably higher than the state average of 8.7% (5). Average per capita income (\$13,539) for AI population is far below state (\$21,271) and national (\$21,587) levels (5). Some tribal unemployment rates are currently as high as 48%. POOR ACADEMIC SUCCESS: According to Wisconsin Department Of Public Instruction figures, AI students were truant over five times more often than whites; suspended three and a half times more often whites; dropped-out three and a half times more often than whites; and graduated from high school at a rate 20% lower than whites (8).

HISTORICAL TRAUMA has been studied as a partial explanation of the basis of the problems that have plagued AI for generations (9). Discrimination of AI people persists in Wisconsin. Research illustrates that perceived discrimination is associated with substance abuse among AI adolescents (10).

These risk factors lead to increasingly negative outcomes. AI experience violence at a rate more than twice the rate for the nation (11). Suicide ranks second as the leading cause of death for Wisconsin AI youth ages 10-24. (12). AI juveniles are arrested two and a half times more than white youth. (13).

Federal Department of Justice statistics show that arrests per capita for alcohol violations (DUI, liquor laws, drunk and disorderly) among AI are double that of the general population (6). A positive adult role model who looks at youth through a holistic lens can have a profound effect. TAP members will help build the capacity to fill this role.

There is a need for competent, culturally trained service providers, AI prevention specialists, tribal prevention programming, and coordinated data on substance abuse in Wisconsin's Tribes. Under the guidance of the Tribal Advisory Team, and in partnership with CCO, TAP will ensure the integration of cultural assets in rebuilding tribal prevention frameworks.

MULTIPLE SITES The TAP will operate at multiple sites. The following seven Tribes will be

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participating in the TAP as indicated by Resolutions of Support passed by their respective governments: Ho-Chunk Nation; Menominee Nation; Stockbridge-Munsee Band of Mohican Indians; and the following Bands of Lake Superior Chippewa Indians, Lac Courte Oreilles, Lac du Flambeau and Red Cliff. The remaining four Tribes will be added in subsequent years as they become ready.

DESCRIPTION OF ACTIVITIES & MEMBER ROLES

PROPOSED The goal of TAP is to strengthen the capacity of coalitions to reduce and prevent AODA among youth statewide. TAP will place members in tribal coalitions across Wisconsin to support culturally appropriate, evidence-based approaches to prevent youth substance use, including out-of-school time activities. Research validates the critical role that coalitions can play using evidence-based out-of-school time activities to promote healthy behaviors and reduce high-risk behaviors. (15). Out-of-school time programs have the obvious benefit of supervising youth during times when there is heightened risk for unhealthy behavior such as substance abuse (16). Youth who participate in out-of-school time programs can reap positive benefits in academics, social/emotional health and wellness (16). Out-of-school time programs effectively address risk factors associated with multiple health problems.

CURRENT EFFORTS The 1200-plus member Sokaogon Chippewa Community is a federally-recognized Indian Tribe located in Forest County in northeastern Wisconsin. The Tribe invests in many social programs that enhance the general health and welfare of the Sokaogon Chippewa Community. As fiscal agent for the TAP planning grant, the Sokaogon tribal government has made the commitment to address substance abuse and extends these traditional health and welfare concerns to all the Tribes in the state. Under their leadership, in collaboration with working partners, they are positioned to implement a project that will meet the CNCS goals of supporting youth development to help children and youth succeed in school.

Since 2000, CCO has operated the multi-site Marshfield Clinic AmeriCorps program funded by the state commission, Serve Wisconsin. The program has a strong record of achievement with member

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recruitment, retention and performance measures. The design of TAP includes a connection to the Marshfield Clinic AmeriCorps program but incorporates the professional and cultural assets of Tribal prevention coalitions.

CCO staff manages the Northwoods Coalition, whose member coalition's work through evidence-based approaches including out-of-school time activities to reduce and prevent substance abuse among youth. Tribal coalitions will become members of the Northwoods Coalition, giving them access to trainings, technical assistance and resources. Northwoods membership will enable Tribes to access regional and statewide prevention efforts; advocacy networks and ultimately, the decision-making process in the state capital.

PROGRAM STRUCTURE TAP is requesting 13 MSY's serving in 7 tribal coalitions across Wisconsin. The TAP Host Site Application and Coalition Guidelines will include a TAP Memorandum of Understanding, defining partner and coalition roles, to be signed between each coalition and their tribal government. Each coalition with a signed MOU will be eligible for AmeriCorps members. The application will include a Member Service Plan that reflects a commitment to develop a Community Action Plan to implement the Strategic Prevention Framework (SPF) process, a federally-endorsed public health model which aims to ensure prevention efforts produce results using evidence-based practices. Coalitions will recruit and mobilize volunteers, and improve the health of youth through out-of-school time activities and other approaches. Tribal coalitions will be required to become members of the Northwoods Coalition.

SOKAOGON TRIBE ROLE As fiscal agent for TAP, the Tribe will provide legal and fiscal oversight and management of the project. They will also provide program level administration and benefits management for members including; background checks, DMV checks, enrollment, childcare benefits, health insurance, payroll, mileage and reimbursements (program required events only) and service gear.

TAP ADVISORY TEAM ROLE The overall management of TAP will be guided by the TAP Advisory Team to ensure ongoing tribal influence. The 11 members of the TSCPC, CCO, and representatives of the

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Northwoods Coalition will comprise the TAP Advisory Team. Monthly meetings of the TAP Advisory Team will be held to oversee all aspects of the project. To ensure cultural assets are fully accessible and utilized by TAP members, tribal members on the Advisory Team will be asked to help develop curriculum for a "Tribal Track" for TAP members at the orientation and midterm trainings held in conjunction with the Marshfield Clinic AmeriCorps program. The Advisory Team will be engaged in the TAP Coalition application review process, development of supporting behavioral health disaster preparedness and training, and promotion of volunteer recognition across all Tribal locations.

TRIBAL HOST SITE COALITION ROLE To become members of the Northwoods Coalition, each coalition will be required to have representation from at least 4 community sectors and to designate a Northwoods Coalition board member and alternate to attend meetings. Host site coalitions will commit to the responsibilities outlined in the TAP Application and Coalition Guidelines and Member Service Plans. Out-of-school time providers that request services will grant permission for the AmeriCorps member to administer selected portions of the Marshfield Clinic AmeriCorps Youth Survey to youth participants. Host coalitions will assure that AmeriCorps member(s) attend coalition meetings and include TAP updates on agendas. Coalition representatives will attend learning events and seek out technical assistance in the development of Community Action Plans. Host coalitions will release their members for 15 days per year for program level training and up to 21 days for response to local, state and national disasters.

MARSHFIELD CLINIC ROLE Under the leadership of the CCO director, an experienced team will implement components of the TAP. Team members include the Marshfield Clinic AmeriCorps Manager, Northwoods Coalition Manager, Community Health Education Specialist and three prevention specialists, one of whom is designated specifically as the TAP Prevention Specialist. Staff will provide education, training, technical assistance, and other resources for the implementation of TAP including SPF. Staff will develop and coordinate integrated systems between the Marshfield Clinic AmeriCorps program and TAP such as AmeriCorps member and host site supervisor orientation and ongoing

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trainings. CCO will also ensure that Tribal Coalitions are integrated seamlessly with Northwoods Coalition. Staff will review weekly service reports, monitor and document service hours, ensure living allowances meet the minimum specified by the CNCS, provide program and policy updates, conduct site visits and review member performance evaluations. They will provide training and technical assistance on volunteerism, risk and protective factors, positive youth development and research that connects positive health outcomes with quality out-of-school-time approaches. Staff will train members on the protocols for survey administration, and will compile, analyze and disseminate results of surveys given to youth. CCO may leverage the expertise of the Wisconsin Clearinghouse for Prevention Resources to deliver member training and in the coordination of the TAP Advisory Team.

MEMBER ROLES Members will strengthen coalition capacity by assisting in the recruitment, recognition and mobilization of volunteers and by attending coalition meetings. Members will be trained to promote participation in the elements of the SPF model within their coalitions. This will help their coalitions as they develop and implement Community Action Plans to reduce AODA. Members will provide direct service such as homework assistance in out-of-school time activities and other evidence-based approaches identified in their Member Service Plans; complete reports and forms to monitor progress on service and administer selected portions of the youth survey; attend 15 days of training to prepare them for these activities; and be prepared for up to 21 days of deployment for disaster assistance.

MEMBER SLOT ALIGNMENT TAP is requesting 13 fulltime MSYs to provide the capacity coalitions need to accomplish activities and to allow adequate time for members to develop meaningful relationships with youth through out-of-school time approaches.

MEMBER DEVELOPMENT AND TRAINING In addition to the training discussed earlier, CCO staff will provide career development opportunities for members including interviewing, resume building, and a career portfolio that will aid in the transition into employment, post-secondary education, volunteer service, or a second term of service. Using curriculum developed by CNCS and the TAP Advisory Team,

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staff will provide opportunities for members to increase knowledge of U.S. and Tribal citizenship and democracy. Members will be certified in American Red Cross and behavioral health disaster preparedness training. Following successful completion of the course, members will be identified on the Red Cross Disaster Service Human Resource Roster, placing them on-call for mobilization and deployment to support local, state and national disasters and emergencies, as well as opportunities to become more involved after their term of service. In addition, members will have the skills to help out-of-school time programs develop and potentially implement disaster plans. Members will spend approximately 15 days per year away from their coalition for program level training and activities, such as orientation (5 days), midterm training (3 days), kickoff celebration (2 days), end of year celebration (2 days) and national service project (3 days). Members could also spend up to 21 days for disaster deployment.

MEMBER SUPERVISION Each member will be assigned a Host Site Supervisor. Host Site Supervisors are employed by organizations that are active within the host coalitions. They will agree to Host Site Application commitments including selecting and mentoring the member, attending supervisor orientation, reviewing and approving member service reports, and completing required evaluations. Supervisors will coordinate with the coalition to provide matching funds for the member's living allowance and operating cost and will provide office space and computer access.

COMPLIANCE All aspects of the TAP Host Site Application, including the coalition Member Service Plan, will be screened for compliance issues. During orientation training, Host Site Supervisors and members will be educated on CNCS national and local rules, prohibited activities, regulations, and compliance issues and provisions including non-duplication, non-displacement and non-supplementation. Members will review the material again at the midterm training. The TAP Prevention Specialist will monitor host sites throughout the program year at which time any compliance issues will be noted and shared with the TAP Advisory Team and a plan developed and implemented to resolve them.

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AMERICORPS ADDS VALUE TO EXISTING SERVICE TAP is designed to strengthen coalition capacity through the use of an evidence-based framework that helps Tribal people to solve Tribal problems. This will be accomplished by leveraging the cultural knowledge of tribal professionals with the prevention expertise of CCO. TAP will add value to existing service activities by increasing each coalition's capacity to develop specific strategies using the SPF model. The service provided by members and volunteers in out-of-school-time activities will also add value, contributing to significant health improvements in participating youth.

MEASURABLE OUTPUTS & OUTCOMES

STRENGTHENING COMMUNITY COALITIONS 100% of members who complete their term of service will receive training centered on the SPF and 100% of host coalitions will develop a community action plan centered on the SPF.

VOLUNTEER MOBILIZATION 100% of members who completes their term of service will recruit 55 new on-going and episodic volunteers (unduplicated), resulting in the completion of 165 volunteer occurrences and 330 hours of service.

OUT-OF-SCHOOL TIME PROGRAMMING TAP will address the Healthy Futures priority area standard performance measure 4: number of clients participating in health education programs. 100% of members who complete their term of service will assist coalitions in providing health (substance abuse) education to youth. This will be done through out-of-school time programming and 50% of participating youth that complete selected portions of the Survey will show a change in one or more of the following: decrease in AODA risk behaviors, increased perception of risk related to risky behaviors, a positive shift in decision making (i.e. not riding with someone who has been drinking) or an increase in the number of meaningful relationships with an adult.

DISASTER PREPAREDNESS 100% of members who complete their term of service will receive Red Cross Disaster Services Training to prepare them to support local, state and national disasters.

CAREER ENHANCEMENT SKILLS 100% of members who complete their term of service will complete

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career enhancement training to include portfolio development, resume building and interview skills and will transition to gainful employment, a second term of service, volunteer work or secondary education as indicated in an exit survey.

CITIZENSHIP PROFICIENCY 100% of members who complete their term of service will complete training in the areas of lifelong U.S and Tribal citizenship and democracy and will show an increase in their knowledge in at least one of the area as indicated in a pre and post survey.

TRACKING SYSTEMS FOR PERFORMANCE MEASURES

STRENGTHENING COMMUNITY COALITIONS To track member training, the TAP Prevention Specialist will keep accurate attendance rosters. Member evaluations indicating member performance will be completed by members and host site supervisors and collected midterm and end of term during the program year. Members will also be evaluated on their service related to coalition development of a Community Action Plan. TAP Coalitions will submit completed Community Action Plans for technical assistance as needed. Any assistance will be monitored on technical assistance logs.

VOLUNTEER MOBILIZATION AmeriCorps members will track volunteers and hours of service as they support local functions through use of various systems already developed by Marshfield Clinic AmeriCorps to allow for internal tracking of volunteers and hours served. Data will be tallied, reviewed and evaluated by the TAP Prevention Specialist on an ongoing basis.

OUT-OF-SCHOOL TIME PROGRAMMING A roster of attendance will be kept by members and tracked by the TAP Prevention Specialist. Each member's service will be tracked using weekly service reports. The Survey administered to youth will be proctored by members. CCO will tally survey results and develop a summary report, analyze the completed surveys and develop an evaluation report.

DISASTER PREPAREDNESS A roster of attendance and certifications will be kept by the TAP Prevention Specialist. A roster will be kept of members that are deployed.

CAREER ENHANCEMENT SKILLS The TAP Prevention Specialist will keep a roster of attendance for this training and will conduct, and then tally, a survey with members prior to exiting the program

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regarding future plans.

CITIZENSHIP PROFICIENCY Members will complete the Citizenship pre and post surveys during training. The TAP Prevention Specialist will collect and tally the results and work with the Advisory Team to generate evaluation reports.

PLAN FOR SELF-ASSESSMENT AND IMPROVEMENT

TRACKING & EVALUATION Several systems will be put in place to track and monitor progress. The TAP Project will be a standing agenda item on the TAP Advisory Team monthly meetings as well as CCO administrative team meetings and meetings of CCO Staff who provide support to the Northwoods Coalition and the AmeriCorps program.

The TAP Advisory Team and CCO staff will review outputs and outcomes from the performance measures on an ongoing basis via the following methods: ongoing staff communication regarding training, attendance rosters, technical assistance logs, volunteer tracking systems, member and youth survey instruments, and AmeriCorps member evaluations. CCO staff will assist in monitoring of process and outcome indicators, facilitate focus groups of members, site supervisors and host coalition members; provide follow-up contacts with members, host coalitions and site supervisors regarding program outputs and outcomes as needed; and develop evaluation reports for dissemination. An overall program evaluation report will be completed by CCO staff, assessing both process and outcome components for the 6 performance measures.

CONTINUOUS IMPROVEMENT Two internal communication approaches will help staff identify strengths and weaknesses, resolve problems, gather and provide feedback on a regular basis: 1) members and site supervisors will have ongoing access to the TAP Prevention Specialist and CCO staff and 2) weekly service reports will provide a venue for members to provide feedback to the TAP Prevention Specialist and host site supervisors.

CCO staff will facilitate focus group sessions at least once a year with AmeriCorps members, site

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supervisors and host coalition representatives. CCO staff will also assist in conducting follow-up contacts related to program improvement needs; compile the results of focus groups; and work with the TAP Prevention Specialist and the TAP Advisory Team to identify issues that need to be addressed, determine solutions and develop a report to be disseminated to members, service sites and host coalitions.

TAP will also evaluate the program using various systems already in place through the Marshfield Clinic AmeriCorps program including mid-term member surveys, and involving returning members in planning and delivering the AmeriCorps orientation and midterm trainings.

COMMUNITY INVOLVEMENT

All 11 Tribes in Wisconsin were engaged in the planning of TAP. Multiple presentations were given at each Tribe (agency and governmental reps, formal coalition and full government meetings) explaining AmeriCorps and TAP, and exploring local needs and possible activities. Email lists from each Tribe were developed and weekly emails were sent describing planning progress and plans for implementation. Each government was asked to pass an official Resolution of Support, passed by 7 Tribes, for a full implementation grant. Based on this support, the Sokaogon Tribal Council passed a resolution to approve the writing of the full implementation grant. A final round of visits to the 7 participating Tribal Coalitions was made to discuss and provide opportunities for feedback on the project in more detail, including working drafts of: host site coalition guidelines, member service plans, and tribal coalition/tribal government MOU's.

Key representatives from each Tribe and the TAP Advisory Team were instrumental in reaching consensus on key elements at statewide meetings during the planning process, and contributing to this application.

Coalitions selected as host sites will have ongoing opportunities to identify and resolve issues, challenges and needs related to TAP through the Advisory Team, CCO staff and the TAP Prevention Specialist. As noted earlier, both formal and informal communication strategies with tribal governments and

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coalitions will maintain program quality and effectiveness. Feedback surveys will be administered twice per year and focus groups will be conducted which will provide members an opportunity to identify concerns, ideas, challenges and opportunities.

RELATIONSHIP TO OTHER PROGRAMS

The TAP Project will build upon the existing Marshfield Clinic AmeriCorps program by building capacity in Tribal prevention coalitions. Currently, the Sokaogon Tribe receives no other funding from CNCS. Marshfield Clinic AmeriCorps has a rich history of working collaboratively with both the Tribes and other CNCS-funded programs in Wisconsin. The Marshfield Clinic AmeriCorps Program Manager was instrumental in the creation of a committee of Wisconsin AmeriCorps directors and is active in state level planning. Marshfield Clinic AmeriCorps service day activities have been open to CNCS-funded members from throughout the state.

The TAP Prevention Specialist has unique experience working in Indian Country, including creating the Intercultural Leadership Initiative (ILI), a local program started in 1998 to improve the lives of Indian people by reducing the effects of racism through service, mentoring and out-of-school time activities. ILI has received numerous state and national awards, including the Honoring Our Nations Award from Harvard University. The TAP Prevention Specialist wrote and initially directed the Tribal SPF SIG, developing the community coalitions where TAP Members will serve.

POTENTIAL FOR REPLICATION

The first benchmark for replication exists in Wisconsin. Soliciting the participation of the four tribes not participating in year one will be the focus for year two of TAP. The collaborative partnership with Marshfield Clinic and Northwoods Coalition membership has grown from 8 community coalitions in 1998 to over 40 in 2010. The Tribal coalitions will increase that number by 25%. Given sufficient financial capacity, the TAP could be adapted to address any number of compelling needs and replicated for use by tribal coalitions across the nation.

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RESOURCES (1) WI Dept. of Health & Human Services, Healthy People 2010, 2000. (2) McKenzie, D. (1994) "Dialogue on aboriginal substance use," in Aboriginal Substance Use Research Issues, Canadian Center for Substance Abuse. (3) Wisconsin Interactive Statistics on Health (WISH) <http://dhfs.wisconsin.gov/wish/> (4) Community Health Data Profile: Minnesota, Wisconsin and Michigan Tribal Communities. 2008. Great Lakes Inter-Tribal Epidemiology Center. (5) U.S Census Bureau. (2007). (6) A Study of the Alcohol and Drug Health of Wisconsin American Indian Adults Living On Or Near Reservations-A Final Report. 2002. State of Wisconsin Department of Health and Family Services. (7) Wisconsin Tribal Epidemiological Profile: A Report Of The Alcohol and Drug Health of Wisconsin American Indians. Great Lakes Inter-Tribal Epidemiology Center. 2007. (8) 2006-2007 Data from the Wisconsin Department of Public Instruction WINSS Successful School Site. <http://data.dpi.state.wi.us/data/graphshell.asp>. March 2007. (9) Duran, Bonnie, Eduardo Duran, and Maria Yellow Horse Brave Heart. Native Americans and the Trauma of History. Russell Thorton (ed.), Studying Native America: Problems and Prospects. 1998. Madison, WI: University of Wisconsin Press:610. (10) Whitbeck, L.B., Hoyt, D.R., McMorris, B.J., Chen, X., and Stubben, J.D. Perceived discrimination and early substance abuse among American Indian children. Journal of Health and Social Behavior. 42:405-424. 2001. (11) American Indians and Crime-A Statistical Profile 1992-2002. U.S Dept.of Justice Bureau of Justice Statistics. 2004. (12) Indian Health Service. Trends in Indian Health. 2001. (13) Wisconsin Office of Justice Assistance. 2009. Disproportionate Minority Contact. An Assessment of Disparity in the Wisconsin Juvenile Justice System: 2003-2007. (14) Nicholson, H. J., (2004). Youth as People: the Protective Aspects of Youth Development in After-School Settings. The ANNALS of the American Academy of Political & Social Science. (15) Little, P., (2008). Harvard Family Research Project: After school programs in the 21st century.

Organizational Capability

SOUND ORGANIZATIONAL STRUCTURE

FISCAL OVERSIGHT: HISTORY Sokaogon Chippewa Community family clans migrated from eastern

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Canada to Madeline Island a thousand years ago. Before the reservation was formally approved following the Indian Reorganization Act of 1934, the Sokaogon had always lived in the vicinity near Rice Lake without the benefit of any form of tribal government, other than the ability to hold council meetings. The band received federal recognition and reservation status in 1937. In 1968 the Sokaogon received additional lands which brought the reservation size to just less than 2,000 acres. Starting in the 1970s and continuing through today, tribal members and tribal governments began challenging the authority of the states to apply their resource regulations against tribal members hunting on ceded lands and fishing in ceded waters, both inland and in Lake Superior. In a series of federal and state court decisions, the treaty-reserved rights of the Ojibwe were reaffirmed in Wisconsin with the 1972 Gurnoe and the 1983 Voigt decisions.

PROGRAMMATIC OVERSIGHT: HISTORY Marshfield Clinic, founded in 1916, is a not for profit 501(c)(3) tax exempt organization that is one of the largest private, multiple-specialty group practices in the United States with nearly 800 physicians and 80 specialties in over 40 clinics in central and northwestern Wisconsin. The Center for Community Outreach was established in 1998 as a department of the Marshfield Clinic responsible for population-level strategies focused on community health improvement. Marshfield Clinic AmeriCorps is a program of the Center for Community Outreach.

FISCAL MANAGEMENT EXPERIENCE & GRANTS MANAGEMENT The Tribe recognizes that the health of its future lies in the health of its youngest members. Most recently, in 2008 a \$1.3 million Youth Center facility was erected to house the Boys and Girls Club. The Tribe, in partnership with the Forest County Potawatomi Tribe and the Crandon School District, implemented a tutoring program at the Crandon School focusing on the needs of AI students, including afterschool tutoring, improving communications between the school and AI parents, and even helping transport students between school activities and their reservation homes. The Tribe is an original member in the Great Lakes Inter-Tribal Council (GLITC), a non-profit organization started in 1965 to help Tribes expand sovereignty and self-determination. Most of the programs at GLITC focus on improving prevention across Indian

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Country in Wisconsin. The Tribe is also a member of the Great Lakes Indian Fish and Wildlife Commission (GLIFWC), an agency assisting eleven Ojibwe nations in Minnesota, Wisconsin and Michigan in the implementation of off-reservation treaty seasons and in the protection of treaty rights and the natural resources.

Funding most relevant to this proposal includes the Tribe acting as fiscal agent on behalf of the 11 Wisconsin Tribes for the Wisconsin Department of Health Services Mental Health Block Grant, which funds the TSCPC coalition work. Sokaogon participation in the GLITC Tribal SPF SIG grant supports the Mole Lake Coalition, a substance abuse prevention coalition working to reduce substance abuse on the reservation. Coalition partners include Tribal government, schools, law enforcement, counselors, and other community members representing various sectors of the greater community.

The Tribe does not have prior experience managing a multi-site AmeriCorps program. Tribal Council members met with CCO staff on numerous occasions during the planning grant period to discuss forming a working partnership, utilizing the experience of CCO staff to help build the capacity needed to make this project work. Roles and responsibilities for both the Tribe (fiscal) and CCO (programmatic) were clearly defined in this process. The Tribal government passed a resolution to pursue a full implementation grant in partnership with CCO in December 2009.

PROGRAMMATIC EXPERIENCE & GRANTS MANAGEMENT Marshfield Clinic Center for Community Outreach (CCO) currently manages a 50-member AmeriCorps project placing AmeriCorps members in prevention coalitions throughout Wisconsin. In addition, CCO collaborated with the TSCPC to develop the framework for the TAP Planning grant and took a leadership role in implementing the project.

CCO was the catalyst for the development of the Northwoods Coalition, which was formed in 1995 by 8 substance abuse coalitions. Northwoods has evolved and expanded since that time to include over 40 coalitions in 38 counties. Coalition members are encouraged to develop Community Action Plans based on the SPF. Northwoods Coalition representatives prioritize afterschool programs and other out-of-school time activities as a viable prevention strategy. CCO staff provides technical assistance,

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consultation, education, training and other resources to coalitions in support of their efforts to develop and implement evidence-based population health initiatives. CCO staff provides leadership to the Tribal State Collaboration for Positive Change, Wisconsin Native American Prevention Counsel, Wisconsin Afterschool Network and provides technical assistance and training to support quality afterschool program approaches and evidence-based out-of-school time activities.

State funding most relevant to this proposal includes annual Serve Wisconsin awards, 2000-2009, to support the multi-site, statewide Marshfield Clinic AmeriCorps program. The program has received the Governor's Community Service Outstanding Impact Award and the Wisconsin Department of Public Instruction, Secretary of Education's Certificate of Appreciation. The program has consistently been ranked by the State Commission Service WI in the top tier of performing programs in large part due to its strong record of achievement with member recruitment, retention and performance measures.

CAPACITY TO MANAGE The Sokaogon Chippewa Community currently manages over 100 grants including state, federal and various other granting agencies. All grants are in compliance with OMB Circular A-133. Grants help support a variety of programs and projects on the reservation including housing, education, economic development, law enforcement, courts, healthcare, social services, elder services, environment and historic preservation. Each Grant is assigned a compliance coordinator who oversees the fiscal and narrative aspects of a grant.

The Sokaogon Chippewa Community Tribal Council oversees all tribal operations. The Tribal Treasurer oversees the Accounting office which administers the grant. The support staff that will work most closely on this grant will be Accountants, Human Resource, and Background.

CCO's 9-year experience in managing the financial aspects of the Marshfield Clinic AmeriCorps program is a critical aspect of the partnership with the Sokaogon Tribe. CCO staff and Sokaogon tribal financial staff established a working partnership during the planning grant period which promoted good communication about, and close monitoring of, the financial systems required by CNCS. This working partnership will extend throughout the full implementation project. For example, in the current

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Marshfield Clinic AmeriCorps program, the CCO manager and a fully staffed Sponsored Programs Department of the Marshfield Clinic Research Foundation ensures compliance with guidelines on appropriate use of funds, provides support for contractual/consultant agreements, and performs grant-related accounting functions, including the completion of Financial Status Reports (FSR). These resources will be available for TAP, if assistance is needed.

ON SITE MONITORING Member Service Plans have clearly defined their roles and expectations, helping them make a real difference in coalitions through meaningful service in evidence-based practices and programs designed to improve the health of youth. Ample opportunity will be given for members to recruit and mobilize volunteers and to participate in education, training and service activities that contribute to their personal career enhancement and civic development. Marshfield Clinic AmeriCorps has systems in place to measure and track progress toward performance measures and that contribute to continual program improvement. These systems will be adapted for TAP. Members will have access to structured training, technical assistance, tools and other resources developed in the Marshfield Clinic AmeriCorps program.

MULTI-SITE PROGRAM

SITE SUPPORT & OVERSIGHT TAP will be a multi-site program in 7 tribal communities across Wisconsin. The TAP Prevention Specialist will provide overall program management, event planning, and organizational development of the program. A key element in managing multiple sites will be the development of training, communication and reporting systems. Members will spend approximately 15 days per year together in program level training and activities, such as orientation (5 days), midterm training (3 days), kickoff celebration (2 days), end of year celebration (2 days) and national service project (3 days). Weekly Member Service Reports and monthly Time and Effort reports, reviewed and approved by host site supervisors and submitted to the TAP Prevention Specialist, will ensure ongoing communication on the specific activities of each member. Feedback surveys, completed during orientation and midterm training, will provide opportunities for members to identify critical issues,

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share concerns, ideas, and challenges. Similar opportunities to address issues and present ideas are afforded host site supervisors and members of Host Coalitions during quarterly Northwoods Coalition meetings.

Each coalition will assign their member to a specific host site supervisor from among its membership. Host site supervisors will be employed by organizations that are active within the host coalitions, such as schools, nonprofit and public agencies, tribal organizations, etc. The host site supervisor will agree to supervise and evaluate the member, garner matching funds for the member's living allowance and operating costs and provide office space and dedicated computer access. The host site supervisor agrees to all of the Host Coalition commitments to TAP, including supervisor training, paperwork and compliance with AmeriCorps rules, regulations, and standards for operation.

SITE SELECTION & RESPONSIBILITIES The TAP opportunity will be made available to Tribal Coalitions that have tribal MOU's signed with their government and become members of Northwoods Coalition.

The TAP Host Site Application and Coalition Guidelines will include a TAP Memorandum of Understanding, defining partner and coalition roles, to be signed between each coalition and their tribal government. Each coalition with a signed MOU will be eligible for AmeriCorps members. The application will include a Member Service Plan that reflects a commitment to develop the Community Action Plans discussed earlier.

To become members of the Northwoods Coalition, each coalition will be required to have representation from at least 4 community sectors and to designate a Northwoods Coalition board member and alternate to attend meetings.

Host Coalitions will commit to responsibilities outlined in the TAP Application and Coalition Guidelines and Member Service Plans. Responsibilities include: adopt and participate in the development of a Community Action Plan that targets elements of the SPF; commit to the ongoing recruitment and recognition of volunteers to assist in building capacity; complete a Member Service Plan that identifies a

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role for the member in out-of-school time activities and other culturally appropriate evidence-based practice and programs of the coalition; select a host site supervisor; and commit to the cash match. The host site supervisor will be responsible for working with coalition representatives in selecting their member. The Host Site Supervisor will be responsible for mentoring and monitoring the service of the member; providing workspace and access to a computer with Internet capabilities; and, for contributing a portion, sometimes all, of the cash match contribution.

The TAP Advisory Team will review applications on these criteria. The Team will encourage and work with each coalition to demonstrate coalition capacity and community involvement; quality of the Member Service Plan; host site organizational, supervisory and leadership capacity; and financial capabilities to meet the match requirements. A successful program and fiscal history with TAP will be critical for those reapplying in subsequent years.

PREVIOUS RELATIONSHIPS WITH SITES Previous programmatic and fiscal relationships developed with the Tribes include the Sokaogon Tribe acting as the fiscal agent for the state mental health block grant that funds TSCPC. The Tribe provides a program coordinator for this project. In addition, the Tribes have participated in the Tribal SPF SIG grant project written and initially directed by the TAP Prevention Specialist. As Tribal coalitions come on board through this proposal, the systems and structures described above will be maintained.

MONITORING SITE COMPLIANCE The TAP Prevention Specialist will conduct a site visit at least once each year to ensure AmeriCorps standards and agreements are met and that adequate communication is maintained. Any compliance issues will be noted and a plan will be developed to resolve them; the plan will be reviewed every week until the issue is resolved. The TAP Advisory Team will review the ongoing performance of each host site coalition during their monthly team meetings. Appropriate action will be taken as needed to rectify identified concerns.

COMMON ELEMENTS The overall goal and purpose of TAP will be maintained through each site's adoption of the required coalition responsibilities outlined in the TAP Host Site Application as described

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above. In essence, this program will build a critical mass of coalitions that are working in tandem to prevent youth substance use. Positive health outcomes will be achieved for youth by aligning efforts of multiple Wisconsin coalitions around a common framework. The service provided by members will reinforce consistency in approaches across sites. In addition, members will come together for at least 15 days during the term of service, spending time in team-building and training that lays the groundwork for the development of common skills and provides opportunities for sharing lessons learned within each community coalition.

Regular meetings of the Northwoods Coalition and host site coalitions will include TAP as a standing agenda item to help ensure consistency. Host site supervisor training will also promote a common understanding of program requirements activities and procedures, helping keep coalitions on the same track.

BOARD OF DIRECTORS, ADMINISTRATORS AND STAFF

The Sokaogon Chippewa Community Tribal government is a council made up of six persons as listed in the constitution: Chairperson, Vice-Chair, Secretary, Treasurer, Councilman I, Councilman II. Tribal Council meets monthly and holds a combination of general sessions and closed (executive) sessions. It also meets twice per year to hold a general annual meeting and semi-annual meeting. The Tribal Council oversees all operations of the Tribe. The Tribal Treasurer oversees the Accounting office which administers the grant. The support staff that will work most closely on this grant will be Accountants, Human Resource, and Back ground.

FISCAL ADMINISTRATORS AND STAFF The Sokaogon Tribal Council oversees all grant projects. The key program and fiscal positions responsible for TAP will be the Accounting Staff, Human Resources, and Background staff. The Accounting staff will oversee the fiscal and program aspects of the grant to ensure both financial and narrative reports are done in a timely manner. Human Resources will give the AmeriCorps applicants a detailed job description, based on the Member Service Plan developed at the

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Tribal Coalition where they will serve, and inform them of what is expected of them as well as file all the necessary wage forms. Background staff will perform an extensive background check on each AmeriCorps applicant.

POSITIONS, BACKGROUND, EXPERIENCE Tim Murphy, Tribal Accountant and lead accountant for TAP has 7 years of experience working with multiple funding agencies for the Tribe. During this time he has been the compliance officer ensuring grants function as they were intended and reports are finished in a timely manner.

Sylvia Vandiver, Soakogon Chippewa Community Tribal member, Tribal accountant for 12 years with strong working knowledge of all the Tribe's functions. She has detailed knowledge in Payroll and Accounts Payable.

Donna Vodar, Tribal Human Resources, has 1.5 years experience handling human resource development and compliance for the Tribe.

Tiffany McGeshick, Background Check Coordinator, has 16 years experience with the Tribe, initiating and reporting background checks on all employees for the Tribe, including the casino.

PROGRAM ADMINISTRATORS & STAFF Key Marshfield Clinic Center for Community Outreach positions support the TAP program: Center Director; Center Manager; AmeriCorps Program Manager; Northwoods Coalition Program Manager; Community Health Education Specialist and Prevention Specialists.

POSITIONS, BACKGROUND, EXPERIENCE Ronda Kopelke, Center Director has provided administrative and program oversight to Marshfield Clinic AmeriCorps program since it began in 2000. She has over 30 years experience working with multiple agencies in collaborative activities. She has been the Principal Investigator on numerous state and federal grants, has worked on national task forces, and has extensive knowledge of program development and administration.

Brian Blahnik, AmeriCorps Program Manager, has been with Marshfield Clinic AmeriCorps since its inception, has expertise in program management, event planning, and organizational development. He

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will continue to provide overall coordination and management of all aspects of the program.

Bob Kovar, TAP Prevention Specialist has unique experience working in Indian Country for more than 12 years including creating and designing the Tribal SPF SIG Grant, the project that helped each Tribe develop the prevention coalitions in their communities where TAP AmeriCorps will serve, and as the creator of the award winning Intercultural Leadership Initiative.

Denise Brickheimer-Reichert, Center Manager, has over 15 years experience in fiscal affairs, and specializes in grants management. She has responsibility for 5 departmental operating budgets and approximately 25 grant/contract budgets. She has been with Marshfield Clinic AmeriCorps since its inception and has a thorough understanding of all of the fiscal aspects involved.

Dorothy Chaney, Northwoods Coalition Program Manager, has over 15 years experience working with grassroots organizations and organizing collaborative efforts at the local level. She has been with the Center for Community Outreach since 2006. She will oversee the development and implementation of the SPF Model and the work of the prevention specialist team.

Kathy Asper, Community Health Education Specialist, joined the Marshfield Clinic team in 2008. Kathy has extensive experience providing training and technical assistance on the SPF Model with coalitions across the nation. She is a certified Prevention Specialist and associate trainer for the federal Center for Substance Abuse Prevention, SAMHSA. She will have key training and evaluation responsibilities for the program.

Prevention Specialists, have been mentoring and coaching AmeriCorps members in their roles with coalitions since the Marshfield Clinic AmeriCorps program began. They have extensive experience with out-of-school time activities and other evidence-based practices and programs.

Administrative Secretary, experience in administrative and clerical duties.

PLAN FOR SELF-ASSESSMENT OR IMPROVEMENT

The Sokaogon Tribe uses the annual audit as an outside source to determine areas that may need

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adjustments. The Tribe asks their auditors to give them an exit report and to state areas that need improvement.

PLAN FOR EFFECTIVE TECHNICAL ASSISTANCE

SECURING AND PROVIDING TECHNICAL ASSISTANCE The TAP Project will seek out any needed financial and programmatic assistance for the program through the established partnership with the Marshfield Clinic Center for Community Outreach.

Two, 1-day informational meetings for Host Site Supervisors will be held to provide information and technical assistance on the financial and program elements of the TAP Host Site Application and process. The meetings will lay the groundwork for ongoing technical assistance to coalitions involved in the program. The technical assistance that has been incorporated into the application process will be strengthened each year based on feedback from Member and host site coalition experiences.

Comprehensive systems for providing training and technical assistance to host site coalitions and Members established through the existing Marshfield Clinic AmeriCorps Program will be utilized for TAP. The Marshfield Clinic AmeriCorps Program Manager, Northwoods Coalition Program Manager, Community Health Education Specialist and Prevention Specialists will assist with the orientation, ongoing training, and technical assistance for Members, host site coalitions and supervisors. Use of workbooks, learning events, community action planning strategies and other resources associated with the SPF Model will ensure consistency and quality of approach among host site coalitions. Monthly meetings, weekly reporting systems, feedback surveys, and regular communication all lead to a successful experience for the AmeriCorps member and for each community. Annual site visits will also contribute to the overall technical assistance.

SOUND RECORD OF ACCOMPLISHMENT AS AN ORGANIZATION

VOLUNTEER GENERATION & SUPPORT

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INCREASED ORGANIZATIONAL CAPACITY The Sokaogon Chippewa Community is a community based Tribal Nation. The Tribal Council encourages employees and Tribal membership to form groups and committees to organize participation in fundraising efforts that help support various Community programs, services and ceremonies. These groups and committees use community boards to post local meetings and sign-up sheets to advertise various events to get needed volunteers. They also utilize venues such as mailings, Web Site, email, word of mouth, and local newspaper advertisement to recruit people. Identifying with Native American Tribal tradition, and the fact that we are all relation, means most of the volunteers come from the community and include many dedicated and diverse groups such as the elderly, youth and tribal employees. Volunteers have also come from outside tribes, federal and state governments and neighboring towns. The Sokaogon Chippewa Community supports their service with incentives of casino promotional giveaways, meals and lodging and the traditional tobacco gift for ceremonial participation.

ORGANIZATIONAL & COMMUNITY LEADERSHIP

LEADERSHIP AS AN ORGANIZATION & IN THE COMMUNITY For 30 years the Sokaogon Tribe stood opposed to the potential metallic-sulfide mining which would have produced more than 44 million tons of toxic waste at the headwaters of Wisconsin's pristine Wolf River, near Mole Lake. In 2005, the environmental battle ended with the Sokaogon Chippewa and the Forest County Potawatomi tribes jointly purchasing the 5700-acre mining site (formerly owned by Exxon). The Wolf River watershed includes a large portion of the state of Wisconsin and the leadership stand and actions taken by the Tribe, served hundreds of thousands of Wisconsinites living in this watershed, not to mention the millions of tourists who visit to the region annually.

The Sokaogon Tribe has long been a leader in the fight to preserve tribal sovereignty and treaty rights. Sokaogon and other Ojibwe bands in Wisconsin signed three major treaties with the United States in which they ceded their lands to the federal government. The first was signed in 1837 and the second in

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1842. These transferred the entire Ojibwe homeland in Wisconsin to the federal government. In these treaties, the Ojibwe retained the right to hunt, fish, and gather wild rice and maple sap on lands they ceded to the United States. The 1854 treaty transferred the last Minnesota Ojibwe lands to the U.S. and established land reservations for Ojibwe bands, thus ensuring their continued residence in northern Wisconsin. The Ojibwe were finally able to exercise their off-reservation treaty rights in 1983, when a federal court--the U.S. Court of Appeals for the Seventh Circuit in Chicago--asserted that Wisconsin had no rights to regulate fishing on Ojibwe reservations and, more importantly, that the 1837 and 1842 treaties guaranteed Ojibwe rights to hunt and fish off their reservations without being bound by state regulations. This decision, commonly called the Voigt Decision, was upheld by the U.S. Supreme Court that same year. Whites in northern Wisconsin were stunned by the Voigt Decision mainly because they did not understand it. They believed the federal court had given the Ojibwe the right to hunt and fish on their ceded lands. In actuality, the Ojibwe never surrendered their rights to hunt and fish on the ceded territory. In the late 1980's and early 90's, Sokaogon Tribal members bravely practiced their fishing rights under violent protests staged at boat landings organized by white protesters. Federal marshals were called in to protect Sokaogon members who prevailed in their efforts, thus re-establishing their true sovereignty. As a result, today there is an official proclamation from the Wisconsin Governor's Office declaring the Tribes of Wisconsin sovereign Nations and establishing tribal consultation policies for all State cabinet level agencies, to reflect the spirit of government-to-government relationships tribal members sought to establish.

The Sokaogon Tribal Chair is an active member on statewide organizations: the Board of Directors of the Great Lakes Inter-Tribal Council, and the Board of Commissioners of the Great Lakes Indian Fish and Wildlife Commission.

Cost Effectiveness and Budget Adequacy

CORPORATION COST PER MSY

Sokaogon Chippewa Community is proposing to recruit and retain 13 MSY in year 1, 16 MSY in year 2

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and 22 MSY in year 3. The proposed Corporation cost per MSY is \$20,881 in year 1.

This proposal requests above the maximum cost per MSY. During the planning grant it became obvious that most of the Tribes in Wisconsin are in fiscal crisis. One Tribe has reduced their annual operating budget from \$20 million to \$4 million in just the past 2 years. The cost of the cash match per member was discussed at length with each Tribe during meetings throughout the planning period. The general consensus was that there was little to no financial capacity to pay for a cash match per member higher than the \$3000 being proposed in this application. Most Tribal coalitions are made up of tribal agencies. In the non-Tribal coalitions that are part of the Marshfield Clinic AmeriCorps program, the diversity of organizations at the table allows for collaborative leveraging of funds to support the cash match for members. Most Tribal coalitions have mainly tribal agencies at their table, reducing the fund leveraging possibilities greatly since they all receive operating monies from one source, the Tribe. Most non-Tribal coalitions can go "out into their communities" for extra support. In rural Wisconsin where the Tribes are located, outlying communities are steeped in racism where the suspicion and falsehoods surrounding treaty rights, gaming and "all that money the Tribes have", make the extended-community option extremely uninviting and seemingly off-limits to Tribal coalitions. Finally, historically there have been few CNCS Tribal grantees, in part because most tribes do not yet have the capacity to manage such difficult grants, and in part because CNCS grants do not allow Tribes to expense Indirect Cost Rates to cover their administrative overhead, a common practice with all other federal grants. In passing the resolution to pursue this grant, the Sokaogon Tribal Council stipulated that they would participate only if they could cover all of their expenses.

DIVERSE NON-FEDERAL SUPPORT

NON FEDERAL RESOURCES In order to host an AmeriCorps member, tribal coalitions must provide a cash match of \$3,000 in year 1 (\$39,000). In addition to the cash match, host sites provide in-kind contributions to support the work of the AmeriCorps member in accordance to their Community Action

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Plan (i.e. supervisor time, meeting expenses, travel, supplies).

Currently, Sokaogon Chippewa Community is supporting the Tribal AmeriCorps Planning (TAP) project by providing in-kind commitments for indirect costs and staff affiliated with the program. The Sokaogon Chippewa Community will continue to support the AmeriCorps Indian Tribes program as part of their overall strategic plan.

DECREASED RELIANCE ON FEDERAL SUPPORT

INCREASED COST SHARE TO MEET/EXCEED GOALS, OR DEEPER IMPACT OR BROADER REACH

Each year, the tribal coalitions must provide a cash match in order to host an AmeriCorps member. It is anticipated that the number of MSY will be increased each program year to provide additional support to the eleven participating tribes. The increase in MSY will result in additional cash contributions for years 2 (\$48,000) and 3 (\$66,000). TAP will work with the Tribes to explore other strategies to increase the financial capacity needed as additional cash contributions are needed including: coordinating the Tribes to work with the State Of Wisconsin to divert compact dollars to the project and recruit statewide corporate sponsors and/or state, county and local organizations as underwriters of the match portion of the project.

ADEQUACY OF BUDGET TO SUPPORT PROGRAM & OUTPUTS/OUTCOMES Since the AmeriCorps Indian Tribes program will coordinate with the existing Marshfield Clinic AmeriCorps Program which is now in its 10th year, there is a huge potential for sharing resources both financial and programmatic between the two programs. The program budget includes costs for personnel (key program staff), travel (orientation, midterm training, kickoff celebration, end of year celebration, national service project) and member stipends. For combined trainings, the AmeriCorps Indian Tribes program will be able to tap into the personnel and meeting resources resulting in a more cost-efficient event.

Evaluation Summary or Plan

N/A

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Amendment Justification

N/A

Clarification Summary

Clarification Items Requested 4-29-11.

National Performance Measures: After review of the National Performance Measures we are unable to adequately meet the standards for these measures at this time.

Out of School Program Enhancement #4:

The rigor of the AmeriCorps Survey: the survey will be a retrospective survey conducted April 15-May 30 of the program year. The survey is adapted from a CDC validated survey. In addition the program will conduct focus groups to ensure quality results.

Career Enhancement Skills Performance Measure: Removed

COST/MSY - WAIVER

1. CASH & IN-KIND SUPPORT. The tribal planning grant period afforded us many opportunities to connect with the tribes. We met with prevention individuals, tribal coalitions and tribal leadership. The single largest point of discussion revolved around the expense of the cash match. In our discussions we indicated a variety of cash match amounts (e.g. comparing cash match expense for the existing Marshfield Clinic AmeriCorps of \$5,500/member and even higher for other programs). We were told directly that high cash match expenses were not going to work. Most, but not all, of the tribal coalitions are grant funded with relatively small budgets (approximately \$80,000/year) through the Tribal Strategic Prevention Framework State Incentive Grant. This grant is entering its final year in FY10. We have so far been unsuccessful in getting approval from SAMHSA for the Tribal SPF SIG funds to be used as cash match. This means that "other" dollars must be found to pay for the cash match. Most Wisconsin

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Tribes are in extreme economic distress. Resolutions of Support were garnered from the 7 participating tribes which noted a cash match contribution of \$3,000 per member.

We are unable to re-do these Resolutions of Support at this time. As additional commitment from the Tribes, we will seek approval from each Tribal government to increase the cash match to \$3,200 and \$3,500 in subsequent years. For year 1, Sokaogon has secured \$49,611 as an in-kind contribution and Marshfield Clinic has made a commitment of \$16,442. It is anticipated that in-kind contributions will increase during subsequent years.

2. PROGRAM EXPANSION. For year 1, 7 of the 11 Wisconsin Tribes have made commitments to participate. We applied for 13 members and already have demand for at least 14 from the participating tribes. As we begin the project and people see the effectiveness of members, we anticipate a rise in demand. At meetings during the planning period, all of the tribes expressed excitement that new members could be added in subsequent years of this project. The remaining 4 tribes are still connected to the project through the Tribal Advisory Team. With the help of this team, we will work to establish AmeriCorps members in these remaining 4 tribes. We have strong connections with the existing tribal prevention coalitions in these 4 tribes and are already working to engage them in the process for member placement in year 2. In addition, we are well aware of how sometimes new ideas need a chance to germinate in Indian Country and we believe, with the full support of the Tribal Advisory Team, that as the remaining 4 tribes see the benefits of being a part of this project, based on the positive experiences of the 7 participating tribes, that this will help engage them. Finally, of the remaining 4 tribes, only the Forest County Potawatomi were not fully engaged in trying to bring the Resolution of Support to their leadership. The other 3 Tribes had an active push to bring the Resolution of Support to their leadership, and we had indications of their leadership's strong support, only to run out of time. To be fair to all the Tribes, we set a deadline of January 20, 2010 for Resolutions to be passed in order to participate during

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year 1. Tribal governments understandably run on their own timetables. We also ran into elections in 2 of those Tribes which caused a change in leadership forcing us to start the process over. The processes we started in the planning grant will now be carried forward to engage the tribal leadership and seek Resolutions of Support for year 2.

3. COST PER MSY. As the number of MSY increase, we will calculate the decrease in cost/MSY as a function of two factors: 1) increases in the cash match per member each year (\$3200 in Year 2, \$3500 in Year 3) to the Tribes (it is anticipated that as tribes see the benefits of working with members they will be more inclined to leverage other resources) and 2) as capacity increases in Tribal coalitions (more people at the table), there will be new resources to support members. As the number of MSY increases in subsequent years, the cost/MSY should decrease (i.e. \$18,000 in Year 2, \$17,780 in Year 3).

4. FUNDRAISING EFFORTS. During the course of the planning period, we investigated a number of strategies that might help the tribes raise funds to help cover matching expenses. We made contacts with Wisconsin state government to learn more about the allocation of compact dollars-dollars paid by the tribes as a percentage of their gaming revenues-as a possible source of matching funds. A portion of these compact dollars are supposed to flow back and benefit geographic areas where Tribes have casinos. In some cases, the tribes pay these compact dollars directly to the state, in other cases the payment goes to the local county government. We met with one county administrator in Ashland County near the Bad River Tribe to see if he would work with the tribe to reallocate some of their compact payment back into the local prevention coalition to help support an AmeriCorps position. The administrator said this was highly unusual and that we would need to have a series of meetings with many county leaders to discuss how, or even if, this might be possible. This strategy remains pending and will be easier to rework once AmeriCorps members are on the ground and it becomes clearer what their responsibilities are to everyone.

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We spoke with the area administrator for Tribal Affairs from the Wisconsin Department, who said that the conversation regarding gaming compact dollars is a highly politicized issue in the state and needs to take place within the state budget finance committee. We have asked the tribes of the Wisconsin Native American Prevention Counsel if they would help try and push the issue of using compact dollars for their match. Again, the politics of this is very sensitive-tribal representatives defer all conversation about compact dollars to their tribal leadership. The Tribes paid \$112.7 million to the state of Wisconsin, so it is indeed a very political issue and will take some time for any resolution with regards to reallocation of these funds to AmeriCorps, but it remains a pending possibility.

We tried to encourage Tribes to introduce us to their most prominent business partners so they could ask if these business partners might be interested in underwriting the costs of an AmeriCorps member. We were unable to find any interested business partners during the planning period. The Tribes made very little effort to recruit business partners-again deferring to their leadership who, understandably, has some fairly strict rules regarding tribal members soliciting business partners. This will take some time to develop processes in order for this strategy to work but this effort remains pending.

Finally, each tribe has begun to identify local service clubs, church groups, individual donors, small businesses, etc. that might be interested in underwriting partial cash match expenses. This effort is also pending.

5. FUNDRAISING PLAN. Year 1-Strategy One: Work with local prevention coalitions to map out community service clubs and organizations, churches and other giving organizations. Develop presentations about AmeriCorps members' current and potential work with coalitions, and then follow up with solicitation by coalition members for funds to support member work. Year 1-Strategy Two:

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Work with coalition members to formally engage tribal leadership in recruitment of major business partners as underwriters for AmeriCorps. Year 1-Strategy Three: Continue conversation with state Tribal Affairs to learn what the process would be for a formal request to reallocate compact dollars. Under guidance of the TAP Advisory Team and coalition leaders, begin to educate tribal leadership about this process. Year 1-Strategy Four: For those Tribes that make payments of compact dollars direct to county governments: facilitate meetings between coalition leadership and county leadership to understand the process for requesting a reallocation of compact dollars. Year 1-Strategy Five: Pursue securing permission from various federal granting agencies to use those dollars as match to AmeriCorps (i.e. SPF-SIG, Drug Free Communities Support Program).

Year 2-Strategy One: Continue working on all strategies outlined in Year 1. Year 2-Strategy Two: Compile data on impact of member service during the first year of TAP. Use this data to apply for funding from several community foundations that require track record (e.g. Forest County Potawatomi Community Foundation, Shakopee Community Foundation).

Year 3-Strategy One: Continue to develop all strategies of previous years. Year 3-Strategy Two: Work with the tribes to facilitate possible new funding streams with the state prevention leaders.

WAIVER REQUEST

B1. LACK OF RESOURCES AT LOCAL LEVEL. Wisconsin Tribes depend heavily on gaming for revenues to run their governments. According to a recent study, the Tribes of Wisconsin saw gaming revenues fall by 2% last year. The recession is largely to blame with many people watching their discretionary spending very closely. The tribes are required to pay compact dollars, based on a percentage of their net revenues, to the state of Wisconsin each year. The amount paid to Wisconsin

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during the past year in fact rose from \$75.5 million to \$112.7 million due mainly to renegotiated gaming compacts during this period. The net result is that tribes are reacting to drops in business by imposing cutbacks in spending, salaries and hiring throughout their communities. Even in better times, gaming income does not always offset the extreme economic plight of tribal members. A 2005 US Department of Interior report shows that even when tribal people are employed they are still living below poverty guidelines. In Wisconsin, data showed that in some cases 100% of those employed were living below the poverty guidelines. The number of unemployed as a percentage of the work force for the 7 Wisconsin Tribes participating in TAP in year 1 are as follows: Lac du Flambeau (59%), Lac Courte Oreilles (66%), Ho-Chunk (70%), Red Cliff (62%), Sokaogon (93%), Stockbridge-Munsee (25%), Menominee (44%).

B2. UNIQUENESS OF LACK OF LOCAL RESOURCES. Wisconsin Tribes are uniquely lacking due to the narrowness of their business diversity. Gaming is the single largest source of income for all tribes. Some tribes have casinos in highly populated areas where gaming income is much higher than smaller casinos in rural areas on reservation lands. Before gaming, tribes were uniformly poor. Today, the tribes with smaller gaming operations (like Sokaogon), while better off than pre-gaming, still struggle with having enough revenue to run the growing infrastructures in their communities. The lack of tribal members with necessary skills to run new government enterprises further complicates matters.

B3. EFFORTS TO RAISE FUNDS. (see questions 4 & 5 above)

B4. AMOUNT OF MATCHING RESOURCES. We have negotiated a cash match of \$3000 per member with each of the 7 participating tribal governments. In year 1, we expect to raise \$39,000.

C1. REQUESTED MATCH FOR CORPORATION WAIVER. We are requesting the Corporation to waive \$6,500 per member for the 13 members (\$84,500).

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C2. REQUESTED LEVEL OF MATCH. (see Budget and Budget Narrative)

BUDGET:

1. BUDGET CHANGES

- a) The budget has been adjusted to reflect \$19,500 per MSY.
- b) Cuts were made to specific line items as to not jeopardize the overall project.
- c) Site supervisor time is an in-kind contribution and is not included in year 1. For year 2, a TAP computer-based tracking system will be implemented to not only track member hours but to calculate the amount of in-kind time being contributed by the site supervisors. During years 2 and 3, the budget will include an estimate of time (Grantee Share) for site supervisors.
- d) Marshfield Clinic Center for Community Outreach staff mentioned in the narrative have been included in the budget as a Grantee Share (under Contractual).
- e) Fringe benefit rates have been included in the budget narrative. The fringe benefits for Marshfield Clinic Center for Community Outreach (under Contractual) include social security, health insurance, dental insurance, group term life, long-term disability, short-term disability, retirement plan, 401(k), workers compensation, travel accident insurance).
- f) The cost of member travel outside of program required trainings is an assumed cost by the local coalitions and is an expectation of their host site placement.
- g) The .50/mile reimbursement rate has been included in the budget for Member Travel.
- h) The AmeriCorps staff team has been meeting with designers to create service gear which includes both AmeriCorps and tribal logos.
- i) Meeting costs previously reflected in the contractual section have been eliminated in order to reduce the MSY to \$19,500.

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j) Member Training costs include orientation (September 2010) and midterm training (January 2011) for the members.

k) The cost of criminal background checks is included in the budget under Other Program Operating Costs.

l) Printing costs will be incurred for AmeriCorps applications, member handbooks, site supervisor handbooks, etc.

m) The TAP program staff will develop a computer-based system to be used to track member hours. In addition, site supervisors will be asked to track hours as an in-kind contribution to the project.

n) Sokaogon Chippewa Community is contributing \$49,611 in-kind (indirect cost). The Marshfield Clinic Center for Community Outreach will be contributing approximately \$16,442 in-kind (personnel).

During year 1, it is anticipated that there will be \$39,000 of tribal cash contributions to support the project (\$3,000 per member).

2. INDIRECT COST RATE. The federally approved indirect cost rate agreement has been submitted by Tim Murphy, Sokaogon Chippewa Community.

PROGRAMMATIC:

1. CRIMINAL HISTORY CHECK REQUIREMENT. The Sokaogon Tribe will be provided with the necessary personnel information on the Marshfield Clinic staff members supporting the Tribal AmeriCorps grant to allow Sokaogon to complete the required background checks as directed by Corporation. All Tribal AmeriCorps members will complete a pre-screening document which will provide the necessary information for the Sokaogon Tribe to complete background checks in accordance with the Corporation requirements during the enrollment process.

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2. TRIBAL REPRESENTATION. The board is made up of 100% tribal members including:

Martin Gordan - Red Cliff Tribe; Dr Steve Dakai - Menomonee Tribe; Ken Ninham - Oneida Tribe; Lydia Vitort - Stockbridge Munsee Tribe; Pat Ustianowski - Lac Du Flambeau Tribe; Mary Ann McGeshick - Sokaogon Tribe; Joe Corbine Sr. - Bad River Tribe; Shelley Hammes - St Croix; Mike Williams - Lac Courte Oreilles; Terry Greendeer - Ho Chunk; Sharon Thompson - Ho Chunk; Jon Platson - St Croix.

Support from associates who attend the meetings will include Bob Kovar - Marshfield Clinic; Dottie Moffat - White Pine Consulting; Nancy Kendall - Wisconsin Clearinghouse for Prevention Resources.

3. ALLOCATION OF COSTS. The Sokaogon Chippewa Community and Marshfield Clinic will maintain separate accounting for each grant. The fiscal agent for this grant will be Sokaogon. Collaborative events will be coordinated by the Marshfield Clinic and the Sokaogon tribe will be billed in accordance with their percentage of attendees.

4. SERVICE TO TRIBES. The Tribal AmeriCorps program and members will serve exclusively within tribal nations and the Marshfield Clinic AmeriCorps program will serve exclusively non-tribal organizations. The current Marshfield Clinic AmeriCorps program has a history of placing members with community coalitions, some of which have occasionally been from tribal nations. For example, one of the 75 Marshfield Clinic AmeriCorps slots for next year has been promised to a tribal nation, the Minobimaadiziwiw Coalition of the Lac du Flambeau Tribe. Especially since funding is pending for TAP, we would like Marshfield Clinic to honor this commitment. At this point it would be hard to switch this member slot to TAP because all of the TAP slots are spoken for. In future years, the TAP and Marshfield Clinic programs will coordinate to ensure that Marshfield Clinic AmeriCorps members are placed exclusively with non-tribal coalitions. Since member recruitment has never been a challenge for the Marshfield Clinic program, we do not anticipate that this will be a problem. Sokaogon Nation and

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Marshfield Clinic understand and support the importance of both programs tracking the progress of their members and the accomplishments of the performance measures separately and distinctly. The unique aspect of collaboration among these programs will be a model for future programs.

5. VOLUNTEER RECRUITMENT. The Marshfield Clinic volunteer resource coordinator is dedicated to supporting the full time service of the Marshfield Clinic AmeriCorps members around the issue of volunteer recruitment and mobilization. As with all AmeriCorps programs, collaboration and the sharing of information regarding this topic will be made with other AmeriCorps programs around the state. It is not the intention of the Marshfield Clinic AmeriCorps program to dedicate any MSY to support the Tribal AmeriCorps program in volunteer resource coordination, instead the intention was to provide collaboration around resources in this area.

6. TRAVEL FOR COALITION MEETINGS. Tribes agreed during the planning grant period that costs for member travel to coalition meetings will be assumed by the local coalitions and is an expectation of their host site placement.

7. MEMBER ACTIVITIES will support the following (for example):

NEEDS ASSESSMENT. Assist coalitions in conducting a needs assessment to gather both qualitative and quantitative information related to substance abuse issues and related problems within the coalition's defined region. Examples of specific member activities include conducting environmental scans, conducting key informant interviews, assisting with focus groups, and collecting data from local law enforcement.

BUILDING CAPACITY. Using the 12 key sectors identified by SAMHSA, members will assist coalitions in conducting community mapping to identify potential coalition members and subsequently recruit

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them to serve as a volunteer on the coalition. Other capacity building exercises include organizing town hall meetings and other events designed to raise awareness of the coalition's activities as a strategy to solicit active involvement and support of additional community members.

STRATEGIC PLANNING. Using the information gathered in the assessment phase, the coalition will work to develop a logic model that identifies appropriate strategies to address intervening variables related to local substance abuse. Members will actively participate in strategic planning, the development of a logic model, and in identifying appropriate evidence based strategies. Members may be requested to conduct research into evidence based policies, practices, and programs, will be required to attend coalition meetings and strategic planning sessions, and may be assigned to any work groups or committees that are outcomes of the planning process.

IMPLEMENTATION OF EVIDENCE BASED STRATEGIES. Based upon the strategic plan of the coalition, the implementation of activities may be geared toward the reduction of alcohol, tobacco, or drug use -- or a combination thereof. Members play an active role in implementing the plan of the coalition, including taking part in public awareness activities and campaigns, providing direct service and homework support to youth as a strategy to provide support and alternatives to substance abuse, assist in youth engagement activities including TAP surveys, community scans, alcohol or tobacco compliance checks, and other initiatives identified by the coalition as being effective in combating local substance abuse among youth.

8. ALLOCATION OF MEMBER TIME FOR CAPACITY BUILDING & DIRECT SERVICE. Member service time is dictated by the specific needs of the coalition as outlined in the member service plan which is submitted to the program staff for evaluation and technical assistance prior to the enrollment and placement of members. In addition the tribal advisory team will review and make recommendations

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for each member service plan. Coalition site supervisors will provide daily supervision and direction to the members based on the member service plan and coalition needs. Members will be supported through direct supervision by site supervisors and mentoring provided by the Marshfield Clinic prevention staff.

Historically, through the experience of the Marshfield Clinic AmeriCorps program, there has been an almost equal division of time spent between conducting activities related to building the capacity of the coalition -- such as volunteer recruitment, committee meetings, coalition meetings, public awareness events and activities designed to recruit coalition members -- and the direct service component of providing homework assistance, conducting out of school time activities in the form of both educational and recreational activities. Each member service plan will outline in detail the priority areas of each individual coalition.

9. TRIBAL SPF-SIG VALUE ADDED. The purpose of the Tribal SPF-SIG grant was to engage tribal communities and assist them in forming substance abuse prevention coalitions. To that end, the Tribal SPF-SIG was a success. One pitfall with the infrastructure as developed, however, was a sustainable base of active volunteers and community members to implement and sustain the work being done. TAP adds value by supporting the existing coalitions to get things done through AmeriCorps members supporting their work. Through the assured active involvement of members in the recruitment of coalition members, being an active and engaged coalition member, and through the provision of direct service to youth, the TAP member is an essential element in bringing to life the work begun with Tribal SPF-SIG.

10. SELF ASSESSMENT & CONTINUOUS IMPROVEMENT. The Sokaogon Tribe uses the annual audit as an outside source to determine areas that may need adjustments. The Tribe asks their auditors to give them an exit report and to state areas that need improvement.

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The Marshfield Clinic AmeriCorps program will share lessons learned from its 9 years of operation to assist the TAP program in the development of systems to track and monitor progress. The AmeriCorps program will continue as a standing agenda item on the Tribal State Collaboration for Positive Change meetings (TAP Advisory meetings) as well as at weekly Marshfield Clinic staff meetings where managers and prevention specialists with expertise in out-of-school programming, coalition development, substance abuse prevention, and fiscal issues assist in monitoring and refining AmeriCorps operations.

Tribal AmeriCorps staff will review outputs and outcomes from the performance measures on an ongoing basis via training attendance rosters, technical assistance logs, volunteer tracking systems, member and youth survey instruments, and AmeriCorps member evaluations. The collaborating community health education specialist, who is experienced in key components of program evaluation, will assist in monitoring process and outcome evaluation components; facilitate focus groups of members, site supervisors and host site coalition members; provide follow-up contacts with members, host site coalitions and site supervisors regarding program outputs and outcomes as needed; and develop evaluation reports for dissemination. An overall program evaluation report will be completed by the Tribal AmeriCorps prevention staff, assessing both process and outcome components for the 6 identified performance measures: Strengthening Community Coalitions, Volunteer Mobilization, Out-of-School Time Program Enhancement, Disaster Preparedness, Career Enhancement Skills and Citizenship Proficiency.

Two internal communications approaches will help staff identify strengths and weaknesses, resolve problems, gather and provide feedback on a regular basis: 1) members and site supervisors will have ongoing access to the Tribal AmeriCorps staff via email and phone, and 2) weekly service reports will provide a venue for members to provide feedback to the Tribal AmeriCorps staff and host site

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supervisors.

Sokaogon will work with the Tribal AmeriCorps staff and the TAP Advisory Board in an evaluation of the program utilizing a Wisconsin AmeriCorps survey template. Member survey results will help all parties fine tune programmatic training and operations.

11. SITE SUPERVISORS. Site supervisors are assigned and agreed upon by the coalition to monitor members during the entire service period which includes daily direct supervision, monitoring of hours and service plan and approval of member timesheets. The site supervisor has a vested interest in ensuring the member has a successful term of service. Supervisors will assist and mentor members on a day to day basis dealing directly with issues around member development, service plans and more.

12. EXPANDING REACH OF PROGRAM IN THE COMMUNITY. The fundamental premise of the public health model of prevention, upon which the Strategic Prevention Framework is based, is that the health of the community will improve when there is a critical mass of community members actively working to address the problem. Broad based community coalitions are the most effective vehicle to bring key community sectors to the table to solicit buy in and active involvement in the work being done. The community coalition then works to build an increase in support from the community at large. An example from the Marshfield Clinic AmeriCorps program that may be replicated by the TAP program is a Parent Network. Several coalitions within the Marshfield Clinic AmeriCorps program have established parent networks where parents, legal guardians, or other key stakeholders such as educators, sign a pledge to provide a safe alcohol free environment for youth. In these programs, the AmeriCorps members play a key role in recruiting parents and others to join the network. In one community, the Marshfield Clinic AmeriCorps members went to schools, community group meetings, and other events to successfully engage almost 500 parents in the network. This project would not have been possible

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without the AmeriCorps member. Through the ongoing engagement of community members in the programs and initiatives of the coalition, momentum is gained in the work to achieve positive and lasting results in relation to the problems associated with substance abuse.

PERFORMANCE MEASUREMENT (see Performance Measures)

Continuation Changes

NEW SITE LOCATIONS.

YEAR 2 CHANGES The original goal of TAP was to have members serving in all 11 Tribal nations of Wisconsin. A formal Resolution of Support from each Tribal government is a prerequisite for participation in TAP. Eight Tribes passed such resolutions and participated in Year 1. Thirteen members were placed in coalitions in these communities. There is progress to report on the three remaining Tribes. On January 4, 2011, the Bad River Tribe of Lake Superior Chippewa Indians passed a Resolution of Support to participate in Year 2. Currently, The Forest County Potawatomi Tribe has the resolution in bureaucratic process, with strong support from their prevention staff, and expects to pass a formal Resolution of Support within weeks. The Oneida Nation Business Committee has positively recommended participation in TAP to the Tribal Council, where the resolution is awaiting action. One member will be placed at each of these three sites, increasing the number of TAP members to 16 in Year 2.

JUSTIFICATION FOR EXPANSION TO NEW SITES.

Expansion to new sites is justified on several levels. 1) Tribal governments are actively requesting to participate in AmeriCorps through their Resolutions of Support. Honoring Tribal governmental requests builds strong support for TAP from the top down, critically important in enhancing current efforts and building future sustainability. 2) Substance abuse remains a high priority in all Indian

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communities with documented disproportionate high rates of use among Indian people as a percentage of the general population. 3) There are existing substance abuse prevention coalitions in the expansion communities that will provide the organizational capacity to support new members. 4) Expansion members will become part of the current TAP family, where members are forming a close-knit team, along with the TAP Tribal Advisory Board, to explore and discuss inter-tribal trainings and share "activities that work" in tribal communities. Expansion members, like current members, will serve to reduce substance abuse in communities by building capacity in coalitions and the community as well as serving youth through out-of-school-time activities. 5) The strong working partnership that has been forged between the Sokaogon Chippewa Community and Marshfield Clinic, where 95 members are currently serving in their own AmeriCorps programs, has built the organizational foundation from a grantee perspective needed to manage a larger program. Cost effective sharing of resources within AmeriCorps guidelines have been developed between programs for member training and networking. As the program expands this collaboration should continue to grow and benefit both programs.

EXPLANATION OF CHANGES IN THE BUDGET.

The budget for Year 2 reflects costs for 16 members. Additional Member Travel has been included in the budget for members to attend TSCPC meetings. The cash match contribution from participating tribes will be \$3,200 per member.

JUSTIFICATION FOR ANY INCREASE IN REQUESTED COST PER MSY.

YEAR 2 CHANGES The MSY for Year 2 is \$18,653. The MSY for Year 1 was \$19,500. The original application stated a desire to decrease the cost per MSY in Year 2 to \$18,500. A request was made to exceed the maximum MSY. Tribal coalitions and governments clearly stated the following concerns for being able to raise funds for cash match: fiscal distress among the Tribal governments; lack of philanthropy towards Tribes in Wisconsin; lack of local capacity to raise cash match funds; scarcity of

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cash match funding from organizations within the coalition since they are all supported by the Tribe; racism in outlying communities; and, the perception that Tribes are flush with money from their casino operations, providing barriers for Indian people to ask for financial support from non-Indian communities. These issues all still exist today. In Year 1, TAP staff developed a working strategy to develop collaborative partnerships to increase chances for leveraging funds for cash match. This included a campaign to raise awareness about TAP across the state. TAP informational materials were sent and phone calls made (note: not to solicit funds) to try and develop working partnerships between TAP and statewide businesses and/or organizations. State and federal legislators were contacted, as well as tribal leaders, community foundations across the state and even some of the businesses that service tribal enterprises. The idea was that once there was a partnership table to come to, the Tribal coalitions and/or the Tribes themselves could develop these relationships to build sustainability for TAP. Inquiries were made in Madison regarding compact dollars, money the Tribes send to Wisconsin state government as a "tax" on gaming revenues, that are supposed to come back to support communities surrounding Tribal casino operations. Unfortunately, to date no one has emerged as a potential partner and compact dollars remain a political football tossed between the sovereign Nations and the State of Wisconsin legislature.

To further complicate the cash match issue, TAP staff made inquiries beginning in April 2010 for using federal dollars as part of the cash match from a large SAMHSA Strategic Prevention Framework State Incentive Grant that the Tribes received 5 years ago. It wasn't until December 2010, after many emails and phone calls from TAP staff, that an email was sent saying the Tribes could not use those funds for any part of the cash match. The difficulty in obtaining the answer regarding cash match from just one federal agency underscores how difficult this grant is for Tribes. Factor in the historic general mistrust of the federal government that exists in Indian Country and it becomes clear why most Tribal people will not spend a great deal of time "bugging" a federal agency to get a determination on funds available for a cash match. So for the Tribes, who receive and operate numerous federal grants annually, a method

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needs to be developed to make sure Tribes take advantage of possible federal match opportunities.. Therefore, in addition to trying to find those statewide partners, TAP staff is initiating a new strategy to make the Tribes more aware of federal agencies that have traditionally worked well with CNCS grantees when it comes to allowing use of their funds for cash match. CNCS project officer has been asked to supply TAP program with a list of those agencies that will then be shared with Tribal leadership. Each Tribe will then be able to monitor their portfolio of federal grants with an eye to those under spent funds from those agencies that typically allow for match.

Finally, as TAP members accumulate more service hours in their communities, other agencies and organizations within those communities are beginning to understand the value of AmeriCorps member placement. We have had multiple requests for new members from new sites within the Tribal coalitions for 2011-2012. The demand for new members will surpass the awarded number of MSY in Year 2. The hope is that this demand empowers Tribes to actively search for sustainability within their own budgets and elsewhere to build TAP into the future.

PERFORMANCE MEASURES CHANGES

Note that the performance measures have been updated for 2011-12 to reflect the change from 13 to 16 MSY. Also, since the number of participating Tribes is changing the wording has been changed from "seven tribal coalitions" to "participating tribal coalitions."

PLANS FOR IMPROVING ENROLLMENT, RETENTION, OR OTHER COMPLIANCE ISSUES.

Currently, all 13 slots for members have been filled. One member left the program in November to take a full-time job, and that slot was subsequently refilled. To date, TAP enrollment is 100% and retention is 92%.

The reality of tribal people serving as AmeriCorps members creates some unique challenges for the TAP team. Some TAP members have come to the program with understandable issues involving poverty,

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substance abuse, domestic abuse, single-head of household families, grandparents raising grandchildren, poor access to technology, few computer skills and many other complicated issues that reflect life on the reservation. TAP member retention depends largely on daily interactions between program staff and members. The TAP Tribal Advisory Board, made up of behavioral health care professionals from all 11 Tribes has also stepped up to provide their help and expertise. One member is currently receiving counseling from an Advisory Board member for personal issues, while other members have received advice from Advisory Board members on dealing with extremely difficult issues with youth back in the communities they serve. The TAP Advisory Board, along with Marshfield Clinic staff, are working on the development of a process to be able to connect with members to provide whatever help they may need, whether it is service related or personal. In addition to the daily interactions with program staff, other items being discussed include development of a mentor/advisor help line and periodic WebEx or teleconference calls. An example of this interaction includes TAP members attending Tribal State Collaboration for Positive Change Coalition meetings to discuss strategies with the TAP Tribal Advisory Board. The overall focus is on member success in their service and in their lives.

Enrollment and retention are also affected by the ability of the local coalition to raise the cash match for their members. One option going into the future is to work more closely with Tribal governments to educate them about the availability of cash match from federal grants they may procure. TAP staff has asked for help from CNCS staff to identify those federal agencies that have traditionally worked with CNCS grantees, with the least amount of bureaucratic red tape, to allow federal funds for match. TAP staff will make this list available to Tribal leadership and grant writers so they may more effectively monitor local availability of federal funds that could be used for the TAP match.

Recruitment is another process targeted for improvement in Year 2. Host site supervisors will receive additional training in the recruitment process, specifically in hosting interviews for applicants that explain in greater detail: the sacrifices members make; expected hours to be served; process for

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resolving member issues; local chain of command; commitment to the program; where to advertise for position openings; and how to decide which applicants are the best candidates.

Performance Measures

SAA Characteristics

- AmeriCorps Member Population - None
- Geographic Focus - Rural
- Geographic Focus - Urban
- Encore Program

Priority Areas

- Education
- Healthy Futures
- Selected for National Measure*
- Selected for National Measure*
- Environmental Stewardship
- Veterans and Military Families
- Selected for National Measure*
- Selected for National Measure*
- Economic Opportunity
- Other
- Selected for National Measure*
- Selected for National Measure*

Grand Total of all MSYs entered for all Priority Areas 13

Service Categories

- Other Education Primary Secondary
- Social Services Planning & Delivery Systems/Community Organization Primary Secondary
- Mentoring Primary Secondary

Strengthening Community Coalitions

Service Category: Social Services Planning & Delivery Systems/Community Organization

Measure Category: Strengthening Communities

Strategy to Achieve Results

Briefly describe how you will achieve this result (Max 4,000 chars.)

Members will support and assist local coalitions in planning and implementing environmental strategies that assist in the reduction of substance abuse

Results

Result: Intermediate Outcome

As a result of member efforts, 7 of 8 coalitions will develop infrastructure and begin to implement one of the four following environmental strategies to reduce substance abuse in their communities:

Parents Who Host Lose The Most; Prescription Drug Initiative; Parent Networks and Youth Engagement.

Indicator: Coalitions implementing one of the four strategies

Target: Host site coalitions

Target Value: 7

Instruments: Coalition environmental strategy progress checklist. At the end of each year, Host Site Supervisor, member and TAP staff will review the progress of the coalition with regards to their strategy. We will

Result: Intermediate Outcome

use this instrument to design the next year's member service workplan so there is continuity from one year to the next.

PM Statement: As a result of the members service, 7 of 8 coalitions will develop infrastructure and begin implementation of one of four environmental strategies to reduce substance abuse (Parents Who Host Lose The Most; Prescription Drug Initiative; Parent Networks and Youth Engagement.

Prev. Yrs. Data

Result: Output

As a result of members efforts, coalitions will build capacity to develop infrastructure and implement one of several strategies to reduce substance abuse in the community. For example: members working with coalitions to develop a Parent Network will be involved with committee development, logistics and planning for Parent Network dinners/meetings, managing the parent network database, organizing speakers, etc.

Indicator: Coalition environmental strategy progress checklist

Target: Host site coalitions

Target Value: 7

Instruments: Coalition environmental strategy progress checklist

PM Statement: As a result of member service, 7 of 8 coalitions will develop infrastructure and begin implementation of one of four environmental strategies to reduce substance abuse (Parents Who Host Lose The Most; Prescription Drug Initiative; Parent Networks and Youth Engagement.)

Prev. Yrs. Data

Out-of-School time Program Enhancement

Service Category: Mentoring

Measure Category: Needs and Service Activities

Strategy to Achieve Results

Briefly describe how you will achieve this result (Max 4,000 chars.)

Research shows that quality well attended out of school programs significantly reduce the uptake of alcohol and drug use among youth. Protective factor research shows that developing meaningful relationships between youth and adults also reduces youth involvement in substance abuse. Members will develop relationships with youth in selected out-of-school time programs.

Results

Result: Intermediate Outcome

Youth served will report increased meaningful relationships with adults

Indicator: Increased meaningful relationship with adults

Target: Percent of youth served who report increased meaningful relationships with adults

Target Value: 70%

Instruments: Youth Survey

Result: Intermediate Outcome

PM Statement: 70% of youth served will report increased relationships with adults on the youth survey as a result of member service.

Prev. Yrs. Data

Result: Output

Youth will develop meaningful relationships with an adult

Indicator:

Target: Youth receiving direct service in out of school time programs

Target Value: 120

Instruments: AmeriCorps Youth Survey

PM Statement: Members will provide direct service to youth in out of school time programs resulting in 120 youth indicating an increase in meaningful relationships with an adult as indicated in the AmeriCorps Youth Survey

Prev. Yrs. Data

Required Documents

Document Name

Status

Evaluation

Not Applicable

Federally Approved Indirect Cost Agreement

Already on File at CNCS

Labor Union Concurrence

Not Applicable