

2009/10 Tobacco-Use Prevention Education (T.U.P.E.) Competitive Grant Annual Report

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County: Riverside

LEA Name: Hemet Unified

CDS Number: 33670820000000

Grant ID: E209-019

Cohort: E Tier 2

1A. Please indicate below the programs implemented under this grant.

Approved Program List

All Stars	Not implemented
Botvin's Life Skills Training	Implemented
Keepin' It Real	Not implemented
Minnesota Smoking Prevention Program	Implemented
Personal/Social Skills Lessons: The Missing Link	Not implemented
Positive Action	Not implemented
Project Alert	Not implemented
Project Northland	Not implemented
Project SUCCESS	Not implemented
Project TND (Towards No Drug Abuse)	Implemented
Project TNT (Towards No Tobacco Use)	Not implemented
Too Good for Drugs	Not implemented
Triple T (Teens Tackle Tobacco) Project	Not implemented

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1B. Please indicate below the number of students, projected and actual, who participated in the

Grade	Projected Students	Actual Students
Grade 6	1650	1650
Grade 7	1633	1633
Grade 8	1698	1698
Grade 9	1634	1634
Grade 10	1590	795
Grade 11	1377	687
Grade 12	1163	582
Non Traditional	319	319
Grade Total	11064	8998

1C. Please indicate below the number of students, projected and actual, who

Ethnicity	Actual Students
American Indian or Alaskan Native	90
Asian	180
Pacific Islander	90
Filipino	90
Hispanic/Latino	4049
African American	720
White (not Hispanic)	3689
Multipe or No Response	0
Total	8908

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Comments related to General Instruction (Question 1)

No comments

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For 2A., 2B., and 2C. indicate the names of programs, activities or strategies **not** listed in question 1, which were offered to students in the general population by providing the number of student projected and actually participating in each strategy.

2A. Non-Research-Validated curriculum based programs (e.g., LEA adopted health curricula, lessons addressing specific populations, etc.)

Program/Strategy Name	Number of Projected Students	Number of Actual Students
Across Ages	0	0
Caring School Communities	0	0
Decisions for Health Series	0	0
Guiding Good Choices – Families That Care	0	0
Hands Off Tobacco! Series	0	0
Health and Wellness Series	0	0
The Missing Link in Prevention in High School	0	0
Project ABCD (Analyze, Beware, Create, Disseminate)	0	0
Project ALIVE! (Arts Leading Into Vital Education)	0	0
Project SCAT (Schools and Communities Against Tobacco)	0	0
State-Wide Indian Drug Prevention Program	0	0
Stay On Track Series	0	0
Teen Health Course Series	0	0
Too Good for Drugs and Violence	0	0
Other? Please specify:		
None		

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2B. Non-curricula activities (e.g., Teens Kick Butts, Teens Kick Ash, poster contests, etc.)

Program/Strategy Name	Number of Projected Students	Number of Actual Students
Great American Smoke Out	500	500
Red Ribbon Week (Tobacco focus)	1500	1500
Teens Kick Butts / Ash	0	0
Schoolwide contests*	0	0
Assembly Speaker^	0	0

Other? Please specify:

None

*Provide the name of the contest/s:

^Provide the name of the speaker/s:

2C. TUPE Specific Youth Development Activities (e.g., STAKE Act “stings”, local community tobacco control ordinance development/enforcement, media literacy, media production to counter tobacco industry influence.)

Program/Strategy Name	Number of Projected Students	Number of Actual Students
STAKE Act “stings”	0	0
Tobacco control ordinance development/enforcement	0	0
Peer Educator	70	35

Other? Please specify:

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Comments related to General Activities (Question 2)

No comments

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Intervention Programs

3A. Please indicate which Intervention Programs were implemented. For each program offered provide the number of identified and served tobacco-using students.

Program/Strategy Name	Number of students <i>identified</i>	Number of students <i>served</i>
Project Life	0	0
Smokeless Schooldays: Smokeless Saturday School	50	700
Intervention with Teen Tobacco Users (TEG)	0	0
Residential Student Assistance Program	0	0
Tobacco-Free Generations	0	0
Other? Please specify: None		

Cessation Services

3B. Please indicate which Cessation Services were implemented. For each program offered provide the number of identified and served tobacco-using students.

Program/Strategy Name	Number of students <i>identified</i>	Number of students <i>served</i>
Adolescent Smoking Cessation - Escaping Nicotine and Tobacco (ASCENT)	0	0
Enough Snuff: A Guide for Quitting Smokeless Tobacco	0	0
Helping Teens Stop Using Tobacco (TAP)	50	50
I QUIT	0	0
I Decide: Teen Tobacco Cessation	0	0
California Smoker's Helpline	0	0
Project EX: Teen Tobacco Use Cessation Program	0	0
Other? Please specify:		

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Comments related to Intervention and/or Cessation (Question 3)

(1) Smokeless Schooldays: Smokeless Saturday School was provided in a modified format to all student referred for Saturday School at the high school level. This enabled the program to reach a broader range of at-risk students with quality tobacco education from the district's Tobacco Intervention Specialist than would have been referred as tobacco policy violators to the Smokeless Saturday school program. Past experience had demonstrated that about half of students referred for Smokeless Saturday School failed to appear, and ended up receiving a traditional discipline referral.

(2) Though we explored changing cessation curricula from TAP to project Ex, the Tobacco Intervention Specialist found that since our cessation groups are relatively small, the TAP materials were more appropriate.

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Pregnant Minor/Minor Parent Services

4A. Please provide below the number of parenting and/or pregnant minors who were identified and served.

Category	Number of students
Number of parenting and/or pregnant minors identified	45
Number of parenting and/or pregnant minors served	45
Number of parenting and/or pregnant minors served in school based programs	25
Number of parenting and/or pregnant minors referred to community programs	20

LEA Identified Targeted Populations

4B. Please identify all populations for which the LEA has provided activities or services to meet the specific needs of that population by providing the number of students participating in these activities or receiving services. You may also add groups not on the list below.

How many students in the targeted populations received or participated in:

Population	Culturally appropriate curriculum	Culturally appropriate supplemental Activities
African American	0	0
Hispanic/Latino	0	0
Native American	0	0
Asian-Pacific American	0	0
Non Traditional Students*	0	0
Other:		
Other:		
Other:		

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Comments related to Targeted Populations (Question 4)

The LEA is working to make sure specific populations are being included in intervention services, but has not provided any specifically-delineated culturally appropriate curriculum or supplemental activities.

We are coordinating with the Tribal TANF in providing services for Native American students in our service area.

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Staff Development or Tobacco-use Prevention Training

5A. Please indicate below the types of training offered to staff and the number of staff that participated in the training.

Training Type	Classified	Certificated
Trained to deliver program activities	2	95
General TUPE information	30	75
Other: California Healthy Kids Survey results	400	600

Parent Training

5B. Please indicate below the types of trainings offered to parents and the number of parents who participated in the training.

Training Type	Number of parents receiving each type of training
General TUPE information	35
Other: CHKS data	75
Other:	
Other:	

Community Involvement

5C. Please indicate below, by entering a “Yes” or “No” in the boxes, the types of activities offered in collaboration or coordination with LEAs, community agencies or other organizations.

Activity Type	LEA	Community Agency	Other
Lesson Implementation	Yes	No	No
Supplemental Activities	Yes	No	No
Community Health Fairs	No	Yes	No
Other: (specify below)			
Referral to adult tobacco cessation services		Yes	

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Question 5: Comments related to Training

No comments