

2011/12 Tobacco-Use Prevention Education (T.U.P.E.) Competitive Grant Annual Report

1. Contact Information

Name: Debbie Burnette

LEA Name: Millbrae School District

Cohort: E Year: 2011/12

County: San Mateo Phone: 650-697-5693

Email: Intentionally left blank

2. Which of the programs listed below were implemented under this grant during the 2011/12 year?

Botvin's Life Skills Training	No
Keepin' It Real	No
Minnesota Smoking Prevention Program	No
Project Alert	No
Project Northland	No
Project SUCCESS	No
Project TND (Towards No Drug Abuse)	No
Project TNT (Towards No Tobacco Use)	No
SPORT	No
State-Wide Indian Drug Prevention Program	No

3. Comments pertaining to question 2 are located in the appendix. (Optional)

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4. How many students identified in question 2 during the 2011/12 school year?

		Number of Participating Students
Grade 6	250	250
Grade 7	250	250
Grade 8	250	250
Grade 9	0	0
Grade 10	0	0
Grade 11	0	0
Grade 12	0	0
Non Traditional	0	0
Grade Total	750	750

5. Comments pertaining to question 4 are located in the appendix. (Optional)

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6. Which of the non-research-validated curriculum-based programs (e.g., LEA adopted health curricula, lessons addressing specific populations, etc.) listed below were offered to students in the general population during the 2011/12 school year?

Program/Strategy Name	Number of Participating Students
Anti-Tobacco Media Blitz	0
Blowing Away Big Tobacco's Big Lies	0
Classroom Animation Studio Kit	0
Decisions for Health Series	0
Effective Youth and Adult Partnerships	0
Enough Snuff	0
Guiding Good Choices – Families That Care	0
Hands Off Tobacco! Series	0
Health and Wellness Series	0
Personal/Social Lessons: The Missing Link	0
Project ABCD (Analyze, Beware, Create, Disseminate)	0
Project ALIVE! (Arts Leading Into Vital Education)	0
Project SCAT (Schools and Communities Against Tobacco)	0
Something Stinks in Hollywood	0
Stay On Track Series	0
Teen Health Course Series	0
Teens Tackle Tobacco	0

7. If a non researched-validated curriculum-based program not listed in the table above was offered, please specify the name of the program/strategy along with the number of projected and participating students in the boxes below.

None

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8. Comments pertaining to question 6 are located in the appendix. (Optional)

9. Which of the non-curricula activities (e.g., Teens Kick Butts, Teens Kick Ash, poster contests etc.) listed below were offered to students in the general population during the 2011/12 school year?

Program/Strategy Name	Number of Projected Students	Number of Participating Students
Great American Smoke Out	750	750
Red Ribbon Week (Tobacco focus)	750	750
Teens Kick Butts / Ash	0	0
Schoolwide contests	750	750
Tobacco & Hollywood Campaign	0	0
Mission Possible	0	0
Youth Quest	0	0
Assembly Speaker	750	750

10. If a non-curricula activity not listed in the table above was offered, please specify the name of the activity along with the number of projected and participating students.

None

11. If you selected *School-wide contest* as a non-curricular activity, indicate the name of the contest:

Don't Do Drugs Poster Contest

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12. If you selected *Assembly Speaker* as a non-curricula activity, indicate the name of the speaker:

Ralph Cantor

13. Comments pertaining to question 9 are located in the appendix. (Optional)

14. Which 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) were offered to students in the general population during the 2011/12 school year?

Program/Strategy Name	Number of Projected Students	Number of Actual Students
Youth Involvement in Stop Tobacco Access to Kids Enforcement (STAKE) Act	0	0
Youth Involvement in Anti-tobacco Advocacy	750	750
Media Literacy and Youth Media Production to Counter the Influence of the Tobacco Industry	0	0
Tobacco use prevention Peer Educator	750	750
Tobacco use prevention focused Service-Learning Projects	0	0

15. If a TUPE Specific Youth Development activity not listed in the table above was offered, please specify the name of the activity along with the number of projected and participating students.

None

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16. Comments pertaining to question 14 are located in the appendix. (Optional)

17. How many students from the following priority populations participated in one or more of the youth development strategies listed below during the 2011/12 school year under this grant?

	Stop Tobacco Access to Kids Enforcement (STAKE) Act	Anti- Tobacco Advocacy	Counter the Influence of the Tobacco Industry	Peer Educator	Service- Learning Projects
American Indian or Alaska Native	0	0	0	0	0
Asian	0	250	0	250	0
Pacific Islander	0	0	0	0	0
Hispanic/ Latino	0	50	0	50	0
African American	0	3	0	3	0
White (non Hispanic)	0	400	0	400	0
Lesbian, Gay, Bisexual, Transgendered, & Questioning	0	0	0	0	0
Low Socio Economic Status	0	100	0	100	0

18. Comments pertaining to question 17 are located in the appendix. (Optional)

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19. Which of the intervention programs listed below were offered during the 2011/12 school year? For each program offered provide the number of students, identified and served, under this grant.

Intervention Programs	Number of students identified	Number of students served
Project Life	0	0
Smokeless Schooldays: Smokeless Saturday School	5	5
Intervention with Teen Tobacco Users (TEG)	0	0
Residential Student Assistance Program	0	0
Spit Tobacco Intervention	0	0
Tobacco-Free Generations	0	0

20. If an intervention program not listed in the table above was offered, please specify the name of the program and the number of project and participating students.

None

21. Comments pertaining to question 19 are located in the appendix. (Optional)

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22. 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 identified	Number of students served
Adolescent Smoking Cessation - Escaping Nicotine and Tobacco (ASCENT)	0	0
Enough Stuff: A Guide to Quitting for Smokeless Tobacco	0	0
Helping Teens Stop Using Tobacco (TAP)	0	0
California Smoker's Helpline	5	5
Project EX: Teen Tobacco Use Cessation Program	0	0
Project N-O-T (Not on Tobacco)	0	0

23. If a cessation program not listed in the table above was offered, specify the name of the program along with the number of students identified and the number of students served.

None

24. Comments pertaining to question 22 are located in the appendix. (Optional)

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25. How many parenting and/or pregnant minors were identified and served during the 2011/12 school year under this grant?

Category	Number of students
Number of parenting and/or pregnant minors identified	0
Number of parenting and/or pregnant minors served	0
Number of parenting and/or pregnant minors in school based programs	0
Number of parenting and/or pregnant minors referred to community programs	0

26. Comments pertaining to question 25 are located in the appendix. (Optional)

27. How many classified and/or certificated staff were trained in the areas listed in the table below?

Training Type	Classified	Certificated
Trained to deliver program curriculum	0	4
Trained to deliver youth development strategies	0	4
Trained to deliver intervention strategies	0	4
Trained to deliver cessation strategies	0	4
General TUPE information	0	4

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28. If staff were trained in areas not listed in the table above please specify the type of training and how many classified and/or certificated staff were trained in the box below.

None

29. Comments pertaining to question 27 are located in the appendix. (Optional)

30. How many parents received general TUPE information during the 2011/12 school year under this grant?

750

31. If parents received training other than general TUPE information, please specify in the space below the type of trainings or information they received and the number of parents participating in each activity.

None

32. Comments pertaining to questions 30 and 31 are located in the appendix. (Optional)

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33. Were the activities listed in the table below offered in collaboration or coordination with LEAs, community agencies or other organizations?

Activity Type	Local Education Agency	Local public health agency	Local governmental agency	Local non-governmental organization
Curriculum Implementation	0	0	0	0
Youth Development activities	0	0	0	0
Cessation activities	0	0	0	0
Intervention activities	0	0	0	0
Local tobacco control coalition planning meetings	0	0	0	0

34. If an activity other than those listed in the table above was offered, please specify the type of activity and if the activity was in collaboration with an LEA, community agency, local coalitions, or another agency.

None

35. Comments pertaining to question 33 are located in the appendix. (Optional)

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Comments regarding question 2:

Too Good for Drugs

Comments regarding question 4:

None

Comments regarding question 6:

None

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Comments regarding question 9:

None

Comments regarding question 14:

None

Comments regarding question 17:

None

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Comments regarding question 19:

None

Comments regarding question 22:

None

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Comments regarding question 25:

None

Comments regarding question 27:

None

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Comments regarding question 30 and 31:

None

Comments regarding question 33:

None