

Action Cycle®, County Health Rankings and Roadmaps, 2015

# PICK LIST OF ALCOHOL-RELATED STRATEGIES

*With Sample Objectives, Evidence Base, and Resources for Effective Implementation*

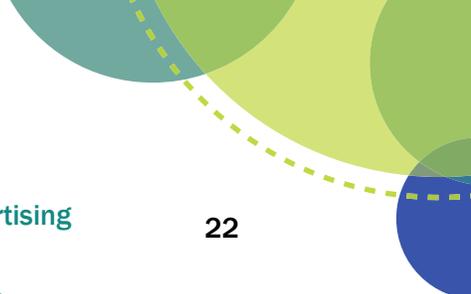


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## Contents (hyperlinked)

<a href="#">Introduction</a>	4
<a href="#">A Pick List for Coalitions That Are Ready to Choose Strategies</a>	5
<a href="#">Including Policy Change in the Action Plan</a>	6
<a href="#">Low-Hanging Fruit: Begin by Enforcing Current Law in One Municipality</a>	7
<a href="#">Choosing Indicators and Writing Objectives</a>	7
<a href="#">Developing Policy Skills</a>	9
<a href="#">Build a Strong Coalition as You Advance Your Initiatives</a>	10
<a href="#">Evidence-Based Alcohol-Related Initiatives</a>	12
<ul style="list-style-type: none"><li><a href="#">Limiting Retail Availability: Outlet Density</a></li><li><a href="#">Limiting Retail Availability: Licensing</a></li><li><a href="#">Limiting Retail Availability: Underage Sales</a></li><li><a href="#">Limiting Retail Availability: Community Festivals and Events</a></li><li><a href="#">Limiting Retail Availability: Public Property</a></li><li><a href="#">Limiting Retail Availability: Sober Server Requirements</a></li></ul>	12 14 16 18 20 21





# Introduction

*Pick List of Alcohol-Related Strategies* presents a menu of evidence-based options to address alcohol misuse in Wisconsin communities. Created by the Community Health Improvement in Action (CHIA) project, this tool is intended for use by public health agencies, hospitals, law enforcement, elected officials, local coalitions, and others seeking to improve the alcohol environment through evidence-based approaches. A companion tool, *Objectives with Focus*, provides a pick list with sample objectives for the priority areas of mental health, oral health, and physical activity and nutrition. Please download it from the [Table of Resources](#) under the “Resources by Stage” tab at [www.wicommunityhealth.org](http://www.wicommunityhealth.org).

The initiatives in this Pick List were selected by subject matter experts (see [Acknowledgements](#) section) and draw from the evidence base for effective approaches. This document includes many, but not all, of the Wisconsin-specific recommendations found in these resources:

- The CHIA *Strategy Map for Preventing and Reducing Alcohol Misuse*, available along with its *User Guide* at [www.wicommunityhealth.org](http://www.wicommunityhealth.org) (on the [CHIA Resources](#) page under the “Alcohol-Related Resources” tab). The Strategy Map is an online model with three main layers: an overview of the community health improvement process; root causes of alcohol misuse and evidence base for related approaches; and sample local strategy maps that address local conditions through a process that strategically builds up to policy change. Each layer of the Strategy Map provides sample process and impact measures and comprehensive links to implementation resources, evidence base, and data sources.
- [Alcohol, Culture, and Environment Workgroup Recommendations](#) (ACE Report): lists strategies to be implemented by state legislative bodies, municipalities, educators or educational institutions, community groups or organizations, and employers.
- [Municipal Inventory: Evidence-Based Policies & Practices to Improve the Alcohol Environment](#): A table of municipal alcohol policy options, with evidence base and a column for assessing current policies in the municipality. Created by the Wisconsin Alcohol Policy Project at the University of Wisconsin Law School in collaboration with CHIA.

Each of the twelve alcohol-related initiatives presented in the Pick List is accompanied by the following:

- A sample performance objective that is SMART: specific, measurable, appropriate, realistic, and time-determined.
- A description of the approach.
- The evidence base for the strategy. While a variety of sources are cited for the evidence base, the [What Works for Health](#) guide is used extensively. Definitions for that rating system are listed in the [What Works for Health](#) section at the end of this document.
- A listing of select implementation tools.



The remainder of this introductory section grounds the user in the “Choosing Effective Policies and Programs” stage of community health improvement and provides a framework for coalitions to create an action plan for maximum impact.

## A Pick List for Coalitions that Are Ready to Choose Strategies

This resource fits in the community health improvement cycle at the “Choose Effective Policies and Programs” stage (see the Action Cycle on the cover page of this document). A coalition at this stage typically meets regularly and has engaged members from a large cross section of the community. The team has already assessed alcohol-related community needs and resources, analyzed root causes and local conditions, prioritized needs, and defined coalition goals, mission, and vision. We urge coalitions to resist the temptation to jump into choosing strategies without completing these earlier steps. For an overview of these crucial foundation-building phases with step-by-step instructions specific to alcohol and other drug-related work, we suggest the following resources:

- The CHIA *Strategy Map for Preventing and Reducing Alcohol Misuse* and its *User Guide*, available at [www.wicommunityhealth.org](http://www.wicommunityhealth.org) (on the [CHIA Resources page](#) under the “Alcohol-Related Resources” tab). The first page of the model, called the Overall Map, is a guide to the stages of community health improvement. The “Assess” step is particularly detailed, providing assessment instructions as well as grounding the user in how assessment relates to each step of the community health improvement process and the main sub-layers of the CHIA Strategy Map (Root Causes maps and Sample Local Strategy Maps).
- [Assessment Primer: Analyzing the Community, Identifying Problems and Setting Goals](#): A guide to assessing needs and resources, analyzing problems and goals, and developing a model of change, from the Community Anti-Drug Coalitions of America (CADCA).
- [Community Alcohol Personality \(CAP\) Survey](#): A three-part process that will help you prioritize and identify contributing factors that drive alcohol-related problems in your community. It also contains an evaluation tool that will enable you to track changes. Created by FACE: The Prevention Resource Group.

General resources for working together, assessing needs and resources, and focusing on what’s important include:

- The *Wisconsin Guidebook on Improving the Health of Local Communities*, available in the [Table of Resources](#) under the “Resources by Stage” tab at [www.wicommunityhealth.org](http://www.wicommunityhealth.org). This thorough guide includes a checklist and links to resources for each step of community health improvement.
- The County Health Rankings and Roadmaps [Action Center](#).



## Including Policy Change in the Action Plan

While many prevention strategies focus on raising public awareness and helping individuals make healthy choices, lasting behavioral change requires a focus on community systems, policies and local conditions to affect the environment in which substance abuse occurs. Especially in Wisconsin— where the primary responsibility for alcohol licensure and control falls on local governments—a coalition can have a big impact on its local alcohol environment when members help enact and enforce evidence-based municipal policy change. Therefore, most of the initiatives detailed in this Pick List aim to change and/or enforce municipal policies.

Research shows that there are four A's – four basic factors of alcohol policy – that impact the alcohol environment and alcohol culture:

- The **availability** of alcohol through retail and social outlets, including how many locations sell and serve alcohol, and how widely available it is socially. The more available alcohol is, the more people drink.
- The **affordability** of alcohol: the cheaper alcohol is, the more people drink.
- The **attractiveness** of alcohol: Is there an excessive amount of alcohol advertising in the community? Are advertisements placed where youth are likely to view them? Youth exposure to alcohol advertising has been proven to impact when youth begin to drink and, if youth are drinking, how much they drink.
- The **acceptability** of alcohol: How acceptable is alcohol use and misuse? Is there an expectation that everyone drinks, or even an expectation that everyone drinks heavily? Is it difficult to get an alcohol-free beverage at community events? Many people find alcohol use and even misuse is widely accepted in Wisconsin; our social norms support alcohol use.

Excessive alcohol use is reduced when there is an improvement in these four basic factors. A successful coalition will try to address as many of the 4 A's as possible, given the community's needs and resources. Each of the initiatives presented in this Pick List addresses one or more of the 4 A's.

Though we encourage coalitions to advocate for the implementation of the policy changes recommended in this Pick List, we acknowledge that a diverse range of strategies is often needed to have a population-level impact. The [Community Anti-Drug Coalitions of America \(CADCA\)](#) defines [Seven Strategies for Community Change](#): providing information, enhancing skills, providing support, enhancing access/reducing barriers, changing consequences (incentives/ disincentives), physical design, and modifying/changing policies. The exact mix of approaches necessary to meet the coalition's goals for population-level change is specific to each community. To view sample local strategy maps that strategically build up to policy change, please visit the *CHIA Strategy Map for Preventing and Reducing Alcohol Misuse* and its *User Guide*, available at [www.wicommunityhealth.org](http://www.wicommunityhealth.org) (on the [CHIA Resources page](#) under the "Alcohol-Related Resources" tab). The Strategy Map includes three Sample Local Strategy Maps (one for reducing youth social access to alcohol, one for reducing youth retail access to alcohol, and one for improving the retail alcohol environment). To get there: On the Overall Map, drill down on "Act & Evaluate



Efforts” (last in green under “Steps to Take”) for either underage drinking or adult excessive alcohol use, depending on your target. Each will take you to a map of Root Causes. Drill down on a root cause that includes a Sample Local Strategy Map: Social Access or Retail Access on the Root Causes of Underage Drinking Map, or the Retail Environment on the Root Causes of Adult Excessive Alcohol Use Map. Then drill down on Strategy to reach the Sample Local Strategy Map.

## **Low-Hanging Fruit: Begin by Enforcing Current Law in One Municipality**

Since alcohol policy is created and enforced at the municipal level in Wisconsin, successful countywide or regional coalitions often proceed with alcohol policy one municipality at a time. We suggest you begin by selecting one municipality: perhaps one that is most in need, most ready for change, or with community leaders most supportive of your goals. Conduct an assessment of current alcohol-related policies and practices in this municipality and engage with local law enforcement and community organizations to learn how your coalition can support current laws and best practices. Before launching new interventions related to alcohol use, it is important to have an understanding of the current alcohol-related policies and practices of the municipality, local schools, community groups, and workplaces. Assessing alcohol policy includes ascertaining how well the laws and rules are enforced. Start with supporting the enforcement of current policies. Doing so will help forge important relationships with community leaders. As you consider both new and existing initiatives, recognize that alcohol policies interact with one another in many cases. Cycles of reflection and action allow you to think through the impact of policy options. Use the [Municipal Inventory: Evidence-Based Policies & Practices to Improve the Alcohol Environment](#) to track current policies in the municipality.

## **Choosing Indicators and Writing Objectives**

A coalition’s action plan should include objectives and indicators to measure both progress (performance, process) and impact (outcome). The same measurements used in assessment can be used in evaluation, but once you’ve chosen strategies, you’ll likely add more evaluation indicators that are unique to your coalition’s mission, goals, local conditions, and efforts. The sample objectives provided in this Pick List are process-related: they measure activity, not impact. Effective implementation and evaluation plans should include impact measures as well. For example, if your goal is to reduce adult binge drinking, a related impact objective might be: “By (date), reduce by 10% the percentage of adults in ABC Geographic Area that self-report binge drinking in the last 30 days (Baseline: 30%; Goal: 27%; Wisconsin average: 24%; Data Source: BRFSS).”

To choose the process and impact indicators that best represent your efforts, we again recommend the *CHIA Strategy Map for Preventing and Reducing Alcohol Misuse* and its *User Guide*, available at [www.wicommunityhealth.org](http://www.wicommunityhealth.org) (on the [CHIA Resources page](#) under the “Alcohol-Related Resources” tab). Creating a logic model for coalition work (or a strategy map or theory of change) is essential in selecting appropriate indicators to track. Good measures of progress and impact vary by coalition. The right indicators will provide the coalition with the information needed to make decisions and take efficient



and impactful action. The Strategy Map contains listings of short, medium, and long-term indicators— both process- and outcome-related, including interim measures of policy change— with comprehensive links to data sources. The tool also provides sample local strategy maps that a coalition could use as a template. To track and report on your indicators, we suggest the CHIA Sample Dashboard for Measuring the Progress and Impact of Alcohol-Related Initiatives and its User Guide, available at [www.wicommunityhealth.org](http://www.wicommunityhealth.org) (on the [CHIA Resources](#) page under the “Alcohol-Related Resources” tab).

Along with choosing indicators, objectives should be drafted to fit local conditions. Some considerations:

- Although the coalition’s geographic focus may be countywide, changes in policy and practice are best implemented one municipality at a time. Consider short, medium, and long-term performance objectives with benchmarks for each interval. For example, by 20XX (one year from now), XX number of municipalities in County ABC will adopt policy Y. By 20XX (three years from now), that number will be increased to XX, and by 20XX (five years from now), to XX municipalities.
- Is the municipality under consideration ready for this initiative? Community readiness is issue specific (e.g., a municipality may be ready to address underage binge drinking, but reluctant to tackle adult binge drinking). Also, a community’s readiness level can change rapidly depending on the political and social context. For example, a champion in the community that people respect can quickly make key decision-makers more open to change. Many coalitions find that the process of advocating for change, including education, increases community readiness quickly. So while gauging community readiness is important, it need not stop a coalition from advocating for change and seizing the moment when an opportunity is ripe.
- What amount of change is reasonable for the community? What resources is the coalition able to leverage to have a maximum impact? Set your targets at an ambitious but reasonable level.

In addition to objectives and indicators, an effective plan for action will include specific action steps with accountabilities, deadlines and resources needed. Progress updates can include measurement of these activities. Examples include:

- **Activities:** number of meetings with policymakers; number of town hall meetings held.
- **Participation:** number of participants; frequency of participation.
- **Communication:** number of media stories, letters to the editor, or op-eds about your efforts; number of people on your email or mailing list; number of messages sent using email or mailing list.<sup>1</sup>

For further guidance on writing, selecting and refining your objectives and creating an overall strategy for health improvement, visit the [Table of Resources](#) at [www.wicommunityhealth.org](http://www.wicommunityhealth.org) to download these tools:

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<sup>1</sup> County Health Rankings: <http://www.countyhealthrankings.org/roadmaps/action-center/evaluate-actions#activity-1907>

- The checklists for “Choose Effective Policies and Programs” and “Act on What’s Important” in the *Wisconsin Guidebook on Improving the Health of Local Communities*
- *Template Implementation Plan: A Tool for Focused, Collaborative, Effective Action*

The County Health Rankings and Roadmaps [Action Center](#) also provides information on writing strong objectives. This information is included in two phases of the Action Cycle: [Choose Effective Policies and Programs](#) and [Act on What’s Important](#).

For technical assistance and training in community health improvement, contact the [Wisconsin Division of Public Health Regional Offices](#) or visit the Wisconsin Division of Public Health [CHIPP website](#) for links to local health departments and their community health assessments and plans. The University of Wisconsin Population Health Institute also supports a site that allows users to identify organizations and communities that have a particular priority area (e.g., access to health, excessive alcohol consumption, nutrition, etc.): [www.improvingwihealth.org](http://www.improvingwihealth.org).

For guidance in implementing and evaluating alcohol-related initiatives, contact the [Community Health Improvement in Action \(CHIA\)](#) project.

## Developing Policy Skills

Advocating for alcohol policy change may be a new skillset for your coalition membership. In Wisconsin, substance abuse prevention training opportunities are currently provided by these entities, among others:

- [The Alliance for Wisconsin Youth](#) provides member coalitions with free support services and training via telephone, email, meetings, visits, and workshops.
- The Community Anti-Drug Coalitions of America (CADCA) offers the [National Coalition Academy](#). This three-week training course is offered free of charge; participants only need to cover travel costs. Participants receive instruction on core competencies essential for a highly-effective coalition, ranging from developing strategic and action plans and building partnerships to enhancing cultural competence and resource development.
- [Community Health Improvement in Action \(CHIA, 2014-2017\)](#) provides community health improvement training opportunities with a focus on alcohol-related work, including webinars and in-person trainings. Watch recorded webinars at [www.wicommunityhealth.org](http://www.wicommunityhealth.org) (on the [Archived Webinars page](#) under the “Education & Events” tab).
- The Wisconsin Department of Health Services (Division of Mental Health and Substance Abuse Services, Bureau of Prevention Treatment and Recovery) hosts the biennial [Wisconsin Statewide Substance Abuse Prevention Training](#) (in odd-numbered years) and, in cooperation with the Wisconsin Alcohol Policy Project, hosts the biennial [Wisconsin Alcohol Policy Seminar](#) (in even-



numbered years).

- **The Wisconsin Alcohol Policy Project (WAPP)** at the University of Wisconsin Law School provides training, tools and technical assistance to individuals and groups– including local elected officials, law enforcement and coalitions– on the evidence-based policies and practices that prevent and reduce alcohol misuse and abuse. TA includes everything from training sessions on alcohol policy to answering questions by telephone about specific alcohol-related policies or problems. As mentioned above, the WAPP hosts the biennial **Wisconsin Alcohol Policy Seminar** (in even-numbered years) to offer training and information on developments in alcohol policy.

When you are ready to share information about policy options with general audiences, the Wisconsin Alcohol Policy Project’s **Start the Community Discussion** webpage has two PowerPoint presentations that include scripts that can be modified:

- *Municipal Government & Alcohol Control in Wisconsin* reviews the four areas of municipal alcohol authority: licensing, enforcement, budgets, and enforcement
- *The A.C.E. Report: Wisconsin’s Guide to a Healthier Alcohol Environment* outlines Wisconsin’s alcohol-related problems and their cost, and then reviews the recommendations of the ACE Report.

Also contact the **Wisconsin Alcohol Policy Project** for a 2017 template PowerPoint presentation for municipal leaders.

## Build a Strong Coalition as You Advance Your Initiatives

Although most coalitions have broad-based membership by the “Choose effective policies and programs” stage, recruiting and engaging coalition partners is an ongoing process. Action to advance your objectives usually makes member recruitment and engagement easier. CADCA recommends that twelve sectors be engaged and committed: youth, parents, business community, media, schools, youth-serving organizations, law enforcement agencies, religious or fraternal organizations, civic and volunteer groups, healthcare professionals, state/local/tribal agencies with expertise in substance abuse, and other organizations involved in reducing substance abuse. In addition, coalitions can increase their potential power by ensuring that they include both the “grass tops” formal leaders and the “grassroots” community members who have strong links within neighborhoods and informal institutions.

Resources for building strong coalitions:

- **Handbook for Community Anti-Drug Coalitions (CADCA)**
- **Capacity Primer: Building Membership, Structure and Leadership (CADCA)**
- **Action Center: Work Together (County Health Rankings and Roadmaps)**

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- Visit the [Table of Resources](http://www.wicommunityhealth.org) at [www.wicommunityhealth.org](http://www.wicommunityhealth.org) to download these tools:
    - The checklist for “Work Together” in the *Wisconsin Guidebook on Improving the Health of Local Communities*
    - *Sharing Leadership: A Guide to Stakeholder Engagement*
    - *Making the Business Case: Tips and Tools for Engaging Local Employers*

**Note: When advocating for municipal change, it is extremely important for residents of the municipality to be part of the process. A municipal board is not likely to be interested in the advocacy efforts of a group that does not include local residents.**

# Evidence-Based Initiatives

## Limiting Retail Availability: Outlet Density

**By (date), in ## municipalities, the ABC Coalition will assess the alcohol outlet density (including the number of both on-premises and off-premises alcohol licenses), analyze local alcohol-related problems, and present findings to municipal leaders with options for limiting alcohol outlet density, as appropriate.**

**Description:** An alcohol outlet is a place where alcohol may be legally sold for the buyer to drink there (on-premises outlets, such as bars or restaurants) or elsewhere (off-premises outlets, such as liquor stores). Alcohol outlet density refers to the number of alcohol outlets in a given area. Alcohol outlet density is associated with excessive alcohol consumption and related harms. **NOTE: Wisconsin law does not allow licenses to be non-renewed or revoked without cause. As a result, communities can initially cap, but cannot initially reduce, the number of outlets. No one has the right to an alcohol license in Wisconsin; a municipality may decide not to issue new licenses – capping and then reducing alcohol outlet density over time.**

**Evidence Base:**

- “Reduce alcohol outlet density” received an evidence rating of “scientifically supported” by *What Works for Health*.
  - There is strong evidence that increasing alcohol outlet density increases alcohol consumption and alcohol-related harms; using regulatory authority... to reduce or limit outlet density can reduce excessive alcohol consumption and related harms (CG-Alcohol, Campbell 2009, Jernigan 2013, NIAAA-College drinking 2002). Government policies that limit or ban establishments that sell or serve alcohol, or otherwise reduce alcohol outlet density, have been shown to reduce both consumption and harm, particularly in isolated environments without other sources of alcohol (CG-Alcohol). Such policies are suggested strategies to reduce drinking among college students and other underage drinkers (RAND-Imm 2007, NIAAA-College drinking 2002).
- Alcohol, Culture, and Environment Workgroup Recommendations (ACE Report), Municipal Recommendation #2, “Municipalities should adopt procedural guidelines and policies to govern all local deliberations and decisions on whether to issue, renew or revoke licenses to sell or serve alcohol.”

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- Implementation Tools:**
- **Outlet Density: Limiting the Concentration of Retailers Selling and Serving Alcohol in Your Community** (Wisconsin Alcohol Policy Project of the University of Wisconsin Law School)
  - **Awarding Alcohol Licenses: Issues and Procedures** (Created by the Wisconsin Alcohol Policy Project of the University of Wisconsin Law School in collaboration with Community Health Improvement in Action)
  - **Regulating Alcohol Outlet Density: An Action Guide** (CADCA)
  - **Outlet Density by Wisconsin County: A joint DHS & Wisconsin Alcohol Policy Project tool that lists outlet density by a number of factors in every municipality by county.**
  - **How to Implement Environmental Strategies to Reduce Alcohol Problems: A Manual for Prevention Professionals**, chapter 3. FACE: The Prevention Resource Group
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## Limiting Retail Availability: Licensing

**By (date), in ## municipalities, ABC Coalition will review existing alcohol license guidelines and procedures in light of alcohol-related community goals and initiate a dialog with the municipal alcohol licensing review board on possible changes or modifications to those policies to improve the alcohol environment.**

### Description:

A significant portion of the community alcohol environment is determined by the number, location and character of the places alcohol is sold or served. Each municipality in Wisconsin has the ability to create its own alcohol license review policy as long as basic state requirements are met. Once awarded, alcohol licenses can only be revoked or non-renewed for cause, often after an expensive and lengthy process. Accordingly, it is very important for municipalities to award licenses after a thorough investigation of the applicant and the proposed location and thoughtful deliberation that encourages citizen participation.

Wisconsin places very few procedural requirements on municipalities and applicants, allowing municipalities to create procedures and criteria that reflect the goals and concerns of the community. Applicants for a new licensed establishment must:

- Be age 21, the minimum legal drinking age.
- Not have an arrest or felony conviction substantially related to the licensed activity or be a “habitual law offender.”
- Be a resident of the state for 90 continuous days prior to the application.
- Complete a Responsible Beverage Server training course.
- Hold a Sellers Permit issued by the Wisconsin Department of Revenue.

### Municipalities must:

- Use the Department of Revenue Application or facsimile which may be supplemented by additional materials or information as requested by the municipality each year.
- Publish the required notice (125.04 (3)(g)).
- Award or deny a license by vote of the governing body.
- If denying an applicant, provide the reasons for the denial in writing to the applicant.

When considering applications for an alcohol license, a municipality may attach specific conditions to the license. License conditions can address past and potential problems with binding assurances for the community. License conditions can address many aspects, including security, management, merchandise, promotion, and advertising. For example, municipalities that want to reduce youth exposure to alcohol may require alcohol advertisements

and displays be above 36 inches from the floor or limit the portion of a window that can be covered in advertising viewable from the exterior.

The review process and criteria for awarding alcohol licenses can also serve as an outline for municipal expectations. Some municipalities adopt a specific system to administer progressive discipline, such as a demerit or point system. Consistent enforcement of disciplinary guidelines requires political willpower within the governing body to be effective. Vocal coalition support can play an important role in maintaining council support.

**Evidence Base:**

**Alcohol, Culture, and Environment Workgroup Recommendations (ACE Report):**

- Municipal Recommendation #2, “Municipalities should adopt procedural guidelines and policies to govern all local deliberations and decisions on whether to issue, renew or revoke licenses to sell or serve alcohol.”
- Municipal Recommendation #3, “Municipalities should consider using detailed license conditions, appended to pending alcohol licenses and renewals, to address specific concerns about the operation of the establishment and neighborhood concerns such as traffic, noise or sidewalk congestion.”

**Implementation Tools:**

- **Awarding Alcohol Licenses: Issues and Procedures** (Created by the Wisconsin Alcohol Policy Project of the University of Wisconsin Law School in collaboration with Community Health Improvement in Action)
- **How to Implement Environmental Strategies to Reduce Alcohol Problems: A Manual for Prevention Professionals**, chapter 3. FACE: The Prevention Resource Group
- **Alcohol, Culture, and Environment Workgroup Recommendations (ACE Report)**, see examples in Appendices 1 and 2

## Limiting Retail Availability: Underage Sales

**By (date), all municipalities in ABC County will participate in regular alcohol age compliance checks using tested established protocol.**

**Description:** Alcohol age compliance checks use recruited youth decoys who attempt to purchase alcohol from local vendors without an ID or using their own underage ID. If the sale is completed, the youth turns the alcohol over to the accompanying law enforcement officer, and the officer may cite the server. Current research shows that effective and regular compliance checks help to: decrease alcohol sales to minors; reduce underage drinking; reduce traffic crashes, violence, and other health problems associated with alcohol; and build healthier and safer communities.

Effective implementation includes these elements:

- All licensed establishments are potential targets, and all will eventually be checked over time
- Checks repeated at intervals of approximately 6 months
- Citations issued at failing locations with results publicized
- Use of tested established protocol from a respected source<sup>2</sup>

**Evidence Base:**

- “Vigorous enforcement of existing underage drinking laws & minimum legal drinking age” received an evidence rating of “scientifically supported” by *What Works for Health*.

There is strong evidence that enhanced enforcement of laws that prohibit alcohol sales to minors reduces retail sales to minors (CG-Alcohol, RAND-Imm 2007). Such enforcement also appears to reduce underage alcohol consumption (CG-Alcohol, IOM-Underage drinking 2004). However, additional evidence is needed to confirm effects. Enhanced enforcement programs have been shown to reduce sales to minors of various racial and ethnic groups in both bars and liquor stores, in rural and urban communities (CG-Alcohol). Research suggests that compliance checks are most effective when checks are frequent, well-publicized, well-designed, solicit community support, and involve penalties to the licensed establishment, instead of just the server (RAND-Imm 2007; Note that a 2016 Wisconsin law stipulates that only the server may be cited).

- **Alcohol, Culture, and Environment Workgroup Recommendations (ACE Report) Municipal Recommendation #12**, “Municipalities should establish ongoing, comprehensive alcohol age compliance checks for both on and off

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<sup>2</sup> Beware of look-alike procedures that have not proven to be effective. While retail employee training and incentive programs are helpful, volunteer efforts have not proved effective and cannot replace regularly scheduled alcohol age compliance checks as described above.



premise licensees with citations issued to vendors and/or employees for noncompliance.” (Note that a 2016 Wisconsin law stipulates that only the server may be cited.)

- The **Community Preventive Services Task Force** recommends enhanced enforcement of laws prohibiting sale of alcohol to minors, on the basis of sufficient evidence of effectiveness in limiting underage alcohol purchases. Further research will be required to assess the degree to which these changes in retailer behavior affect underage drinking.

**Implementation Tools:**

- **Operating Alcohol Age Compliance Checks in Wisconsin** (Wisconsin Alcohol Policy Project of the University of Wisconsin Law School)
  - **Alcohol Compliance Checks: A Procedures Manual for Enforcing Alcohol Age-of-Sale Laws** (University of Minnesota)
  - **How to Implement Environmental Strategies to Reduce Alcohol Problems: A Manual for Prevention Professionals**, chapter 2. **FACE: The Prevention Resource Group**
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## Limiting Retail Availability: Community Festivals and Events

By (date), in ## municipalities, ABC Coalition will evaluate current policies for Class B Temporary “Picnic” licenses, and, if appropriate, advocate for license conditions to reduce over-serving and underage drinking during these events.

**Description:** Temporary Class B licenses (often called picnic licenses) allow retail beer and/or wine sales at temporary events like fairs and festivals. Only certain organizations qualify for such a license. (They must be bona-fide clubs, county or local fair associations, churches, lodges, or societies that have been in existence for at least six months.) Before considering this objective, talk to the municipal clerk to find out how many such licenses are issued each year in the community, and speak to law enforcement to see if they are problematic.

In brief, the ACE Report recommendations for temporary Class B licenses include: a secure perimeter; wristbands and handstamps in rotating patterns; at least one licensed bartender; trained and sober servers; sales limited to two beverages; clear cups; food, water and sanitation available in secured alcohol sales area; and end alcohol sales 60 minutes prior to close. While not every ACE Report recommendation for Temporary licensees is appropriate for every event, the list can serve as the starting point for local discussion.

**Evidence Base:**

- “Restrict alcohol sales at public events and on public property” received an evidence rating of “expert opinion” by *What Works for Health*.
  - Restricting alcohol use and availability at public events and on public property is a suggested strategy to reduce excessive drinking and underage drinking (IOM-Underage drinking 2004, UMN-Alcohol epidemiology, Toomey 2008, Toomey 2005). Available evidence suggests that banning or restricting alcohol sales at public events may reduce alcohol availability for youth and may also reduce alcohol-related problems such as traffic crashes, vandalism, fighting, and other public disturbances (UMN-Alcohol epidemiology, RAND-Imm 2007). However, additional evidence is needed to confirm effects (Toomey 2005, Toomey 2008).
- **Alcohol, Culture, and Environment Workgroup Recommendations** (ACE Report), Municipal Recommendation #8: “Municipalities should append the following conditions to all Class “B” Temporary [picnic] licenses (beer gardens, festivals, etc.) to reduce alcohol related injuries, disturbances and prevent underage drinking: ...”

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- Implementation Tools:**
- **Alcohol, Culture, and Environment Workgroup Recommendations (ACE Report)**, Municipal Recommendation #8 lists the recommended policies in full.
  - **Outdoor Events and Festivals:** project examples and assessments (Wisconsin Alcohol Policy Project of the University of Wisconsin Law School)
  - **Alcohol Control at Festivals, Picnics & Summer Events:** a PowerPoint presentation providing information on how a community can adopt specific policies that significantly reduce the chance of underage drinking or over-serving at community events. (Wisconsin Alcohol Policy Project)
  - **Archived CHIA Webinar: Community Festivals: Making a Change in Community Culture.**
  - **Restrict Alcohol Sales at Community Events** (Center for Applied Research Solutions)
  - **How to Implement Environmental Strategies to Reduce Alcohol Problems: A Manual for Prevention Professionals**, chapter 9. **FACE: The Prevention Resource Group**



## Limiting Retail Availability: Public Property

**By (date), ## municipalities will pass ordinances to restrict or prohibit the sale of alcohol on municipal property, such as recreation centers, sports facilities and performing arts venues.**

**Description:** As property owner and manager of public assets, a municipality has the ability to set rules on the use of all public property and may restrict the sale and consumption of alcohol on such property. Before including this initiative in your plan, find out if there is a “Parks Use” policy and if alcohol use is limited to specific parks or locations. In addition, assess the need for such an ordinance: what does local law enforcement tell you about excessive and underage alcohol use in municipal park and recreation areas?

The ACE Report recommendations include: prohibit alcohol sales at youth events, including sports; require secure perimeter for alcohol sales/consumption with wristbands, handstamps, and law enforcement officer to monitor; require non-alcohol beverages to cost less; limit sales; and schedule saturation patrols to coincide with event conclusion. These recommendations can be implemented through conditions placed on the licenses to sell alcohol at public venues (Class B Temporary or Class B) or through conditions placed on the use of public property for private events.

**Evidence Base:**

- “Restrict alcohol sales at public events and on public property” received an evidence rating of “expert opinion” by *What Works for Health*. (See previous objective for citations of evidence.)
- [Alcohol, Culture, and Environment Workgroup Recommendations](#) (ACE Report):
  - Municipal Recommendation #13: “Municipalities should adopt ordinances placing significant restrictions on the sale of alcohol at public events.”

**Implementation Tools:**

- [Alcohol, Culture, and Environment Workgroup Recommendations](#) (ACE Report), Municipal Recommendations #9 and #13 list the recommended initiatives in full.
- [Outdoor Events and Festivals: project examples and assessments](#) (Wisconsin Alcohol Policy Project of the University of Wisconsin Law School)
- [Restrict Alcohol Sales at Community Events](#) (Center for Applied Research Solutions)
- [How to Implement Environmental Strategies to Reduce Alcohol Problems: A Manual for Prevention Professionals](#), chapter 9. FACE: the Prevention Resource Group

## Limiting Retail Availability: Sober Server Requirements

**By (date), ## communities will pass Sober Server Ordinances.**

**Description:** Sober Server Ordinances (also known as Impaired Server Ordinances) prohibit those who sell or serve alcohol from being intoxicated. Unlike in many states, Wisconsin statutes do not address alcohol use by a bartender or server. Several communities have adopted ordinances limiting the amount of alcohol a server can consume to allow for tasting or minimal participation in local customs while still maintaining the server's ability to identify underage customers and intoxicated individuals who should not be served. Some communities have found that intoxicated servers contribute or fail to control alcohol-related disorder. Before proceeding with this objective, ask local law enforcement if intoxicated servers are a factor in the calls for service to local bars and taverns.

Restrictions that completely ban alcohol use while on duty were not effective or practical for servers. The ACE Report suggests a limit of .04 Blood Alcohol Concentration (BAC) to mirror the restriction for commercial drivers holding a CDL. With a .04 BAC, if one is too impaired to drive professionally, one may be assumed to be too impaired to serve professionally.

Compliance checks for sober servers are not the norm in Wisconsin. Typically, Sober Server ordinances are enforced when a law enforcement officer who is on the premises (because of a call for service, a walk-through, or an age compliance check, for example) observes signs of intoxication in a server.

**Evidence Base:**

- [Alcohol, Culture, and Environment Workgroup Recommendations](#) (ACE Report) Municipal Recommendation #10, "Municipalities should adopt ordinances prohibiting those who sell or serve alcohol from drinking while on duty or having a BAC above a 0.04 while working, commonly called sober server ordinances."

**Implementation Tools:**

- [Sober Server Ordinances](#) (Wisconsin Alcohol Policy Project of the University of Wisconsin Law School)
- [Impaired Server Message Maps](#) (Marathon County AOD Partnership Council)

## Limiting Attractiveness: Reducing youth exposure to alcohol advertising

In an effort to reduce youth exposure to alcohol advertising, by (date), in ## communities, the ABC Coalition will conduct an environmental scan and, as appropriate, advocate for (1) the enforcement of municipal code and industry standards on alcohol advertisements; and (2) the restriction of alcohol advertising, sponsorship, and naming rights on public property.

### Description:

Research indicates that exposure to alcohol advertising affects young people's beliefs about drinking, intentions to drink, and drinking behavior.<sup>3</sup> A municipality may already have commercial advertising policies in place. An environmental scan will help determine if the code is being enforced for alcohol advertising. In addition, a municipality may choose to enforce alcohol industry standards on billboard placement that stipulate that billboard advertisements be located at least 500 linear feet from established elementary or secondary schools, places of worship, or public playgrounds.<sup>4</sup>

In efforts to reduce youth exposure to alcohol advertising, a municipality may also limit or prohibit alcohol advertising, sponsorship, and naming rights on public property (for example: parks, recreation centers, sports facilities and performing arts venues), acting as the manager of community resources, not as a censor. (Naming rights are a form of advertising whereby a corporation or other entity purchases the right to name a facility or event, typically for a defined period of time.) In your environmental scan, assess: to what extent is alcohol advertised (including sponsorship and naming rights) on public property?

### Evidence Base:

- “Restricting alcohol advertising placement and content” received an evidence rating of “some evidence” by *What Works for Health*. There is some evidence that restricting the content and placement of alcohol advertisements reduces underage and excessive drinking (Weitzman 2004, Saffer 1991). However, additional evidence is needed to confirm effects. Exposure to alcohol advertising has been shown to increase drinking among non-drinking adolescents and consumption among adolescents who already drink alcohol (Anderson 2009, Smith 2009). Model-based evidence suggests that restricting alcohol advertising is associated with reductions in disability and premature deaths (IAS-Anderson 2006).

<sup>3</sup> R.L. Collins et al., “Predictors of beer advertising awareness among eighth graders,” *Addiction* 98 (2003): 1297-1306; S.E. Martin et al., “Alcohol Advertising and Youth,” *Alcoholism: Clinical and Experimental Research* 26 (2002): 900-906.

<sup>4</sup> *Beer Institute Advertising and Marketing Code*, Beer Institute, accessed 7/10/15. See also *Code of Responsible Practices for Beverage Alcohol Advertising and Marketing*, Distilled Spirits Council, May 26, 2011.

- **Alcohol, Culture, and Environment Workgroup Recommendations (ACE Report) Municipal Recommendation #9, “Municipalities should limit alcohol advertising to prevent youth overexposure to alcohol advertising.”**  
Summary of recommendations:
  - Prohibit alcohol advertising within 500 feet of a school, church or park
  - Ban alcohol advertising public property
  - Limit the portion of a window that can be covered in alcohol advertising viewable from the exterior
  - Adopt alcohol license conditions that limit alcohol advertising displays to above 36 inches from the floor.

**Implementation Tools:**

- Contact the [Wisconsin Alcohol Policy Project](#) for a 2016 guide, "Conducting a Scan of Alcohol Signage at Class A Retailers"
  - [Alcohol, Culture, and Environment Workgroup Recommendations \(ACE Report\)](#), Municipal Recommendation #9 lists the recommended policies in full.
  - [The Center on Alcohol Marketing and Youth \(CAMY\) Legal Resources and Case Study.](#)
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## Limiting Non-commercial Availability and Decreasing Acceptability: Underage Drinking Parties

Note: On October 28, 2016, an Appellate Court decision on a Fond du Lac County case made all of the Wisconsin model municipal social host ordinances unenforceable. As of April, 2017, it appears that for communities to have an enforceable option, we need a state statute that makes it illegal to provide a location for underage drinking and resolves the related issues. Discussion of municipal social host ordinances is provided below for informational purposes only.

**By (date), all municipalities within the county and the county will have and enforce social host ordinances.**

**Description:**

Social host ordinances are municipal laws that hold individuals responsible for underage drinking events on property they own, lease, or otherwise control. Whereas state law prohibits providing alcoholic beverages to underage persons, social host laws prohibit providing the *venue/location* where underage drinking takes place. Many communities use a “Parents Who Host Lose the Most” campaign to initiate a community discussion that can lead to a social host ordinance. (The [Wisconsin Department of Health Services](#) provides materials free of charge for this campaign.) As of February, 2017, an estimated 53 Wisconsin communities have implemented social host ordinances. A county-wide ordinance applies only to the unincorporated areas of the county; each incorporated municipality must pass its own ordinance.

Be aware that “social host liability” has multiple definitions. In Wisconsin, social host ordinances impose a local forfeiture; the money collected is kept by the local court. (In *What Works for Health*, social host liability refers to state laws that can be criminal or civil actions. Since alcohol control is primarily a municipal responsibility in Wisconsin, and municipalities cannot create crimes or change civil liability laws, *What Works for Health* is not included in the evidence base for this initiative on this document for Wisconsin audiences.)

**Evidence Base:**

- [Alcohol, Culture, and Environment Workgroup Recommendations \(ACE Report\)](#), Municipal Recommendation #5, “Municipalities should adopt an ordinance establishing significant forfeitures for adults who provide a safe haven for underage drinking, pour or provide alcohol for three or more nonrelated youth on their property.”

**Implementation Tools:**

- [Social Host Ordinance Fact Sheet](#) (CHIA, 2015)
- [Social Host Ordinances in Wisconsin](#) (Wisconsin Alcohol Policy Project of the University of Wisconsin Law School)
- [Parents Who Host Lose the Most](#) (The Wisconsin Department of Health Services in partnership with [Drug Free Action Alliance](#))

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- **Alcohol, Culture, and Environment Workgroup Recommendations (ACE Report)**, see example in Appendix 3
  - **How to Implement Environmental Strategies to Reduce Alcohol Problems: A Manual for Prevention Professionals**, chapter 7. FACE: The Prevention Resource Group
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## Limiting Availability and Decreasing Acceptability: College Setting

By (date), (XYZ) College and/or the surrounding municipality, as appropriate, will adopt one or more of the policies and practices endorsed by the Task Force on College Drinking of the National Advisory Council of the National Institute on Alcohol Abuse and Alcoholism (NIAAA).

**Description:** Students who drink excessively have higher rates of injuries, assaults, academic problems, arrests, vandalism, and other health and social problems, compared with their nondrinking counterparts. They disrupt the studies and threaten the health and safety of their peers.

The NIAAA Task Force on College Drinking brought together experienced administrators and scientists who assessed what both schools and researchers need to do to establish effective prevention programs. Their recommendations focus not on how to effect some type of blanket prohibition of drinking, but on changing the culture of drinking on campuses and involving the surrounding communities. Foremost among their recommendations is that to achieve a change in culture, schools must intervene at three levels: at the individual-student level, at the level of the entire student body, and at the community level. Research conducted to date strongly supports this three-level approach. Within this overarching structure, schools need to tailor programs to address their specific alcohol-related problems.

Among the recommendations rated as effective by the NIAAA: several treatment strategies that target individual problem, at-risk, or alcohol-dependent drinkers; increased enforcement of minimum drinking age laws; implementation, increased publicity, and enforcement of laws to reduce alcohol-impaired driving; and restrictions on alcohol retail outlet density. The task force noted that the formation of a campus and community coalition involving all major stakeholders may be critical to implement these strategies effectively.

**Evidence Base:**

- [Alcohol, Culture, and Environment Workgroup Recommendations \(ACE Report\)](#), Recommendations Implemented by Educators or Educational Institutions #7, “Wisconsin’s colleges, universities, and the municipalities where they are located, should take steps to create an environment that discourages underage and high risk drinking. This should include adopting the policies and practices endorsed by the Task Force on College Drinking of the National Advisory Council of the National Institute on Alcohol Abuse and Alcoholism (NIAAA)...”
- [A Call to Action: Changing the Culture of Drinking at US Colleges \(NIAAA\)](#)

**Implementation Tools:**

- **A Call to Action: Changing the Culture of Drinking at US Colleges (NIAAA)**
  - **Alcohol, Culture, and Environment Workgroup Recommendations (ACE Report) Recommendations Implemented by Educators or Educational Institutions**
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## Limiting Availability and Decreasing Acceptability: Worksite Setting

By (date), the (ABC) Coalition will reach out to ## employers in (XYZ) geographic area and convene an employer's summit to encourage employers to adopt policies and practices that improve the workplace alcohol environment.

**Description:** Individual alcohol use is influenced by employers' expectations as well as the community alcohol environment. Alcohol-related problems impact worker productivity, workplace safety, and health care costs. The [Alcohol, Culture, and Environment Workgroup Recommendations](#) (ACE Report) suggests that employers take action, such as: evaluate the workplace alcohol environment; ask supervisors to model appropriate alcohol use; prohibit serving alcohol to anyone under the age of 21 at company events and provide a variety of nonalcoholic beverage choices; adopt policy requiring absolute sobriety for employees during business hours; provide SBIRT or BSI screening on-site; and provide follow-up services as part of the employee assistance program for alcohol abuse to reduce the likelihood of relapse.

**Evidence Base and Implementation Tools:** [Alcohol, Culture, and Environment Workgroup Recommendations](#) (ACE Report) Recommendations for Employers

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## Decreasing Acceptability: Enforcing OWI Laws

**By (date), ## law enforcement agencies will participate in High Visibility Enforcement Task Forces (Saturation Patrols) to increase enforcement of OWI laws and discourage impaired driving.**

**Description:** The Wisconsin Bureau of Transportation Safety (BOTS) administers federally funded traffic safety grants to local law enforcement agencies that support High Visibility Enforcement (HVE) task forces. Coalitions can reach out to law enforcement agencies to advocate for HVE Saturation Patrols. These are multijurisdictional or local efforts coordinated by law enforcement to support increased enforcement of OWI (Operating While Intoxicated) laws and make these efforts more visible to the public.

**Components of HVE include:**

- Groups of officers operate in a designated area, pulling over all traffic violators and assessing whether they are alcohol-impaired. If appropriate, a standard field sobriety test and preliminary breath test are administered.
- Operations are well publicized. Electronic message boards, road signs, radio announcements and TV news coverage are used to alert drivers as part of a coordinated strategy to deter impaired driving.

**Note:** Keep in mind that a multi-faceted strategy is required to address a wide range of alcohol-related problems. Drunk or impaired driving is just one problem. The alcohol environment cannot be improved by simply focusing on drunk drivers at the expense of addressing the contributing environmental factors, such as over concentrations of outlet density, intoxicated servers, and underage drinking. More Wisconsin residents died as a result of alcohol-related falls in 2012 than alcohol-related vehicle crashes.<sup>5</sup>

**Evidence Base:**

- **Alcohol, Culture, and Environment Workgroup Recommendations (ACE Report) Municipal Recommendation #7**, “Municipalities individually, or as part of a multijurisdictional task force, should operate well publicized saturation patrols to discourage drunk driving.”

**Implementation Tools:**

- **State of Wisconsin Department of Transportation: Law enforcement traffic safety grants**

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<sup>5</sup> Wisconsin Department of Health Services, Division of Public Health and Division of Mental Health and Substance Abuse Services. Wisconsin Epidemiological Profile on Alcohol and Other Drug Use, 2014 (P-45718-14). Prepared by the Division of Mental Health and Substance Abuse Services, the University of Wisconsin Population Health Institute and the Office of Health Informatics, Division of Public Health. September 2014. Page 15. <http://dhs.wisconsin.gov/stats/aoda.htm>.



- **Saturation Patrols & Sobriety Checkpoints: A How-to Guide for Planning and Publicizing Impaired Driving Enforcement Efforts** (National Highway Traffic Safety Administration)
  - **High Visibility Enforcement Toolkit** (National Highway Traffic Safety Administration)
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## Early Detection & Intervention: Health Care and Worksite Settings

By (date), an additional ## health care providers will implement routine Behavioral Screening and Intervention (BSI, which screens for multiple risky health behaviors) or Screening, Brief Intervention, Referral and Treatment (SBIRT, which screens for excessive alcohol use).

**Description:** Through Behavioral Screening and Intervention (also known as Brief Screening and Intervention, or BSI), patients are systematically screened for excessive drinking, drug use, depression, tobacco, diet, exercise, and obesity. Studies have shown that BSI is better received by clients than SBIRT, possibly because SBIRT's sole focus on alcohol causes defensiveness in some clients.<sup>6</sup>

Both BSI and SBIRT can be delivered in a number of community settings by health educators (recommended), health care providers, counselors, or others. Motivational interviewing techniques are employed to leverage a patient's own motivations for change. The relatively few patients found to have serious disorders, such as major depression, alcoholism, and addiction, are referred according to pathways established by each healthcare setting. Most patients, who have mild to moderate risks, receive definitive care from health educators. These include the 25% of patients in Wisconsin who are not alcoholic but engage in risky or binge drinking. [[Wisconsin Initiative to Promote Healthy Lifestyles \(WIPHL\)](#)]

Coalitions may find that employers, looking to reduce health care costs, will advocate for BSI at local clinics and hospitals.

**Evidence Base:**

- The [National Commission on Prevention Priorities](#) reports that BSI for tobacco and alcohol is more effective at improving health and reducing healthcare costs than screening for cancer, diabetes, high blood pressure and high cholesterol.
- [A study from a CDC-funded injury research center](#) showed that each dollar invested in BSI was returned almost four-fold, \$3.81, through savings of overall healthcare costs.
- "Alcohol screening and brief intervention" received an evidence rating of "scientifically supported" by [What Works for Health](#).
  - There is strong evidence that alcohol screening and brief interventions reduce excessive drinking among adults when administered in primary care and general hospital settings ([WHO-SBI](#), [Cochrane-Kaner 2007](#), [Cochrane-McQueen 2011](#), [IAS-Anderson 2006](#), [NICE-Jackson 2010](#)). Such interventions have also been shown to modestly reduce alcohol-related injuries ([NICE-Jackson 2010](#), [Cochrane-Dinh-Zarr 2004](#)).

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<sup>6</sup> Conversation with Dr. Rich Brown, Director of the Wisconsin Initiative to Promote Healthy Lifestyles, 7/22/14.



Electronic screening and brief interventions (e-SBI) reduce excessive drinking and alcohol-related harms ([CG-Alcohol](#)). Alcohol screening and brief interventions can reduce alcohol consumption among college students ([NIAAA-College drinking 2002](#), [Seigers 2010](#)) and adolescents ([Yuma-Guerrero 2012](#), [NICE-Jackson 2010](#), [IOM-Underage drinking 2004](#)); however additional evidence is needed to confirm the strength of this effect. Such interventions appear to be more effective for men and heavy drinkers ([Cochrane-Kaner 2007](#), [Cochrane-McQueen 2011](#)) than for women and moderate and dependent drinkers. Alcohol screening and brief interventions appear to be cost effective approaches to reducing harmful alcohol consumption ([IAS-Anderson 2006](#), [WHO-SBI](#), [NICE-Jackson 2010](#)).

- Implementation Tools:
- [Wisconsin Initiative to Promote Healthy Lifestyles \(WIPHL\)](#)
  - [Screening for Alcohol Use and Alcohol Related Problems \(NIH\)](#)
  - [Screening Brief Intervention and Referral to Treatment \(SBIRT\) Report to SCAODA, May 2013](#)
  - [SBIRT Training Online \(Wisconsin Department of Health Services\)](#)
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# What Works for Health Definitions

The evidence base for many of the sample objectives in this document comes from *What Works for Health: Policies and Programs to Improve Wisconsin's Health*, produced by the University of Wisconsin Population Health Institute. Each strategy reviewed by *What Works for Health* is assigned an evidence rating based on the quantity, quality, and findings of relevant research, including the results of scientific study and the observations of unbiased experts. *What Works for Health* ratings include:

- **Scientifically Supported:** Strategies with this rating are most likely to make a difference. These strategies have been tested in many robust studies with consistently positive results.
- **Some Evidence:** Strategies with this rating are likely to work, but further research is needed to confirm effects. These strategies have been tested more than once and results trend positive overall.
- **Expert Opinion:** Strategies with this rating are recommended by credible, impartial experts but have limited research documenting effects; further research, often with stronger designs, is needed to confirm effects.
- **Insufficient Evidence:** Strategies with this rating have limited research documenting effects. These strategies need further research, often with stronger designs, to confirm effects.
- **Mixed Evidence:** Strategies with this rating have been tested more than once and results are inconsistent or trend negative; further research is needed to confirm effects.
- **Evidence of Ineffectiveness:** Strategies with this rating are not good investments. These strategies have been tested in many robust studies with consistently negative and sometimes harmful results.

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