



State of Wisconsin
Department of Health Services

Tony Evers, Governor
Kirsten L. Johnson, Secretary

July 9, 2026

The Honorable Tony Evers
Governor
115 East State Capitol
Madison, WI 53702

Dear Governor Evers:

I am pleased to submit the Wisconsin Department of Health Services (DHS) 2024 Annual Report to the Governor on Activities relating to Substance Use Prevention and Treatment in Wisconsin. The report was prepared in accordance with Wis. Stat. § 51.45(4)(p), which requires DHS to submit an annual report on substance use treatment and prevention services. The report highlights substance use disorder prevention, treatment, and recovery programs administered by the DHS Division of Care and Treatment Services. Please note the Department receives this report's underlying data approximately one year after the reporting period. As a result, the report reflects historical activity and differs from current operations.

Substance use disorders remain a significant challenge for individuals, families, and communities across Wisconsin. Successful implementation of evidence-based programs and new initiatives as described in this report supports our goal of Wisconsin becoming the nation's healthiest state, and a place where our young people can grow up safe, healthy, and ready to pursue their opportunities for success.

Sincerely,

Kirsten L. Johnson
Secretary-designee

2024 Annual Report to the Governor on Activities Relating to Substance Use Prevention and Treatment



**WISCONSIN DEPARTMENT
of HEALTH SERVICES**

P-01023 (07/2026)

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

Background

In 2024, the Wisconsin Department of Health Services (DHS) administered:

- \$27,850,203 in federal Substance Use Prevention Treatment and Recovery Services Block Grant (SUPTRSBG) funds.
- More than \$25 million in federal SUPTRSBG Coronavirus Response and Relief Supplement Appropriations Act (CAA) funding.
- More than \$22 million in federal SUPTRSBG American Rescue Plan Act (ARPA) funding.
- More than \$18 million in substance use funds from other federal and state sources.

Need for activities relating to substance use

Table 1 represents the prevalence of Wisconsin youth and adults who used various mood-altering, habit-forming substances and compares Wisconsin against the United States for different measures from the National Survey on Drug Use and Health.

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

Source: SAMHSA, 2022; SAMHSA, 2023 (National Survey on Drug Use and Health).

Substance Use Measure	2021-2022 Survey		2022-2023 Survey	
	Wisconsin	U.S.	Wisconsin	U.S.
Past month alcohol use	58.2%	48.1%	57.0%	48.1%
Past year marijuana use	18.8%	20.5%	22.0%	21.9%
Past year cocaine use	1.7%	1.8%	1.6%	1.8%
Past year heroin use	N/A	N/A	N/A	N/A
Past year pain reliever misuse	2.4%	3.1%	2.7%	3.0%

Table 2 shows the most recent alcohol and drug use data available among Wisconsin youth ages 12-17. Wisconsin consistently reports higher percentages of both alcohol use and binge drinking.

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

Source: SAMHSA, 2022; SAMHSA, 2023 (National Survey on Drug Use and Health).

Substance Use Measure	2021-2022		2022-2023	
	Wisconsin	U.S.	Wisconsin	U.S.
Any alcohol use in the past month	10.2%	7.0%	8.5%	6.5%
Past year marijuana use	12.0%	11.1%	11.1%	11.3%
Past year cocaine use	0.1%	0.1%	0.2%	0.2%
Past year heroin use	N/A	N/A	N/A	N/A
Past year pain reliever misuse	1.6%	1.9%	1.7%	1.9%

In 2023, the most current data available at the time of this report, the rate of people with substance use disorders was approximately 9.8 percent in Wisconsin and 9.2 percent nationally (SAMHSA, 2024). Furthermore, 38.7 percent of people ages 12 and older in Wisconsin report a lower perception of great risk from having five or more drinks of an alcoholic beverage once or twice a week compared to 44.6 percent of people in the United States (SAMHSA, 2025). More specifically, youth ages 12-17 report a much lower perception of risk (37.8 percent) from five or more alcoholic drinks than what national youth report (41.2 percent) (SAMHSA, 2025).

Deaths in Wisconsin relating to drugs have increased over the last decade. The age-adjusted rate for mortality related to drugs increased from 10.9 deaths in 2010 to 29.8 deaths per 100,000 population in 2023 (DHS data dashboard 2025).

Table 3. Wisconsin Drug Overdose Death Rate

Source: DHS data dashboard, 2025.

Drug Involvement	2014	2018	2020	2022	2023
Total drug overdose deaths	14.9	19.3	25.9	31.0	29.8
Drug overdose deaths involving any opioid	11.0	15.3	21.1	24.8	23.9
Drug overdose deaths involving prescription opioids	5.8	12.4	5.8	5.1	4.9
Drug overdose deaths involving synthetic opioids	1.6	9.4	18.1	22.7	22.0
Drug overdose deaths involving heroin	4.9	6.0	4.5	2.2	3.0
Drug overdose deaths involving cocaine	1.7	5.0	6.8	8.0	12.7
Drug overdose deaths involving psychostimulants	0.8	2.2	4.6	6.2	6.5

The impacts of drug use, specifically opioids, are demonstrated in hospital data as well as death records. The age-adjusted rate of emergency room hospitalizations for opioid overdoses more than tripled from 17.1 per 100,000 population in 2010 to 53.7 per 100,000 population in 2021. The hospital trend reversed starting in 2022, declining to a rate of 26.7 in 2024 (DHS data dashboard, 2025).

Substance Use Prevention Treatment and Recovery Services Block Grant

This federal program provides funding to all 50 states to help plan, implement, and evaluate activities to prevent and treat substance use and promote public health. Based on a formula set by Wis. Stat. § 46.40(2m)(a), DHS annually distributes \$9.7 million in community aids from this block grant directly to Wisconsin's 72 counties. At least 20 percent of these funds must be spent on primary prevention activities. The remaining funds are expended for treatment and recovery support services, including a minimum of 10 percent allocated for treatment services for women.

Prevention-related activities

Prevention services funded under the SUPTRSBG must be evidence-based to ensure the greatest impact and highest quality services. In 2024, the following priority areas were the focus of Wisconsin primary prevention service providers:

- Underage drinking (ages 12-20).
- Adult binge drinking (ages 18-34).
- Drinking among pregnant people.
- Drinking and driving (especially among people ages 16-34).
- Opioid use for nonmedical purposes (especially among people ages 20-54).

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

Table 4 shows the percentage of people reached with prevention program services in 2024 compared to their distribution in the general population.

Table 4. Race/Ethnicity Distribution: General Population vs. People Reached, 2024

Source: SAP-SIS User 2024 Report, DHS 2023; 2020 U.S. Census.

Race/Ethnicity	Percent of General Population	Percent of People Reached Through Prevention Programs
American Indian/Alaska Native	1.0%	1.5%
Native Hawaiian/Other Pacific Islander	0.0%	0.0%
Asian	3.0%	3.0%
Black or African American	6.4%	8.1%
Hispanic/Latino	7.6%	4.05%
White	80.4%	78.9%
More than one race	6.1%	2.6%

Table 5 provides a snapshot of the types of county and other local prevention services provided across the state in 2024.

Table 5. Types of Prevention Programs, 2024

Source: SAP-SIS, DHS 2024.

Prevention Program Type	Percent of Prevention Programs (n=222)
Universal indirect — population-based programs and environmental strategies, such as policies or media campaigns.	41.9%
Universal direct — interventions that directly serve an identifiable group of participants with unknown risk, such as afterschool programming or parenting classes.	38.7%
Selective — interventions that serve at-risk populations, such as mentorship programs.	11.3%
Indicated — activities that serve people in high-risk settings, such as student and employee assistance programs.	7.7%
Most Common Types of Activities	
Ongoing classroom and/or small group sessions	45.3%
Other activity	14.6%
Multiagency coordination and collaboration; coalitions	14.2%
Health fairs and other health promotion	4.5%
Media campaigns	4.1%
Education programs for youth groups	3.6%
OUI/OWI education programs	1.6%
Drug-free dances and parties	1.6%
Mentors	1.6%
Recreational activities	1.6%
Accessing services and funding	1.2%
Speaking engagements	1.2%
Peer leader/helper programs	1.2%
Systematic planning	1.2%
Radio and TV public service announcements	1.2%
Student assistance programs	0.8%
Community team building	0.4%
Community volunteer training	0.4%

Alliance for Wisconsin Youth

DHS partners with the Alliance for Wisconsin Youth (AWY) to support community substance use prevention coalitions with training, technical assistance, and resources by contracting with regional prevention centers (RPCs) in accordance with Wis. Stat. § 51.45(7)(b)7 and Wis. Stat. § 250.04(4)(a). This structure allows for all communities throughout the state to receive the support, tools, and resources needed to reduce substance use at the local level.

In 2024, the RPCs:

- Awarded mini-grants to community coalitions to support the state’s substance use prevention priorities using evidence-based primary prevention strategies and the Strategic Prevention Framework (SPF), a data-driven planning process endorsed by SAMHSA.
- Hosted substance use prevention skills trainings to instruct coalitions on the implementation of SPF.

- Covered registration fees for coalition members to attend prevention-related conferences and trainings.
- Supported coalition staff in earning prevention specialist certifications.
- Implemented strategies to reduce the impact of opioids and stimulants in communities.
- Attended quarterly meetings with all RPCs and substance use prevention partners, including the Wisconsin Alcohol Policy Project, DHS Commercial Tobacco Prevention and Treatment Program, and DHS contract administrators to coordinate statewide prevention efforts.
- Provided individualized technical assistance to coalitions through meetings, newsletters, forums, regional gatherings, needs assessments, and learning communities.
- Hosted trainings on:
 - Building and sustaining coalition capacity.
 - Developing and implementing logic models.
 - Applying current drug trends and best practices to strengthen prevention.
 - Providing drug identification training for educational professionals.
 - Empowering youth to take active roles in prevention efforts.
 - Implementing community-level alcohol policy changes.
 - Collecting and analyzing data to evaluate progress.
 - Enhancing collaboration among community partners to expand prevention efforts.

Program Name	Tribal Nations and Counties with Member Coalitions	Annual Funding Amount	Coalitions Served in 2024
Alliance for Wisconsin Youth	7 Tribal nations 72 counties	\$2,604,595	107

Department of Justice SUPTRSBG Youth Prevention and Intervention Program

DHS partners with the Department of Justice (DOJ) to contract with the Social Development Commission (SDC) in Milwaukee to fund substance use prevention education, intervention, and treatment services for participants in the SDCs youth diversion programs required under Wis. Stat. §165.987. Clients with few positive community connections are referred for substance use education and skill-building. As a reminder, this reporting period is for calendar year 2024; at the time of this report's submission, SDC has since closed.

This program:

- Provides substance use prevention and intervention programs and activities to ensure youth have information and resources that help them avoid substance use.
- Plans and implements interactive workshops that help youth develop resilience strategies and address substance use consequences.
- Engages parents and family members to attend activities and learn mindfulness strategies to cope with stressors and support their children as they navigate an uncertain world.
- Implements interactive workshops that encourage physical and social activities, such as dance, spoken word, yoga, journaling, art, puzzles, or similar therapeutic activities.

Program Name	Service Area	Annual Funding Amount	People Served in 2024
DOJ SUPTRSBG Youth Prevention and Intervention Program	Milwaukee County	\$281,600	Unknown*

** Data not available because SDC was closed from April 2024-December 2024.*

Community Improvement and Job Training Program

DHS contracts with Wisconsin Community Services to work with vulnerable, underserved youth and young adults in Milwaukee County. In 2024, the Community Improvement and Job Training Program authorized under Wis. Stat. §46.48(26) provided mentoring, employment readiness workshops, career fairs, driver education support, job skill education, substance use disorder prevention education, violence and gang prevention workshops, community-building activities, and internship placements.

Program Name	Service Area	Annual Funding Amount	People Served in 2024
Community Improvement and Job Training	Milwaukee County	\$250,000	150

Wisconsin Wins

Wisconsin Wins was implemented in 2001. It is a statewide initiative designed to decrease underage sales of commercial tobacco products through retail compliance checks and retailer education. Federal law requires states to conduct an annual survey to determine retailer violation rates for underage tobacco sales. In 2024, Wisconsin’s noncompliance rate was 11.8 percent. In December 2019, the Tobacco 21 federal law raised the minimum legal sales age of tobacco products from 18 to 21. Currently, Wisconsin state law does not align with the Tobacco 21 federal law, which has generated significant confusion and resulted in increased noncompliance rates. Activities in 2024 to address the confusion and reduce the noncompliance rate included compliance investigations using a positive reinforcement protocol, law enforcement involvement, promotion of retailer training on the WI Tobacco Check website, community outreach activities, and a statewide public awareness campaign.

Retail Tobacco Sales to Minors: Noncompliance Rate	
Year	Rate
2015	6.8%
2016	7.2%
2017	7.7%
2018	5.8%
2019	5.5%
2020	N/A
2021	14.1%
2022	11.9%
2023	13.6%
2024	11.8%

Problem gambling awareness campaign

DHS contracts with the Wisconsin Council on Problem Gambling (WCPG) to administer a statewide problem gambling awareness campaign under Wis. Stat. § 46.03(43) and to operate a free, 24-hour helpline (1-800-GAMBLE-5). In 2024, the WCPG estimated more than 333,000 Wisconsin residents experienced a gambling problem affecting their finances, families, and employment, with an average reported debt of \$27,573. The societal cost of problem gambling in Wisconsin is estimated at \$10,000 per individual, accounting for lost productivity, crime, and health care expenses. During 2024, the WCPG helpline received 14,870 calls, 57 chats, 37 text messages. The WCPG website recorded 12,576 visits.

In 2024, the WCPG hosted an annual conference for professional counselors and provided a 60-hour training program for therapists seeking certification to treat individuals with gambling disorders. A total of 243 individuals completed WCPG trainings. The WCPG also provided educational outreach to prevent gambling-related harm among youth and adults. The organization offered classroom presentations at schools, colleges, correctional institutions, and community organizations. A total of 310 high school students and four staff in 14 different classrooms participated in these prevention sessions.

Program Name	Service Area	Annual Funding Amount	Interactions in 2024
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Problem Gambling Awareness Campaign	Statewide	\$396,000	28,093
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Tribal initiatives

In 2024, DHS provided more than \$1 million in SUPTRSBG funds to Wisconsin’s 11 federally recognized Tribal nations to address substance use disorder prevention under the Tribal family services program authorized by Wis. Stat. § 46.71(1). DHS staff worked with the Tribal nations to identify the extent of substance use disorders and determine appropriate interventions.

Program Name	Service Area	Annual Funding Amount	Estimated Number of People or Families Served in 2024
Tribal Family Services	All 11 federally recognized Tribal nations	\$1,138,900	7,234

Small Talks campaign

The Small Talks campaign aims to prevent underage drinking by providing adults with the information and resources they need to connect with kids early and often on issues related to alcohol use. In 2024, DHS promoted Small Talks through professional conferences, health fairs, social media, and Alliance for Wisconsin Youth coalitions.

Recognizing Wisconsin’s drinking culture, in 2024, DHS expanded the Small Talks toolkit with new resources designed to help parents model healthy behaviors and address drinking norms. Updated materials included “your drinking habits becomes your child’s drinking habits” infographics and other tools that encourage open communication. These infographics were downloaded over 2,000 times in 2024.

Dose of Reality campaign

In 2024, DHS focused on opioid overdose prevention through the Dose of Reality campaign, the state’s effort to educate the public about opioid use disorder. A public awareness campaign called “I carry hope, I carry naloxone” was implemented statewide through paid media to encourage state residents to make naloxone, an opioid overdose reversal medication, part of things they have on them wherever they go.

Treatment and recovery-related activities

Each year, approximately 75 percent of the SUPTRSBG is expended for treatment and recovery support services. In 2024, more than \$70 million in block grant, county tax levy, county revenue, and other federal and state funds were expended by county agencies to provide substance use treatment and support services for the people of Wisconsin. In 2024, county agencies reported the following treatment service outcomes for people having substance use diagnoses:

Table 6. Wisconsin Addiction Treatment Outcomes

Outcome Measure	2024 Outcome
Completed treatment	57.6%
At discharge, no drug use in the past 30 days*	79.9%
Employed at discharge*	65.0%
Not rearrested at discharge*	91.8%

*Includes data on people completing treatment only.

Taken from SAMHSA TEDS discharge reports.

Intoxicated Driver Program

The goal of the Intoxicated Driver Program (IDP) is to engage individuals who drive under the influence in an assessment to determine appropriate referrals to education and treatment services. This process provides a critical intervention aimed at reducing future occurrences of impaired driving. The program is self-supported through fees collected for assessments. DHS oversees Tribal nations and counties responsible for screening, referral, and treatment services for individuals convicted of operating while intoxicated under Wis. Stat. § 346.63.

Each county retains approximately 40 percent of the driver improvement surcharge paid by individuals convicted of operating while intoxicated offenses under Wis. Stat. § 346.655. These funds support treatment services for intoxicated drivers, particularly those who are uninsured, underinsured, or facing financial hardship. Each year, DHS allocates supplemental funding to Tribal nations and counties to offset excess treatment costs for clients referred through the IDP. These funds ensure no individual is denied or delayed access to required services due to inability to pay.

2024 County Authorized People Served	
21,066 in calendar year 2024*	
Primary substance use	
Alcohol	60%
Opioids	10.1%
Amphetamine	13.0%
Marijuana	9.4%
Cocaine	8.6%
Treatment setting	
Outpatient	78.2%
Withdrawal management	15.7%
Residential-long	21.6%
Residential-short	1.5%
Inpatient	0.8%
Gender	
Male	67%
Female	33%
Age	
Under 18	1.8%
18–24	11.6%
25–44	56.1%
45–64	27.1%
65+	3.8%
Race/ethnicity	
White	74.7%
Black	9.3%
American Indian	2.8%
Nat. Hawaiian/Pacific Isl.	<1%
Asian	2.6%
Multiracial	4.4%
Hispanic or Latino	8.9%
Not Hispanic/Latino	91.1%

Program Name	Service Area	Annual Funding Amount	People Served in 2024
Intoxicated Driver Program	Statewide	Self-supporting	23,901
Supplemental/emergency funds	11 counties	\$335,800 awarded	646

Criminal and youth justice programs

For many individuals, the justice system provides a critical pathway to treatment and recovery. DHS administers and partners on five programs designed to address substance use among justice-involved populations through coordinated screening, assessment, treatment, and monitoring services.

Program Name	Grantees	Annual Funding Amount	People Served in 2024
Community Partnership Diversion Youth Justice	Brown, Dane, Door, Portage, Trempealeau, Washburn, Wood	\$1,608,715	141 youth in programs, 1,051 by

	counties; Bad River Band of Lake Superior Chippewa		outreach activities
Treatment Alternative Program	Lutheran Social Services (Eau Claire), Wisconsin Community Services (Milwaukee), Dodge County Human Services, and Rock County Human Services	\$900,962	122
Youth and Adult Institution, Halfway House, and Community Treatment	Department of Corrections	\$1,347,417	964
Prisoner Reintegration	Wisconsin Community Services	\$125,000	50
Non-narcotic, Non-addictive Injectable Medication-Assisted Treatment Services within Jail and Community Settings	Bayfield, Brown, Dane, Dodge, Kenosha, Racine, Shawano, Washington, Dunn, Sauk, Sheboygan, Richland, and Marquette counties	\$750,000	1,873

Treatment alternative program and diversion programs

DHS provides grants to local agencies that offer eligible individuals the opportunity to participate in treatment as an alternative to incarceration or criminal charges. Criminal justice system partners refer participants to these programs voluntarily. Eligibility is determined using evidence-based risk and needs assessments tailored to each county's program design and priorities.

Treatment alternative programs are authorized under Wis. Stat. § 46.65 and funded through the SUPTRSBG and state general purpose revenue authorized under Wis. Stat. §46.55. Programs may operate independently or in collaboration with other local diversion efforts to expand access to services. Each year, more than 3,500 days of incarceration are averted through participation in these programs. The programs focus on providing substance use screening, assessment, treatment, and ancillary supports for individuals referred from the criminal justice system. Evidence-based treatment and case management are central to addressing individual needs, reducing criminogenic risk factors, and supporting recovery. Seventy-five percent of each grant award must be used to provide direct treatment services to program participants.

Department of Corrections

DHS offers grants to the Department of Corrections (DOC) to provide substance use services to individuals both within state prisons as well as in the community. Four separate grants are offered to serve community corrections. The funds are used to provide gender-responsive substance use services to women prior to their release into the community; residential treatment beds for those on probation, parole, or extended supervision; and youth services both within the facility and in the community. In collaboration with DOC, a certified peer specialist program provides support for Division of Community Corrections clients from the beginning of the recovery process.

Medication-assisted treatment in a jail setting

Tribal nations and counties provide non-narcotic, non-addictive, injectable medication to jail residents within the five days preceding their release into the community. In 2024, 13 county health and human service departments and their county jails applied for \$750,000 in state funds authorized by Wis. Stat. § 46.47 to prevent the risk of opioid overdose and assist individuals in their recovery from an opioid use disorder. The program consists of medication-assisted treatment education, naltrexone injection, case management, peer support services, and reentry services until participants have a treatment plan established in their county of

residence. Participating counties must have an established drug court, provide care coordination for residents exiting county jails, and enroll participants in Medicaid as needed for the continuation of care after release.

Prisoner reentry program

The prisoner reentry program authorized under Wis. Stat. § 46.48(8)(b) provides \$125,000 in state funds annually to assist people in Milwaukee County transition from incarceration to community living by engaging participants with pre-release planning and improving continuity between pre-release and post-release services. The program fills a gap of needs not covered by the reentry initiatives managed by the DOC. Participants receive case coordination prior to their release from peer support and case managers. This coordination assists in planning for and obtaining housing, employment, education, and treatment needs that offenders may have upon release.

Outreach and treatment program for people who inject drugs

In 2024, many organizations provided injection drug use prevention, overdose prevention, and treatment services throughout Wisconsin. SUPTRSBG funded organizations Vivent Health, Public Health Madison and Dane County, and Waukesha County Department of Health and Human Services implemented prevention strategies in Adams, Columbia, Dane, Dodge, Douglas, Fond du Lac, Green, Iowa, Jefferson, Juneau, Kenosha, La Crosse, Manitowoc, Marinette, Milwaukee, Racine, Rock, Sauk, Sheboygan, Vilas, Waukesha, Waupaca, and Winnebago counties. Injection drug use prevention services focused on outreach and education, pre-treatment services, and naloxone training and distribution. SUPTRSBG funded treatment strategies, which included screening, assessment, and implementation of evidence-based treatment practices for people who inject drugs were conducted by the following agencies: Milwaukee County Behavioral Health Division, Waukesha County Department of Health and Human Services, Vivent Health, United Community Center, and Unity Point Meriter. Grantees worked to identify and prioritize people who inject drugs who were uninsured or underinsured. Data collected by grantees highlights the important work they performed across the state throughout 2024.

Program Name	Grantees	Annual Funding Amount	People Served in 2024
Injection Drug Use Prevention	Public Health Madison and Dane County, Vivent Health, Waukesha County Department of Health and Human Services	\$749,961	37,324
Injection Drug Use Treatment	Milwaukee County Behavioral Health Services, Waukesha County Department of Health and Human Services, United Community Center, Unity Point Meriter and Vivent Health	\$1,268,371	676

Opioid and methamphetamine treatment centers

In 2024, the opioid methamphetamine treatment centers created under Wis. Stat. § 51.422 served 571 people in rural areas of the state.

Program Name	Grantees	Annual Funding Amount	People Served in 2024
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Opioid Methamphetamine Treatment Centers	St. Vincent Hospital of the Hospital Sisters of the Third Order of St. Francis (d.b.a. Northeast Wisconsin Heroin Opioid Prevention Education), Family Health Center of Marshfield (d.b.a. HOPE Consortium) NorthLakes Community Clinic, Family Health Center-Ladysmith Alcohol and Drug Recovery Center, Lake Superior Community Health Center	\$2,682,666	571
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Gender-specific outreach and treatment

In 2024, DHS provided oversight for seven community programs in partnership with Tribal nations, counties, and community providers to provide specialized services to women who were pregnant, women with dependent children, and their identified family members. The programs provided an array of services that included community outreach, overdose prevention efforts, substance use treatment, parenting skills education, health education, child and family therapy, on-site childcare, vocational assistance, housing assistance, and services to address the comprehensive needs of families, including children affected by familial substance use.

Program Name	Grantees	Annual Funding Amount	Family Units Served in 2024
Outreach and treatment for low- income and multisystem-involved people, Wis. Stat. § 46.55, programs that reach urban and rural communities, Wis. Stat. § 46.86(6), with treatment programs which meet the special needs of women, Wis. Stat. § 46.975(2)(b)	ARC Community Services, Ho-Chunk Nation, Meta House, United Community Center, Waukesha County	\$2,079,770	336
Milwaukee family-centered treatment, Wis. Stat. § 46.86(1), (2m), and (3m)	Community Advocates, Meta House, United Community Center	\$1,105,000	166
Healthy Beginnings, Wis. Stat. § 46.48(29)	ARC Community Services	\$262,500*	16**
Division of Milwaukee Child Protection Services substance use services, Wis. Stat. § 48.561(3)(a)(2)	Department of Children and Families, Division of Milwaukee Child Protective Services	\$1,583,000	300
Women and dependent children services, Wis. Stat. § 46.86(5)	ARC Community Services	\$235,000	32***
Temporary Assistance for Needy Families – substance use services, Wis. Stat. § 46.48(30)	Milwaukee County Behavioral Health Services	\$4,394,595	661
Coronavirus Response and Relief Supplemental Appropriations Act, Wis. Stat. § 51.46 and 51.42(3)	Bethany Christian Services, Family Services of Northeast Wisconsin, Lutheran Social Services	\$1,000,000	270

* Funding total includes state fiscal year 2024 budget and grant issued from July 1, 2024, through December 31, 2024, due to a transition of this contract from state fiscal year to calendar year.

** Number served includes state fiscal year 2024 grant and the grant issued from July 1, 2024, through December 31, 2024, due to a transition of this contract from state fiscal year to calendar year.

*** Number served calculated from state fiscal year 2024 reports covering activities from July 1, 2023, through June 30, 2024.

Underserved populations

In 2024, more than 20 percent of people served by the state's public substance use services were members of a racial/ethnic underserved group, a key focus for providers statewide. DHS supported four initiatives addressing substance use treatment and support for underserved populations, including the Urban Black and Hispanic Program under Wis. Stat. § 46.975(2)(a), bilingual residential treatment under Wis. Stat. § 46.48(5), and urban youth prevention services. Additionally, three Tribal nations received SUPTRSBG funds to provide culturally specific substance use services.

Program Name	Grantees	Annual Funding Amount	People Served in 2024
Urban Black and Hispanic Program	Community Advocates, Waukesha County	\$200,000	141
Bilingual residential treatment	United Community Center	\$220,842	60
Urban youth prevention	Kenosha, Rock, and Waukesha counties	\$150,000	1,650
Tribal nation substance use treatment	Lac du Flambeau Band of Lake Superior Chippewa Indians, Forest County Potawatomi Community, Sokaogon Chippewa Community	\$21,800	21

Addressing methamphetamine use

In Wisconsin, methamphetamine use is surging, particularly in the western and northwestern regions. In 2024, DHS continued offering evidence-based treatment training sessions to service providers on the Matrix Model, contingency management, and other evidence-based treatment approaches. Additionally, DHS allocated \$200,000 in SUPTRSBG funds to four counties in northwestern Wisconsin to cover costs for methamphetamine treatment services.

Program Name	Grantees	Annual Funding Amount	People Served in 2024
Methamphetamine Treatment	Barron, Burnett, Polk, and St. Croix counties	\$200,000	107

Comprehensive Community Services

Comprehensive Community Services is a program for people of all ages who need ongoing services for mental health or substance use concerns beyond occasional outpatient care, but less than intensive care provided in an inpatient setting. CCS is administered by DHS and operated by Tribal nation and county agencies, with 17,892 people served in 2024 by the three Tribal agencies and 70 county agencies that offer the program. Thirty-two percent of participants served in 2024 had a known substance use concern (excluding tobacco).

Peer specialists

The Wisconsin Peer Specialist Employment Initiative trains and certifies peer specialists and certified parent peer specialists to work in a variety of mental health and substance use settings. Certification is awarded after completing a DHS-approved training and passing a DHS-approved exam. A certified peer specialist is an individual with experience with mental health and/or substance use issues. A certified parent peer specialist is an individual with experience raising a child with behavioral health challenges. SUPTRSBG funding was used

to support peer specialist training and certification activities. As of December 2024, there were 163 certified parent peer specialists and 1,545 certified peer specialists in Wisconsin.

Substance Use Block Grant American Rescue Plan Act supplemental funding

DHS was awarded \$22,016,587 in the block grant supplemental funding through the American Rescue Plan Act for the period of September 1, 2021, through September 30, 2025. At least 20 percent of funds must be spent on primary prevention activities. The remaining funds are expended for treatment and recovery support services, including a minimum of 10 percent allocated for treatment services for women.

In 2024, this funding provided \$3.7 million in community aids funding to Wisconsin's 72 counties and \$300,000 to Tribal nations, \$500,000 for substance use crisis services, \$250,000 for overdose prevention strategies, \$1.3 million for recovery and peer support services expansion, \$880,000 for substance use prevention activities, and \$1 million for treatment services for women.

This funding also supported the development of the Wisconsin Suspected Overdose Alerts for Rapid Response (WiSOARR) system. This system is for professionals working in substance use prevention, treatment, and recovery support services. It provides near real-time data on suspected drug overdoses to inform community actions to save lives.

State Opioid Response Grant

A total of \$17,508,010 of State Opioid Response grant funding from SAMHSA was available from October 2023 through September 2024 to address the overdose epidemic and the misuse of opioids and stimulants.

DHS used this funding to support community coalitions and public awareness campaigns, unmet treatment needs, the expansion of medication-assisted treatment for opioid use disorder, opioid treatment centers, recovery supports, and workforce development.

Projects funded by State Opioid Response grant funds included:

- The NARCAN® Direct Program. This program provided NARCAN® at no cost to a community-based agencies for local distribution —561,428 two-dose naloxone kits were shared with people and 4,748 opioid overdoses were reversed in 2024.
- The Fentanyl Test Strips Direct Program. This program purchased 956,320 fentanyl test strips that were distributed to community agencies, with 105,623 fentanyl test strips shared with people in 2024.
- Overdose prevention vending machines. A total of 22 agencies purchased 40 new overdose prevention vending machines in 2024.
- The Wisconsin Addiction Recovery Helpline. This service received 6,467 calls, chats, and texts in 2024.
- The ED2Recovery Project. This program connected 793 people who experienced an opioid overdose to a recovery coach, with 727 people receiving on-going recovery support services in 2024.
- The Opioids, Stimulant, and Trauma Summit. More than 900 people attended this training event either in person or virtually.

Of the people who received treatment services, 488 were for an opioid use disorder and 1,102 were for a stimulant use disorder.

A total of 3,848 people received recovery support services, including peer support, recovery housing, and assistance in finding and keeping a job.

State Council on Alcohol and Other Drug Abuse

DHS provided staff services to the State Council on Alcohol and Other Drug Abuse (SCAODA) and its four standing committees — prevention, diversity, intervention and treatment, and planning and funding.

Emerging Leaders Program

The Emerging Leaders Program advances the SUPTRSBG priority for culturally appropriate and comprehensive services for underserved communities by providing trainings, technical assistance, and consulting sessions/modules to providers who serve underserved communities interested in leadership development and skill building.

Quality improvement programs

- **Motivational interviewing implementation**

Motivational interviewing is a proven approach to address a range of behavioral health challenges. In 2024, DHS provided 17 skill-building workshops (1-6 hours each) serving 393 multidisciplinary professionals. Following training, DHS provided 31 consultation sessions with 20 motivational interviewing coaches, 60 consultation sessions for implementation support, and facilitated 99 team meetings across sites in the motivational interviewing implementation project.

- **Screening, Brief Intervention, and Referral to Treatment implementation**

Screening, Brief Intervention, and Referral to Treatment (SBIRT) is a proven approach to address risky substance use in health care and school settings. In 2024, DHS continued to provide technical assistance for Wisconsin's school SBIRT implementation project.

A statewide outcome evaluation involving 251 students showed SBIRT was most effective for students who presented with more problem symptoms, for students who were self-referred, and for students with whom practitioners delivered brief interventions focused on behavioral health concerns versus focused on school-based concerns.

Citations

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