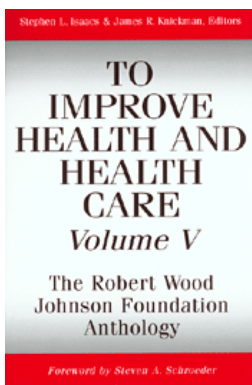




Chapter Seven,
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Anthology:

**To Improve Health
and Health Care,
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Editor's Introduction

Alternative schools emerged in the 1960s as a way of offering programs designed to meet the educational and therapeutic needs of troubled youngsters who were not succeeding in the public school system. They were seen by their advocates as an answer to juvenile crime and delinquency, a means of reducing school violence, and a way of increasing educational effectiveness.

In this chapter, best-selling author Digby Diehl tells the story of Recovery High in Albuquerque, New Mexico, an alternative school for substance-abusing adolescents. It is a story that, although focused on an individual school, raises troubling issues of great importance for our society. Are alternative schools an effective way to meet the therapeutic and educational needs of young people with substance abuse problems? What is a fair way to allocate funds between meeting the normal educational needs of most children and the extended and more costly needs of those with special disorders? Who should bear the cost of treating and educating substance-abusing children—the educational, justice, health, or social service system, or some other system?

The grant to the Albuquerque Public School District was an unusual one for the Robert Wood Johnson Foundation in a number of ways. The Foundation does very little with schools, since education is not one of its priorities. It is also rare to receive a grant request from a group of concerned parents rather than an established organization. Recovery High does, however, demonstrate the importance to the Foundation of ad hoc grants, those based on unsolicited requests sent by individuals. This grant-making mechanism allows the Foundation to support creative ideas from people who want to make a difference, and enables the Foundation's staff to learn about potential emerging areas of grantmaking.

Thanks to Recovery High, I have been sober for seven years. The school is where I got the strength and confidence I needed, because when I went in I had no self-esteem. These people showed that they cared for me, that they were there for me no matter what. Walking out of that school was probably the hardest thing I ever had to do.

Andrea Blaine
Former Student
Recovery High

Recovery High was known as a safe place, a drug-free place, a therapeutic place. Clinically, it was working. Politically, it was a disaster.

Buzz Biernacki
Former President
Recovery High Board

Recovery High Board Recovery High was ignored as a resource for the very school system it was intended to serve. The system had nothing but contempt for us. No matter how hard we tried, no matter what processes we went through to reach out, they simply wouldn't refer students to us.

Michael Hays
Former History/English Teacher
Recovery High

There's a lot of moral stuff around substance abuse that people can't let go of; they don't understand it's a disease. They see it as something morally wrong—which made us controversial.

Jan Hayes
Former Principal
Recovery High

I never had an interest in Recovery High School, so it's the only school I haven't visited. I never saw it as permanent. I don't think of it as a school, more like a therapy institution.

Board Member
Albuquerque Board of Education¹

I truly believe that the basis for most of the resistance to Recovery High was a deep-seated feeling that these children should not be seen and not be heard. That attitude was reflected by the society, by the school district, by the families, by individuals. Substance abuse was perceived as a shameful fault, not as a medical or psychological problem. These children were regarded as inferior. On a personal level, I was shocked that parents and educators were not flocking to the doors of Recovery High to bring us kids. I saw those kids every night in the Emergency Room.

Robert Gougelet
Emergency Room Physician and
Former Recovery High Project Liaison

There were people saying, "Those kids aren't worth it. We're spending money on kids that aren't worth a damn, and the good kids are getting short-

changed." To many people, Recovery High was like a wart.

Jack Bobroff

Former Superintendent
Albuquerque Public Schools

Recovery High School was an innovative alternative school in Albuquerque, New Mexico, for adolescents who were dependent on drugs and alcohol. The school integrated educational, therapeutic, and medical services. Funded primarily by the Robert Wood Johnson Foundation and supported, with increasing reluctance, by the Albuquerque Public Schools Board, it was in operation from February, 1992, to May, 1995. The quotations represent the dichotomy of attitudes within the community about Recovery High. Ultimately, this polarization over the value of the school, coupled with the expense of running it, proved to be its undoing.

ORIGINS

Recovery High originated with one man. Lou Sadler was a determined Albuquerque father whose son was a substance abuser. Like many parents faced with this problem, Sadler found it difficult to get his child the help he needed. At the time, teenage substance abusers were like pinballs in a particularly merciless arcade game, forcefully colliding with various posts and pillars in the social fabric—the schools, the cops, the courts, their families, inpatient facilities, outpatient facilities, detention facilities—only to ricochet back and forth among them because no single institution could give them the comprehensive help they needed. Teenage substance abusers were everyone's problem but no one's responsibility.

The Albuquerque public school system is one of the largest in the country, in terms of both geography and population. Covering a landscape the size of Rhode Island, with 120 schools and 85,000 students, the district also lies at the crossroads of two major drug pipelines—Interstate 25, by which drugs come north from Mexico, and Interstate 40, which links California ports of entry with Arizona, New Mexico, Texas, and the south. Illegal drugs flowing through Albuquerque include powder cocaine and crack cocaine, marijuana, black-tar heroin, and methamphetamine. (Much of the methamphetamine is locally manufactured.) In 1990, the Albuquerque area was included in a federally designated High Intensity Drug Trafficking Area. According to the Office of National Drug Control Policy, "Gangs facilitate much of the

drug distribution that occurs at street level and are responsible for much of the drug-related violence in the region."²

In 1990, the rate of teenage deaths by accident, homicide, and suicide in New Mexico was 70 percent higher than the national average.³ Some 2,000 Albuquerque public school students were suspended for substance abuse every year, and more than 500 middle-school and upper-school students in the Albuquerque school system were receiving treatment for chemical dependency. The New Mexico Boys and Girls Schools, which are juvenile-correction facilities, were admitting more than 800 juveniles annually, most of whom were from the Albuquerque area.⁴

An unknown number left the system before getting treatment, but even for kids who got professional help, relapses into drug use were the norm, not the exception.⁵ Most teenagers recovering from alcohol or chemical dependency who returned home were shunned by straight students once they reentered school, and they were not strong enough emotionally to rebuff overtures from substance-abusing former friends. Sadler's own son relapsed repeatedly, and was in and out of a series of conventional inpatient treatment centers. "Kids who spend four weeks in those places dry out and come home sober, but only because they've been under lock and key for a month," Sadler says. "I got pretty frustrated with facilities that turn out thirty-day wonders. They all claimed a low recidivism rate, but it never worked out that way. My son eventually got into trouble with the law, so I was finally able to get him into a very tough long-term treatment program in Texas that was successful. From that experience, I realized that recovery had to be a long-term process for a child—for anybody."

Helping his son become clean and sober did little to elevate Sadler's opinion of the way the Albuquerque public school system handled recovering substance abusers. In fact, the approach was inconsistent. Some students who had left school to participate in rehab programs were told upon trying to return to class that they had been dropped from the rolls for excessive absenteeism. Others, Sadler's son among them, were dumped back into the same classes they had left, with little or no effort made to cover the material they had missed. "My son ended up being out of school for three months, and they *still* graduated him," says Sadler, who is a no-nonsense builder-contractor. "I thought that was ignorant and bad and stupid."

With a reputation for being plainspoken and assertive if not downright confrontational, Sadler closed his contracting business and threw himself full force into the problem, becoming a member of New Mexico Governor Garrey Carruthers' Substance Abuse Advisory Council, and Albuquerque Mayor Ken Schultz's

Kitchen Cabinet. With a group of other individuals, he founded Parents Against Drugs, a private, nonprofit organization of parents, community activists, and treatment professionals, in 1987. Led by Sadler, Parents Against Drugs set out to develop a better way to help teenagers who were abusing drugs and alcohol. "I wanted to come up with something that would enable kids to stay sober, and allow them to continue their education," Sadler says.

Using political connections and the media effectively, he and Parents Against Drugs mobilized governmental machinery to start an alternative educational facility for recovering substance abusers—in effect, a magnet school for kids who were newly sober. In 1989, Parents Against Drugs was instrumental in pushing a resolution through the New Mexico legislature "requesting a study of the feasibility of creating an alternative education magnet school for students with substance abuse problems."¹⁶ The Albuquerque City Council and the Albuquerque Public Schools Board both endorsed the concept, but only with the reservation that the school be "built and operated through funds provided entirely by private foundations and federal and state government."¹⁷ The indefatigable Sadler then spearheaded a drive to find funding for the school, and wrote to the Robert Wood Johnson Foundation.

"I received a letter from Parents Against Drugs," recalls Paul Jellinek, a vice-president of the Robert Wood Johnson Foundation. "Initially, the group wanted a truckload of money to build a new school; I advised them to go after a small planning grant that would help them refine their model of how an alternative education facility would function."

As a result, the Foundation gave Parents Against Drugs \$75,000 to flesh out the concept. Jellinek also made another crucial recommendation. "I told them that once they'd developed a plan for a school, a major organization would have to take responsibility for it," he says. "There was no way that the Robert Wood Johnson Foundation could give a large grant to what was essentially an informal group of parents. My own instincts were that the best way to do this was through the Albuquerque public school system, so that whatever school was developed was integrated into the broader system."

THE MODEL

The school was originally conceived as a transitional facility, a "halfway school" for young people who had successfully completed a course of treatment for substance abuse. These were to be "moderately troubled adolescents whose primary need was to be isolated from the drug culture of their schools."¹⁸

The alternative school was established to "provide a program of adolescent substance abuse, recovery and relapse prevention within a supportive educational setting.... The goal was to enable adolescents to return to the regular school system with the support and skills necessary to remain abstinent."⁹ Students were expected to spend six months to a year at this way station before returning to a conventional high school. To minimize contact with drug-using old friends, this was not, in most cases, expected to be the school they had left. As a defense against ostracism in their new environment, the plan called for "graduates" to be mainstreamed out not singly but in small groups, so that they could form their own peer support networks at their new school.

With "aftercare" or reentry kids as the primary target population, the Parents Against Drugs proposal anticipated being able to serve up to 200 students at a time. Before the school opened, however, the proposal was modified to include students who had not had any formal treatment. The change was made to enable the school to become a resource for the large number of teenagers in Albuquerque who were uninsured (estimated to be about 30 percent of the school population),¹⁰ and who thus had no other access to substance abuse treatment. "We wanted this school to be open for anybody who really needed it," says Robert Gougelet, a University of New Mexico professor of emergency medicine and physician who was involved in setting up the program.

During the planning phase, Sadler and others researched the handful of educational facilities in different parts of the country that also tried to combine academics with therapy for teenage substance abusers.¹¹ With the experience of these other schools incorporated into the model, the alternative school began to take shape.

The Parents Against Drugs proposal defined three goals for the program: (1) maintenance of sobriety; (2) improvement of family relationships and support; and (3) educational success in a program that integrated recovery skills with education.¹² Progress toward these goals was monitored by Susan Leonard Thaler and Paul Moberg of the University of Wisconsin's Center for Health Policy and Program Evaluation, who were retained by the Robert Wood Johnson Foundation.

The therapeutic model chosen for the school was that of a community or milieu in which "teachers, clinicians, support staff, students, and the students' families are all involved in the development of a recovery process for the student, focused around the 12 Steps of Alcoholics Anonymous."¹³ The idea was to create a positive environment within the school that would support a comprehensive change in both

attitude and behavior. The community itself was to function as the primary therapist, and within it, anything and everything was therapeutic. Key components included art therapy and experiential or wilderness training, with a ropes course and other outdoor activities. The involvement of family members in the recovery process was believed to be critical. Although the school planned to use the standard curriculum of the Albuquerque public school system, by design there was to be no real division between academics and therapy.

In response to the 300-page proposal submitted by Parents Against Drugs, in April of 1991 the Robert Wood Johnson Foundation awarded an \$812,000 implementation grant to the Albuquerque Public School District to get the school up and running. Four months later, the school board grudgingly appropriated \$267,000 in matching seed money for the alternative school, with the proviso that the board would support the facility for only a two-year period.

START-UP

The original organization chart for the school called for a project director at the head, a "big picture" individual who would be responsible not only for coordinating the program but also for dealing with external bureaucracies, including state and local governmental authorities and the school system itself. The most important responsibility of the project director was to raise funds, in order to establish the long-term financial security of the school. This fund-raising assignment would play a decisive part in the future of Recovery High, since neither the Robert Wood Johnson Foundation nor the Albuquerque school board intended to continue funding the project over the long term.

Having brought the concept this far, Lou Sadler was the most likely candidate to become project director, and on July 25, 1991, he signed a contract with the Albuquerque Public School District to head the school. The opening date was set for October 15 of that year. Three professionals were to handle the day-to-day running of the school under Sadler's direction: a full-time principal responsible for academics and daily administration; a full-time intervention director to oversee the therapy program; and a part-time medical director to deal with the children's health needs.

On September 3, Jan Hayes, an external candidate for the position, was hired as principal. Three days later, and just six weeks before the projected opening day, the school board canceled its contract with Sadler for having misrepresented his educational qualifications on his resume. His abrupt departure

delayed the opening of the school by four months, and left Jan Hayes as the de facto head of the entire school, not just the educational component.¹⁴

Jack Bobroff, who was then superintendent of schools and a supporter of the concept, fired Sadler at the direction of the board of education. The circumstances were curious. "One of our board members got an anonymous telephone call saying that Lou Sadler didn't have a college degree," Bobroff says. "In soliciting applications for project director, we hadn't asked for one, but the board found it unacceptable that a person would not tell the truth on his resume, and on that basis Lou was terminated. In many ways, that contributed greatly to the downfall of the program. With his tenacity and his fervor, Lou had been a great moving force, and that was lost. Jan Hayes did a good job dealing with the kids and running the program, but she had her hands full with the internal workings of the school. She didn't have time to pursue fundraising."

Sadler still regrets his misstep. "I attended the University of Maryland, but never graduated," he says. "On my resume, I said I'd gotten a degree. I gave the board a reason to get rid of me, and that was bad. Because they never replaced me, even though they had the money, they lost the opportunity to really go ahead and create funding and long-term programs for the school."

Sadler's fiery exit made it inevitable that the school would be born in a barrage of controversy and bad press.¹⁵ There was even a flap about what to call it. Some within the district argued strongly for an innocuous Southwestern name—Mariposa (butterfly) was a leading contender. In the end, it was the students themselves who spoke up for the truth-in-packaging approach, and dubbed the school Recovery High. It finally opened its doors at 2700 Yale SE on February 18, 1992, with a staff of 12 and a student body of 3.¹⁶

THEORY MEETS REALITY

Although Sadler and Parents Against Drugs had been conscientious in developing the plan for the school, from the first day Recovery High never functioned according to the original model. The low enrollment indicated more than just the school's start-up woes; it reflected a genuine and deep-seated reluctance on the part of other members of the Albuquerque public school system community to refer students to Recovery High. Fewer than a quarter of all Recovery High students were referred by a school counselor or an administrator.¹⁷ "We were astonished by some of the responses we got, especially from

principals," says Michael Hays, who taught English and history at Recovery High. "Principals told us, 'We don't have a drug problem in our school'—but I don't know of a school that doesn't have one."

Although denial was undoubtedly a major factor, a lot of the problem at the beginning boiled down to dollars and cents. By law, every school district in New Mexico gets its funding from the state, and under what is known as the New Mexico equalization formula, the school district distributes to each school its fair share based on its enrolled population. One date each October is designated as school Census Day, when the school system literally counts heads and divvies up the budget accordingly. This simple formula produced some unintended consequences for the new school. Former Recovery High Board President Buzz Biernacki knew how the math was done: "At budget time, if your school had 100 kids, you got 100 slices of the pie. But if you only had 90 kids because Recovery High had your 10 others, you got ten slices less of the pie. So if you were a school principal, you weren't about to fess up to any substance abuse problem until after that October cutoff date."

After the October census, however, principals of mainstream schools had an incentive to purge substance-abusing students. Not only were they ridding their school of "troublemakers," but they also got to keep the money. Whether students transferred to Recovery High, were expelled, or simply dropped out, their per capita allocations were retained by the school of record. In 1992, the Albuquerque Public School District was in a budget crunch; arts programs were being gutted, and even sports were being pruned back. Not surprisingly, the principals were zealously protective of any found money. "The high school principals were totally nonsupportive prior to the October cutoff," Biernacki recalls. "But on October 14 or whatever the mystery date was, we'd get the call: 'For God's sake, send some counselors over here and pick up these kids!'"

This was not the referral process the staff had envisioned; "picking up" students in response to an appeal from an exasperated principal was inimical to the Recovery High program. "We had our own strict criteria, which wouldn't allow kids in who were just being tossed at us," says Michael Hays. "Students had to come to the school of their own volition. There had to be a clear, desperate commitment on the part of the child entering the program. We did not accept students who said they didn't want to be here." In the first semester of the school's existence, 53 placement interviews were conducted, resulting in 31 enrollments. Eight of those not admitted were denied because of "excessive medications, gang

involvement, history of violent behavior, or lack of willingness to commit to recovery." The 14 others were simply not interested in attending Recovery High.¹⁸

In the earliest days of Recovery High, the first task of the staff was to structure the program. It developed a point and level system to evaluate student progress. All students entered the school at Level 1, and accumulated points to move up to Levels 2 and 3. Points were awarded hourly on a scale of 1 to 4 for staying on task, interaction with others, positive risk-taking, willingness to accept personal responsibility, and other hallmarks of recovery. On any given school day, it was theoretically possible for a student to accumulate 200 points. In practice, a 150-point day was about average, a 180-point day was outstanding, and a 100- to 120-point day was all too common.

Within the milieu of the school, Level 1s were designated as observers, with limited privileges and limited responsibilities. They were expected to become familiar with the way the school functioned by watching other members of the community (both staff members and more advanced students), and were not permitted to voice an opinion or to vote at community meetings. Limiting the privileges of Level 1s not only curtailed their propensity to act out but also reinforced the concept that they were at the bottom of the pecking order. To move up to Level 2, they needed to earn 700 points for two consecutive weeks. Level 2s were designated as members of the community, participated in discussions, and had voting privileges. Level 3s were the leaders of the student body, and had a range of privileges that approached that of students in a conventional high school, including the right to leave the campus for lunch. To progress to Level 3, Level 2s had to show two consecutive 800-point weeks. All promotions of Level 1 and 2 students had to be presented to the community by a Level 3 sponsor and endorsed by the group.

INSIDE RECOVERY HIGH

For faculty and staff members, the school day began with a coordination meeting at 7:30 a.m. to discuss student progress or particular issues that had arisen. The school functioned with pairs of counselors and teachers, who worked together as a primary care team and dealt with a caseload of ten to fifteen adolescents. The students arrived at 8:00 a.m. and met with their primary care team at the opening bell for goal-setting (they met again at 4:30 p.m. for an end-of-the-day review). At goal setting, students wrote down their objectives for the day on their point sheets, which they carried around with them to each class and activity.

After one class period, the entire school—students, teachers, counselors, principal, secretary, and janitor—convened for a community meeting. Each day, Level 3 students chose one of their own as moderator for

the meeting. After a moment of silence, the first question asked by the moderator was always the same: "Does anyone have anything to say about their recovery, or a confrontation to make?"

Attendance at the community meeting was mandatory—as were openness and honesty. There were no secrets at Recovery High. Any student who had relapsed was expected to confess it at the meeting—and thereafter face a cross-examination by the group. Failure to come forward carried a far greater risk—if other members of the community knew of or suspected another's relapse, they were duty-bound to declare their suspicion and confront the individual. "Because community meetings were intrinsic to milieu therapy, they were very powerful, especially when students confronted one another," Michael Hays says.

Whether a relapse was confessed or was revealed by confrontation, the fate of relapsers was in the hands of the community. Expulsion was not automatic, but a drop back to Level 1 was a given. Counselors expected relapses as part of the recovery process, especially for new arrivals; from their perspective, the more important question was what happened next. Relapsing students who acknowledged using drugs but recommitted to the program were offered the support of the community. Those who placed the blame on someone other than themselves, or denied drug use when confronted with proof, found themselves on the brink of expulsion.

"Monday was always interesting, because you'd wonder who'd relapsed over the weekend," principal Jan Hayes says. "They'd come to see me in my office, and I could always tell as soon as they came through that front door, because they'd act different. We did have our share of kids who relapsed, but generally we were able to get them back into recovery. One of the biggest problems our students had was learning how to say, 'I did that'—to be honest and to take responsibility for their actions. If a kid voluntarily came forward without somebody else telling on him, he was in a lot better shape."

Some students who had difficulty with authority figures found it easier to admit a relapse to a support staff member or another student. "When I was a Level 3, I had kids coming to me crying and telling me what happened because they didn't know how to tell the group," Elena Ortiz, a former student, recalls. "We would talk about it together, and that made it easier for them. After you've told one person first, it isn't so scary to tell twenty people."

The secretary and the janitor became key figures in Recovery High. "If kids acted out, a lot of times the consequence was to go help Joe clean toilets," Jan Hayes says. "They'd begin to talk and develop a

relationship with him. A lot of students got really close to him, and we got a great deal of information that way that was helpful. Barbara Romero, our secretary, was always there early, so she saw them coming in."

"My role was more like the mother figure," Romero says. "The girls, especially, would come to me in my office when they just needed someone to talk to." The fact that support staff members functioned as a sounding board for students was encouraged by Hayes. "We always told the students, 'You can talk to anybody, and everybody on this staff is equally important. If Barbara or Joe is who you're comfortable talking with, fine, but they're not going to keep a secret if it's something that's going to impinge upon your recovery.'"

Counselors made constructive use of relapses when they did occur. Within the milieu, every crisis was seen as an opportunity for students to take responsibility for their own actions and to trust the community to be there for them in support of their efforts at recovery.

Learning to be accountable for yourself and learning to trust the community safety net were skills that were enhanced by experiential or wilderness therapy. These Outward Bound-style outings challenged students to undertake a frightening or unfamiliar activity—such as rock climbing or cave exploration—in order to experience the personal growth and increased self-esteem that came from successful completion of what had first seemed impossible. Upon occasion, they also provided a painful lesson in the need to follow instructions.

"There was one girl named Tita, who was a tiny, Barbie-doll thing," Jan Hayes says with a smile. "She always had these wonderful clothes and high-heeled fancy shoes. The day before the outing, two of us sat her down and said, 'Now you want to be sure and dress warmly. You need to wear long pants, shoes, and socks.' Sure enough, she shows up in a pair of shorts and strappy sandals, and she's thinking she won't have to go. We just packed her off and sent her right up the mountainside with everyone else. When she started to complain, I said, 'Honey, by the time you come back down, you're gonna have blisters on your little feet, but it's your fault you've got on sandals. You'll have to make it to the top like the rest.'"

To build trust and reinforce the concept of community, counselors and teachers had to be willing to do everything the students did. It was important that all members of the community conquer their fears and participate in these outings—especially staff members. A high ropes course was also part of the Recovery High program, and many staff members were nervous about traversing ropes and cables two stories off

the ground. "For a lot of our kids, this was the first time they had adults they could trust," Jan Hayes says. "It was important that we were all positive role models. We wanted to show them that we really cared for them and wanted them to succeed. I thought I wouldn't be able to cross those ropes, but I did."

"Talk about trust and self-esteem—the biggest problem these kids had in six hours up there was holding hands," says Al Benalli, a counselor. "We were up twenty feet in the air on the cable, and they were reluctant to hold hands. They were hanging on to each other's jackets and pants and all that kind of stuff, and I said, 'Well, what about the hands?' They asked me, 'Wasn't it ever hard for you?' I said, 'Yes, but when I was in Vietnam, you'd get out there in the fog and muck and you can't see where you're going. You can't see your hand in front of your face because it's raining, so you hold hands and you can feel the other person. And when you're up there twenty feet in the air, you need that kind of support from somebody else.'"

"When any adventure was over, the group reflected on what was difficult for each member," former teacher Michael Hays recalls. "The adventure then became a compelling metaphor for some aspect of each participant's life as we explored what inhibited, frightened, confused, and motivated us."¹⁹

Counselors and teachers at Recovery High were addressed by their first names, and were subject to the same code of behavior as the students—a concept that extended to random drug screenings by urinalysis, or UA. What was known within the community as a "dirty UA" was another means by which relapsers were unmasked.²⁰ Kids who tried to con their way out after testing positive found their bluff called immediately. "Often kids with a dirty UA would deny they did anything," Barbara Romero recalls. "They'd claim that the lab made a mistake. When that happened, we'd send them over there and say, 'O.K., go talk to the guy who runs the lab. We'll get them to do a confirmation on this.'"

"When UAs were given to teachers and counselors, to emphasize the community part, the adolescents got to pick which staff members took the test," counselor Al Sanchez says. "We all had to stay clean." The counselors who became known as 'the two Als'—Sanchez and Benalli—were open about the fact that they are former substance abusers who became sober through the 12-Step Alcoholics Anonymous program; their willingness to undergo random testing not only reinforced students' faith in the program but also underscored the crucial concept that recovery is a lifelong process.

All students participated daily in what was known as "step study"—class time devoted to discussion of the tenets of AA. "It was actively integrated into the language and treatment of the school," Michael Hays says.

Parent involvement was an essential part of the Recovery High program. Parents met with Recovery High staff members once a week. "They had to be educated, too," Jan Hayes says. "They had to learn that this is a disease. They thought we'd be able to get their kids to stop, and that it wouldn't make any difference if they had a refrigerator full of beer. The attitude was 'Why shouldn't I be able to drink? He's got the problem. I don't.' What did we find out? We found out that mom or dad is an alcoholic. Most of these children came from families where drugs and alcohol were a normal part of their lives."

A VERY DIFFERENT STUDENT

The school slowly began to attract more students, but it was recognized early on that the goal of having 200 recovering adolescents was unattainable; the objective was halved to a target population of 100, but to the staff members that number was still too high.

In practice, the school usually functioned with 60 students or fewer, and even at that size the arrival of new Level 1 students played havoc with the school's sense of community. Maintaining the integrity of the community or the milieu was crucial to the functioning of Recovery High. For the milieu to be stable, a certain proportion of Level 2 and especially Level 3 students was essential. Without the leadership of students deeply committed to recovery, the milieu broke down; staff members would lead community discussions and make decisions—and thus the milieu would become far more authoritarian.

For this reason, an influx of new students was often traumatic. "When referrals finally came, each new arrival could have such an overpowering effect on the school that the thought of more students nearly caused the faculty to despair," Michael Hays says. "When we got in some very hard kids, it would take weeks to get things rebalanced. They would come in by twos and fours, and it was a while before we could even try to integrate them into the milieu. When the milieu stabilized, we could admit more, again hoping that we could withstand the manipulative, histrionic, or antisocial behavior that arrived with each new student. When we reached an enrollment of approximately 70, we found ourselves nearly overrun."

Many referrals came from the criminal justice system; often these were adolescents who had been given the choice between enrollment at Recovery High and incarceration. Most of the student body had had one or more run-ins with the law. More than half had spent time in a juvenile detention center; almost

half had been arrested for a felony. Fifty-four percent were involved with the juvenile justice system at the time they entered Recovery High. Forty percent admitted to active gang membership or affiliation,²¹ but staff members confirmed a much more extensive degree of gang involvement.

Other referrals came from treatment facilities. Many students had been in residence at inpatient treatment facilities, and had been discharged—not because they were in recovery but because their length of stay had exhausted their insurance benefits. Virtually all teenagers who entered Recovery High arrived with a far more tenuous hold on sobriety than had been anticipated. Many arrived with no recovery experience whatever, only their good intentions—and often that sincerity was enough for them to be admitted to the program, no matter what else was wrong with them.

And there was plenty wrong with them. Ethnically, the students at Recovery High resembled the demographic cross-section of the Albuquerque population,²² but that was the only normal thing about them. "From opening to closing, Recovery High School served a considerably more acute pre-recovery teen, with little or no (mostly "no") prior experience with recovery/sobriety. ... Students demonstrated a multiplicity of behavioral, mental, and physical issues common to adolescents with serious histories of chemical abuse. These students also arrived with serious family and psychological problems that predated chemical use," Al Sanchez wrote.²³ As tabulated by the Recovery High counseling staff, the litany of psychiatric and social problems experienced by these children is astounding:

- 100 percent had committed a delinquent act
- 100 percent were multiple substance abusers
- 76 percent had been suspended or expelled from school
- 48 percent had dropped out of school
- 60 percent had witnessed a violent crime
- 34 percent had been victims of a violent crime
- 53 percent reported a history of family violence
- 48 percent had been physically abused
- 60 percent had committed a violent act
- 80 percent had engaged in a violent act with others
- 20 percent owned a gun
- 44 percent had dealt drugs
- 60 percent had engaged in self-mutilation.²⁴

Half of the students at Recovery High were female. A third of them had been victims of sexual abuse as children; just over half of those were incest victims. All incoming Recovery High students were interviewed about what their lives had been like recently. As documented by the evaluators Moberg and Thaler,²⁵ their experiences during just the year before their enrollment were harrowing:

- 57 percent reported a family member abusing alcohol or drugs
- 42 percent had been kicked out of their homes
- 11 percent reported a teenage pregnancy (self or partner)
- 62 percent of the girls had been victims of sexual assault
- 42 percent of the girls had attempted suicide.

All of them came to the school fragile, and most incoming adolescents were afflicted not only by addictive behavior but also by another diagnosable psychiatric disorder. Fully eighty-four percent met criteria for clinical depression.²⁶ A third of arriving female students and a quarter of arriving male students were suicidal at the time of enrollment.

The extent and the severity of the students' psychological problems also had physical manifestations. At the outset, medical care was given equal emphasis with therapy and academics at Recovery High.²⁷ A small health clinic was part of the original plan. Robert Gougelet, a physician, drew upon his resources at the University of New Mexico and helped arrange for the clinic to be staffed by a full-time nurse practitioner and a part-time emergency pediatrician. "We had a lot of pregnancy tests, and a lot of education around sexually transmitted diseases," he says. "Because their families hadn't had them go to doctors for ages, kids also came in with all kinds of disorders they weren't aware of—biggies like diabetes and hepatitis."

"They weren't eating regularly; there were a lot of nutrition issues," Jan Hayes adds. "We fed them lunch every day, and it was probably the only meal some of them had." Almost fifty percent of the students (and almost two-thirds of the girls) exhibited signs of an eating disorder.

A formidable array of physical and psychosocial baggage put the students of Recovery High off the chart on any measurement scale of "at risk" youth. "The drugs and alcohol were the least of their problems," Jan Hayes says. "They were the only means by which these kids could medicate their pain."

CONFLUENCE AND CURRICULUM

It was inevitable that Recovery High students would have significant academic problems, but the faculty members had not anticipated how dysfunctional their students would be in the classroom. About a third of the students who entered in the first year of the program were identified as having a handicap that impeded them academically (learning disability, emotional disability, behavior disorder, attention deficit disorder—a few students were in fact illiterate),²⁸ and a special-education teacher was eventually added to the staff. Virtually all the students were below grade level, regardless of handicap.

Classes were taught by subject matter, but within each classroom the students were a mixed bag of ages, abilities, IQs, and attention spans—not to mention levels of recovery. Some were fresh from middle school; others were old enough to have already graduated. Of necessity, faculty members resorted to a tutorial approach. Students were handed packets of material, and assignments were designed according to their level of ability.

From time to time, however, teachers were able to find some unlikely common ground for group activity. "We read *A Midsummer Night's Dream*," Michael Hays recalls. "We sat around a table—hard-core junkies, gang-bangers, skater-punks...taking parts and reading Shakespeare together. Once the kids became accustomed to the language, they started laughing spontaneously at some of the things that happened."

Because school had historically been a negative experience for most Recovery High students, the classroom environment often brought out a host of undesirable behavior, often at unpredictable moments. Teachers never knew when a disruption would occur that might require their intervention.

"There was a lot of acting out, a lot of verbal abuse," counselor Al Benalli says. "The kids seemed to think when they used inappropriate language that they might threaten us. I always told them that the only people I was afraid of were adult males who were intoxicated. When you're working with adolescents who've been involved with alcohol and drugs, you have to expect them to be restless, irritable, and discontented. In order to be successful with them, you need to understand that from the first time they used until the time that they got into recovery, their emotional development is arrested. You might have a 16-year-old who is acting like an eight-year-old, but if you're knowledgeable about substance abuse, you can understand that's just natural. The kid stopped growing up when he started using."

"Some of our kids had started using at the age of 8, 9, or 10," Jan Hayes says. "They were so young that they hadn't been habilitated, let alone rehabilitated." The issue was how to find the best way to help

them catch up with their peers, both emotionally and academically. The term "confluence" was used to describe the integration of therapy with the academic curriculum. In English class, Michael Hays assigned students the task of writing the autobiography of their addiction. In keeping with Step 1 of the AA program ("We admit we are powerless over alcohol and that our lives have become unmanageable"), he asked them to describe the moment at which they realized that their lives had become unmanageable. "Kids were writing incredible stuff," he recalls. "I remember a girl who began her story by saying, 'I woke up on somebody's lawn. The sun was hot, and a dog was licking my face.' She'd never written a paper before in her life."

"The children had standard English courses; they were still expected to read the literature and know grammar, but we found that we had to do a lot of high-interest activity-oriented things," Jan Hayes says. Faculty and counselors devised creative ways to blend other academic disciplines with the therapy program. One of the most popular techniques was "excursion class." For civics, students went to the local courts to observe cases being argued. For biology, they worked as volunteer docents at the local natural history museum. They not only had to absorb textbook information but also to make it understandable to younger children. The experience also provided exposure to the rudiments of public speaking.

The most popular excursion, however, capitalized on the relationship between the Recovery High program and the University of New Mexico Hospital. Robert Gougelet, the emergency medicine doctor who had become the project liaison with the Robert Wood Johnson Foundation, set up a program whereby a university hospital resident and a trained emergency medical technician came to the school to teach first aid, and linked the procedures to basic human physiology. After several weeks of classroom instruction, students took a series of week-long rotations at the hospital. They worked in the emergency room or the trauma center, in the psychiatric ward, and in pediatrics. The experiences of each rotation were fed back into both therapy and academics.

"In the neonatal intensive care unit, they'd see babies that had been born with drug addictions," Jan Hayes says. "Then they'd have to write a report on what they'd observed." The girls in particular returned wide-eyed from their tour in the unit. "Hearing them cry and seeing them born so sick and vulnerable, many of them made the connection for the first time that their drug use would gravely affect a child."

When things got busy in the emergency room, some students found themselves pressed into service, helping to set broken bones, putting pressure on wounds, assisting in suturing, and pumping stomachs.

"The many patients who came in under the influence of drugs or alcohol, including some who had overdosed, had a memorable effect on the students in this rotation," Michael Hays says. "As one student put it with unintended irony, 'At first I thought this was going to be an educational experience, but then I actually learned something.'"²⁹

To many skeptics in the Albuquerque school system and in the community at large, however, the goings-on at Recovery High didn't seem much like schooling, not when "young drunks" had time during the school day for recreational outings to go rock-climbing, and "teen junkies" were getting academic credit for stocking bandages in the emergency room—where they might have access to prescription drugs.

Viewed by outsiders as part leper colony, part loony bin, Recovery High occupied a peculiar place in the public eye. Community opinion was schizophrenic—people were happy to get substance abusers out of the regular public schools and away from "good, normal kids," but wanted to be sure they were not paying a premium for "coddling druggies."

THE LEAVING TREE

When the target population of the school was reduced from 200 to 100 students, there was a great deal of public (and even more private) grumbling about the price tag of the program, especially about the cost per pupil and about Recovery High's staff to student ratio. Moberg and Thaler, the program's evaluators, document a total of just 208 enrollments in the program over the entire life of the school.³⁰ Counselor Al Sanchez's report on Recovery High puts the number of students at 366.³¹ There does not appear to be any way to reconcile the two conflicting figures, and in the larger sense the disparity is unimportant. Compared with the mega-schools that typify adolescent education in Albuquerque, either figure is miniscule. With continued budgetary constraints, it's not surprising that Moberg and Thaler discovered that there was "little goodwill from many regular district school personnel toward what was perceived as an expensive program assisting few youth."³²

The lack of goodwill contributed significantly to what Moberg and Thaler called a "failure to institutionalize." This failure was one of the major reasons that Recovery High closed. After the departure of Lou Sadler early on, no one—either within Recovery High or within the Albuquerque school system hierarchy—was specifically responsible for working toward the institutionalization and integration of the program into the district. Institutionalization didn't happen, in part because it wasn't anybody's job to make it happen.

A portion of this failure had to do with neglecting to build bridges administratively to the rest of the district—for example, not attending districtwide curriculum meetings or not interacting with other principals and counselors. There was, however, a larger financial component to the lack of institutionalization, which centered on the willingness of the school district to pay only for education and not for therapy. Since there was great effort made at Recovery High to blend the two processes, and since children entered the school with multiple substance abuse and psychological problems, it was inevitable that many believed that the school system was shouldering more than its fair share of the cost. In their post-mortem on the project, Moberg and Thaler agreed: "Given the primary treatment functions which contributed to the high costs of the program, it was unrealistic to expect Albuquerque Public School District to pick up program costs when other funding sources did not come through. From an educational perspective, the program was extremely costly and not the primary responsibility of the educational system."³³

Nevertheless, there was some grudging acknowledgment that the Recovery High program was having an impact. Despite the multiple lapses its students had, some were returning to mainstream high schools. Of the 193 students that Moberg and Thaler were able to document, 59 returned to regular high school, and 17 returned to an alternative high school. The longer students remained at Recovery High, the better their chances for a positive outcome. Moberg and Thaler found that students deemed "successful" stayed an average of 242 days and made up 16 percent of the students who had entered the program. Those who were considered "somewhat successful" stayed an average of 157 days; these two groups represent just over half of the students who had attended Recovery High.³⁴

Recovery High was always meant to be a transitional place, and one of the most moving ceremonies of the school was graduation. Students who successfully completed the program dipped their hands in paint and left their imprint on what was called "the Leaving Tree," before they departed. "One gal did her feet," Jan Hayes remembers with a grin. "Nikki was a little dynamite thing, redheaded and hot-tempered. She just hated me for the longest time. I was her nemesis, but when it came time that she finally graduated, I was the one she asked to help her put her feet up there."

At least one successful Recovery High "graduate" became a problem because he returned to his old school. At La Cueva High School, Craig Fischbach had been a stellar but troubled football player, an All-City, All-District nose tackle with a drinking problem. As fits the dual-diagnosis profile of Recovery High students, he also suffered from depression. After Fischbach spent what would have been his junior year

getting sober, he returned to La Cueva in 1993 as a senior, ready to play ball. The New Mexico Activities Association (which regulates high school sports in the state) maintained that he had used up all of his eligibility, and barred him from the team.

Fischbach's mother, backed by the Albuquerque Public School District, brought suit, alleging that the Activities Association had violated the Americans with Disabilities Act. The association countered that Fischbach "is not a qualified individual with a disability"³⁵—essentially contending that alcoholism was not a disease.

"The district took the viewpoint that this boy had been disabled for a year," says Jack Bobroff, who was then Albuquerque school superintendent. "It was no different than if he'd a broken leg. When one of these issues comes up, you always have to ask yourself, 'Is this a hill I'm willing to die on?' The Activities Association decided they were going to defend this hill at all costs, so they went to court."

The suit became a landmark case; the school system and the Fischbachs won. The defeat cost the association almost \$30,000 in legal fees. Sadly, the losers blamed the Albuquerque schools in general and Recovery High in particular. "The Activities Association spent so much money on the lawsuit that they had to increase the dues of the members, which was every high school in the state," Bobroff says. "The feedback I got after that was, 'Look what you bastards did! You cost us money!'"

"Costing us money" was indeed the rallying cry of those who opposed Recovery High. There was a widespread failure, not just on the part of the Association but on the part of the general public and the school hierarchy as well, to understand that substance abuse is a disease. It wasn't hard to get people to say that Recovery High was rewarding a population of druggie losers that society had already thrown away—and that they were doing so at the expense of a great many more deserving youngsters.

Robert Gougelet says, "When I appeared before the school board to ask for funds for Recovery High, I was confronted by a little old lady in reading glasses who said, 'The school system can't afford to buy pencils, so why should they spend \$100,000 on these troublemaking kids?' It turned out she was a school librarian—and the head of the teachers' union."

Former Recovery High Board President Buzz Biernacki also recalls the acrimonious exchanges at board meetings of the public school system. "There were middle-class Anglo families saying, 'Why do I have to pay for my child's band uniform? Why can't my kid participate in wrestling? We don't have money for

those programs—the school is cutting those out. How come when I look at the budget I see there's a jillion dollars for a school for some delinquent who's a substance abuser by his own choice? Tell those little punks to stop drinking and stop snorting and they won't have a problem!"

Because Recovery High never did draw the numbers of students it had been expected to attract, the cost per pupil soared. At the time, the Albuquerque Public School District was spending roughly \$2,300 per student; the cost per student at Recovery High was close to \$8,000.³⁶ As the Robert Wood Johnson Foundation began its planned phase-out as the primary source of outside funding, the financial issue ballooned in importance.

Things came to a head in the spring of 1994, when Recovery High opponents attained a majority on the school board, and supportive superintendent Jack Bobroff retired "before they fired me." Shortly after that, Recovery High was excised from the school system's budget. In 1994, Recovery High's budget had been approximately \$700,000 a year, more than half of which was provided by the public school system.

Staff and supporters of Recovery High were stunned by the sudden turnaround in their political fortunes, but mobilized quickly to fight for the school. Using the media to carry their case to the public, they tried to sway public opinion in favor of continuing the program. Parents and students picketed school board meetings bedecked in purple ribbons. (Purple is the color of recovery.) Recovering students voluntarily surrendered their anonymity and gave interviews to reporters. Alcoholics Anonymous got behind the campaign and threw its considerable resources into the effort.

Granting a reprieve of sorts, the school district finally agreed to support educational costs at Recovery High at the same rate it paid for other kids in the schools, and allocated \$140,000 (the state per-pupil allotment for sixty students, or \$2,333 per child) for the school. It was up to principal Jan Hayes and other supporters of the school to find the rest of the funding they needed.

In the fall of 1994, Recovery High opened for the new term, but it was a different place from what it had been before. The number of faculty and staff members was reduced, the art therapy and wilderness therapy programs were terminated, and the days and hours of operation were curtailed to be more in keeping with a conventional high school. Pressed hard by the district, the school nevertheless grew in size, but the milieu suffered accordingly.

Jan Hayes struggled to run the internal machinery of the school while she hunted for support. "I don't know how many times I went to Santa Fe, begging somebody to take this on," she says. "We would have gladly done anything to keep it open." Recovery High limped through the 1994–95 school year, but just barely. In January 1995, an emergency supplementary grant of \$100,000 from the Robert Wood Johnson Foundation bailed out the program and helped keep the school in operation till the end of the school year. The Albuquerque school board chipped in \$24,000 more, primarily to avoid having the school close in the middle of a semester.³⁷

With funding assured through May of 1995, it looked as if the school might find enough backing to open in the fall. Supplementary state money was due to come to the school for the 1995–96 term, but in March Governor Gary Johnson slashed \$36.4 million in social services programs from the New Mexico state budget, remarking that these programs "don't have a meaningful impact on our lives."³⁸

Among the appropriations he axed was \$150,000 for Recovery High.

Recovery High closed its doors on May 25, 1995. "The Robert Wood Johnson board had visited Recovery High, and the members were very moved by the kids and absolutely knocked out by what they were trying to do there," says Foundation vice-president Paul Jellinek. "They were heartbroken when the project stopped."

They were not alone. "It was really hard to walk away," Jan Hayes says, "because we had so many kids with such new sobriety that we knew we were setting them up."

LESSONS LEARNED

When Recovery High closed, the district instituted a program called Crossroads to take its place.

Operating at two junior high schools and five district high schools, it is viewed by many as little more than a patch for ongoing drug abuse problems within the Albuquerque school system. "We've got seven Crossroads counselors, and each one of them is seeing at least a hundred kids," says Linda Orell, a substance abuse prevention and intervention specialist for the Albuquerque public school system.

"Our students were farmed out to three high schools, where they were going to have a counselor who had some background in recovery, and that person was supposed to work with the kids as they integrated back into the school," Jan Hayes says. "It wasn't very successful. After Recovery High, Al Sanchez and I worked at the Juvenile Detention Center, and we'd often see kids coming through there who'd been at

the school. When they got back out, they didn't have a support system that was strong enough to keep them from going back to old behavior."

Albuquerque continues to be a center of drug trafficking; the fiscal year 2001 budget for the New Mexico High Intensity Drug Trafficking Area is \$7.6 million. The Drug Enforcement Agency maintains a presence in the city, and much of its involvement focuses on an area of heavy gang activity known as the War Zone, which is roughly contiguous with the Highland High School attendance area. "This area serves the most heavily immigrant population in Albuquerque," Linda Orell says. "There are 27 languages spoken at the high school. The Crossroads counselor at Highland has a huge caseload. She can't see any student for more than twenty minutes at a time. ... There's now an armed detective in every high school and a policeman at every middle school campus."

Rick Miera has two offices, one in Santa Fe, where he is a state legislator, the other in the Juvenile Detention Facility in Albuquerque, where he serves as coordinator of the AYUDA program. "Ayuda" is the Spanish word for "help"; it is also an acronym for Assisting Youth Using Drugs and Alcohol. "What they're doing now in the Albuquerque public schools is lip service," Miera says. "They're putting money into gang prevention—well, I'm sorry, but gang prevention is the same as drug abuse prevention. I work on this every day, and it's the same thing to me. Put a different label on it, and it's still the same problem. It's problems with kids, with families, with communication, that leads to drug abuse and gang problems. It's a mixture of all of them, and it manifests itself back where it's going to show the most—in schools—because that's where you find the most kids. That's where all this comes to roost."

Although the schools are where the problem of teenage drug and alcohol abuse is most apparent, they are not necessarily the system best equipped financially to deal with the issue—at least not without a lot of outside support. If you look just at the budget of the Albuquerque Public School District, by the numbers Recovery High was a bad deal. The school system was allotted its money from the state of New Mexico and charged with providing education for all of the children in the district. With the resources the administrators had available, they understandably felt obligated to base their decisions on the concept of "the greatest good for the greatest number." Given the \$2,300 average cost per pupil for 84,000-plus children and the \$8,000 cost per student of 200 to 300 Recovery High students, it's not surprising that the district was reluctant to continue underwriting the program.

"There are no villains in what happened to Recovery High," Jan Hayes says. "This is a societal problem, and it was unreasonable to expect Albuquerque public schools to do it all."

If teenage substance abuse is indeed a societal problem, then it is logical to examine the cost of treating it from a broader perspective. In 1993, the average cost per year to keep a youth interned at one of the state juvenile correctional facilities, the New Mexico Boys' School in Springer, was \$30,400. The average cost per year for an inmate in the New Mexico state prison system was \$28,500.³⁹ Few would deny that most of the students at Recovery High were headed for incarceration—indeed, many of them had already been in jail before they came to the school. From this viewpoint, Recovery High's \$8,000 annual per-capita expenditure looks like a much more cost-effective investment.

"I believe that if states spent money to put schools like this together, their incarceration costs for adults would go down," says Lou Sadler, whose efforts helped to start Recovery High. "It goes for medical costs, too. Medicare and HMOs end up paying an awful lot to treat chemical dependency. If you can nip this in the bud, there would be great cost savings, but it would take several years before they'd be realized. This is the concept that I started with—'pay me now or pay me later.'"

Recovery High was one of the first schools to treat adolescent substance abuse in an educational setting, but it was not the only alternative school for recovering teens. Henderson Bay Alternative School in Gig Harbor Washington, which was visited by a delegation from Parents Against Drugs when Recovery High was in the planning stage, is still functioning. The Chicago Preparatory Charter High School in Illinois closed after just 16 months in operation. Phoenix II High School in Gaithersburg, Maryland, is part of the Montgomery County school system, and it accommodates 30 students. The school administration has found that the average age of the student body is getting younger. Because more than 70 percent of their students are freshmen, the question of extending the program into the middle school grades is looming.

Serenity High School in San Diego was a public-private partnership institution. When the principal unilaterally fired the most popular intervention counselor in the program, drawing a storm of parent protests, it foundered in November of 1999. After it closed, the Rescu Academy, established by the fired counselor and some of the families who had been part of Serenity, opened as a private high school in nearby Santee. The newly opened academy, however, charges \$10,000 per year per student. The directors

hope to reduce the cost by increasing enrollment (there are now just five students) and are seeking charitable financial support.⁴⁰

The Minneapolis-St. Paul area is home to the largest geographic cluster of alternative schools for substance abusers. Gateway School in St. Paul, Arona in Roseville, Pease Academy in Minneapolis, and Youth+Education+Sobriety (YES) in Hopkins are all small public schools. The oldest and most famous school in the area for teenagers fighting chemical dependency, however, is Sobriety High School, which was the model for Serenity High in San Diego. Opened in 1989, Sobriety High is a private nonprofit school that is under contract to the Edina School District, and claims a very high sobriety rate of 58 percent among its alumni. It receives the same per-pupil funding as other Minnesota schools, but is also supported by contributions from parents and charitable foundations. There is no charge for tuition.

The alternative schools that have survived and been successful run with small student populations—generally thirty or fewer. (Faced with a waiting list, Sobriety High, rather than increase in size, added a second, separate campus.) As was the original objective at Recovery High, all of these schools require that students be in recovery to gain admission; completion of a chemical dependency treatment program is generally a prerequisite.

In addition, these schools have generally stable populations and do not suffer the kind of enrollment fluctuations that Recovery High experienced. With the exception of Phoenix II, there is no plan made to return students to mainstream high schools. Because kids enroll and take courses with the expectation that they will graduate from these alternative schools into college or a job, disruptions to the environment due to constant comings and goings are minimized.

Most important of all, however, the successful institutions have devised means of ensuring the financial security of the school. Although these means vary from one school to another, the schools don't have to scramble on a yearly basis to remain open.

EPILOGUE: *SHOVELING UP*

Up In a research program funded in part by the Robert Wood Johnson Foundation, Columbia University's National Center on Addiction and Substance Abuse, or CASA, recently completed a study entitled *Shoveling Up* that documents the cost to the public of dealing with substance abuse.⁴¹ CASA researchers found that nationwide, about 96 cents of every dollar spent on some aspect of substance abuse goes to dealing with the aftermath; less than 4 cents is devoted to prevention and treatment. The

state of New Mexico allocates only 2 cents of every dollar on prevention and treatment. The rest of the money, almost 98 cents of every dollar, goes to dealing with the consequences of substance abuse, including juvenile justice, adult corrections, welfare, mental health, and disability. This is what the study calls "shoveling up." "Substance abuse and addiction is the elephant in the living room of state government," says the study, "overwhelming social service systems, impeding education, causing illness, injury, death and crime, savaging our children—and slapping a heavy tax on citizens of every state." The CASA findings reinforce the concept that spreading the cost of treatment and education of adolescent substance abusers will alleviate the financial burden on local school districts, and will likely prove to be cost effective in the long term.

Notes

¹ D. P. Moberg and S. Thaler, "Final Report: An Evaluation of Recovery High School," unpublished report to the Robert Wood Johnson Foundation, June 1995, p. 70.

² High Intensity Drug Trafficking Area (HIDTA) Program, 2001 Annual Report, Office of National Drug Control Policy, <http://www.whitehousedrugpolicy.gov/enforce/hidta/nmex-main.html>.

³ New Mexico Statistics, United Way of Central New Mexico, <http://www.uwcnm.org/information/nmstatistics.htm>.

⁴ *Parents Against Drugs*, "Planning Grant Proposal for Development of Recovery High School," submitted to the Robert Wood Johnson Foundation, p. 1.

⁵ Although Parents Against Drugs found that statistics on teen relapses were not available for New Mexico, the national recidivism rate for teens in 1990 was between 60 and 90 percent.

⁶ House Memorial 50 (Hawk, Hocesvar), 39th Legislature, 1st Session.

⁷ Albuquerque School Board Resolution 89041, September 6, 1989; and Albuquerque City Council Enactment 171-1989, October 12, 1989. The language in both measures is identical.

⁸ M. Hays, "Recovery High School: A Program Description," Albuquerque Academy, Albuquerque, New Mexico, unpublished manuscript, p. 25.

⁹ D. P. Moberg and S. Thaler, "Final Report: An Evaluation of Recovery High School," unpublished report to the Robert Wood Johnson Foundation, June 1995, p. 2.

¹⁰ *Ibid*, p. 2.

¹¹ Parents Against Drugs paid site visits to two other educational facilities for substance abusers. Accompanied by substance abuse professionals, they visited Henderson Bay Alternative High School in Gig Harbor, Washington, and West Valley Community School in San Jose, California.

¹² D. P. Moberg and S. Thaler, "Final Report: An Evaluation of Recovery High School," unpublished report to the Robert Wood Johnson Foundation, June 1995, Executive Summary, p. i.

¹³ Parents Against Drugs, "Planning Grant Proposal for Development of Recovery High School," submitted to the Robert Wood Johnson Foundation, p. 7.

¹⁴ At that point, Dr. Gougelet became the project liaison between Recovery High and the Robert Wood Johnson Foundation.

¹⁵ It didn't help that after he was fired, Sadler sued the district for breach of contract, asking to be paid his \$78,000 a year salary; he lost.

¹⁶ On opening day another 25 to 30 applicants were in the process of evaluation prior to admission.

¹⁷ D. P. Moberg and S. Thaler, "Final Report: An Evaluation of Recovery High School," unpublished report to the Robert Wood Johnson Foundation, June 1995, p. 42.

¹⁸ "Recovery High Implementation Summary: June 1992," unpublished report to the Robert Wood Johnson Foundation, p. 7.

¹⁹ M. Hays, "Recovery High School: A Program Description," Albuquerque Academy, Albuquerque, New Mexico, unpublished manuscript, p. 10.

²⁰ Moberg and Thaler documented a total of 760 UAs at Recovery High, an average of 4 per student. Of these, 22% were positive. D. P. Moberg and S. Thaler, "Final Report: An Evaluation of Recovery High School," unpublished report to the Robert Wood Johnson Foundation, June 1995, p. 59.

²¹ The distinction was drawn by gender. Boys were official gang members; the girls functioned as a form of ladies auxiliary.

²² Recovery High School was 45% Hispanic, 33% Caucasian, 11% Native American, 2% African American, and 11% multicultural (the total exceeds 100% due to rounding). D. P. Moberg and S. Thaler, "Final Report: An Evaluation of Recovery High School," unpublished report to the Robert Wood Johnson Foundation, June 1995, p. 39.

²³ A. Sanchez, "Summary Narrative Report (Descriptions/Observations): Recovery High School 1994–1995," Albuquerque Public Schools, pp. 6 and 30.

²⁴ *Ibid.*, pp. 6–7.

²⁵ D. P. Moberg and S. Thaler, "Final Report: An Evaluation of Recovery High School," unpublished report to the Robert Wood Johnson Foundation, June 1995, p. 44.

²⁶ *Ibid.*, p. 44.

²⁷ For budgetary reasons, the clinic was reduced in scope after the first year, and finally eliminated.

²⁸ Center for Health Policy and Program Evaluation, University of Wisconsin-Madison, "Recovery High School Project Interim Evaluation Report," report to the Robert Wood Johnson Foundation, February 1993, Appendix A, p. 6.

²⁹ M. Hays, "Recovery High School: A Program Description," Albuquerque Academy, Albuquerque, New Mexico, unpublished manuscript, p. 22.

³⁰ D. P. Moberg and S. Thaler, "Final Report: An Evaluation of Recovery High School," unpublished report to the Robert Wood Johnson Foundation, June 1995, p. 36.

³¹ A. Sanchez, "Summary Narrative Report (Descriptions/Observations): Recovery High School 1994–1995," Albuquerque Public Schools, p. 5.

³² D. P. Moberg and S. Thaler, "Final Report: An Evaluation of Recovery High School," unpublished report to the Robert Wood Johnson Foundation, June 1995, p. 74.

³³ Ibid, Executive Summary, p. vii.

³⁴ In addition to change in alcohol or drug consumption, components of "success" for Recovery High students included improvements in knowledge of substance abuse, social skills, self-esteem, and family communication. Ibid, p. 56.

³⁵ "Recovering Teen Sues N.M. Group to Play Football," *Albuquerque Journal*, August 1, 1993, pp. A1 and A4.

³⁶ Coming up with a precise per-student cost at Recovery High was difficult, because the number of students in attendance was constantly in flux.

³⁷ "Recovery High Funded Through May," *Albuquerque Journal*, February 2, 1995, p. C2.

³⁸ "Johnson Priorities Lock Up Our Future," *Albuquerque Journal*, March 24, 1995, p. A15.

³⁹ New Mexico Legislative Finance Committee, Department of Education.

⁴⁰ "Caring Teachers, Willing Students to the Rescue," *San Diego Union-Tribune*, May 29, 2000, p. E-1.

⁴¹ National Center on Addiction and Substance Abuse at Columbia University, *Shoveling Up: The Impact of Substance Abuse on State Budgets* (New York: National Center on Addiction and Substance Abuse, January 2001).