

# What's next?

University of Minnesota  
Minneapolis  
November 2, 2006

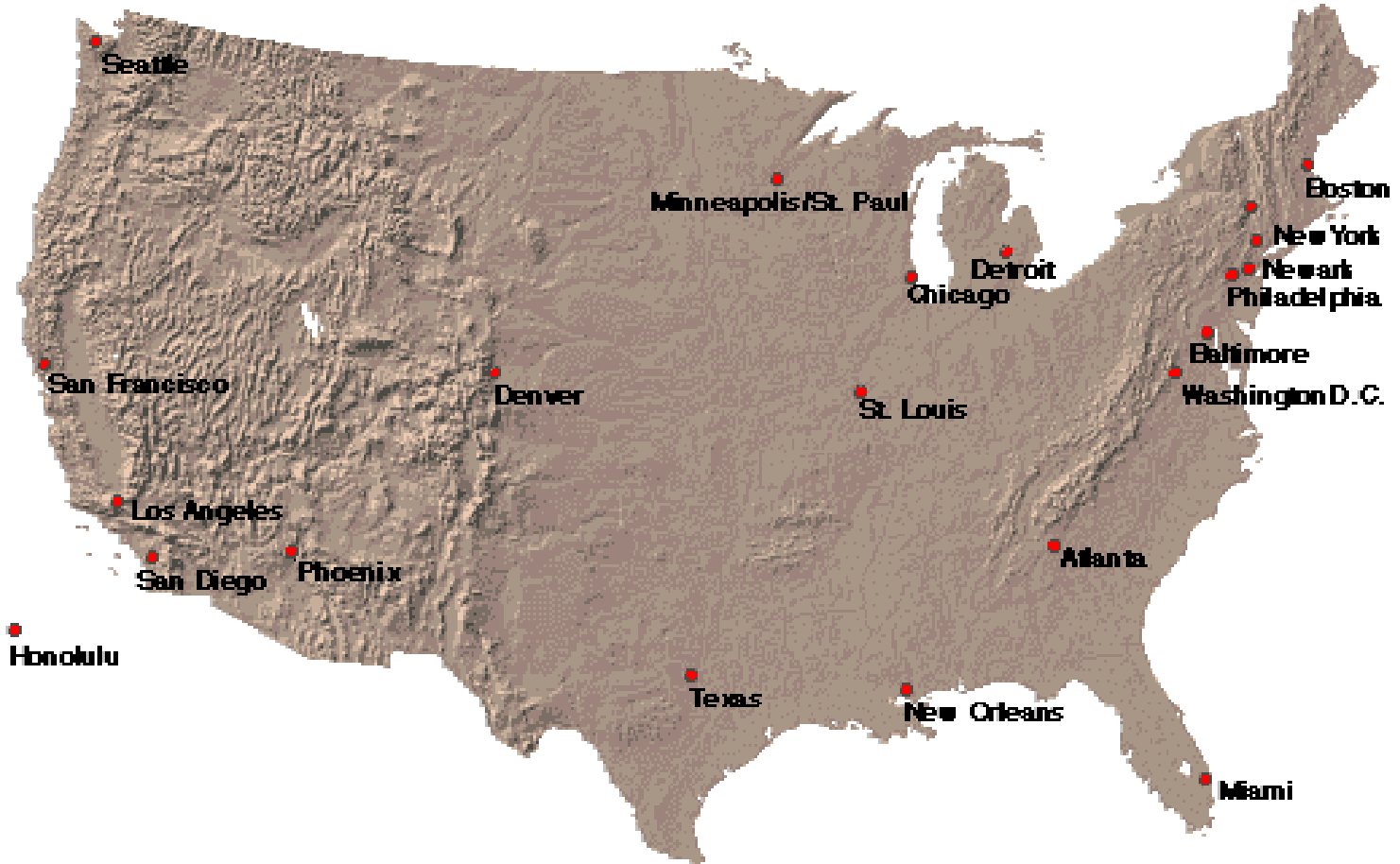
Carol Falkowski  
Director, Research Communications  
Author: *Dangerous Drugs*, 2003.



HAZELDEN®

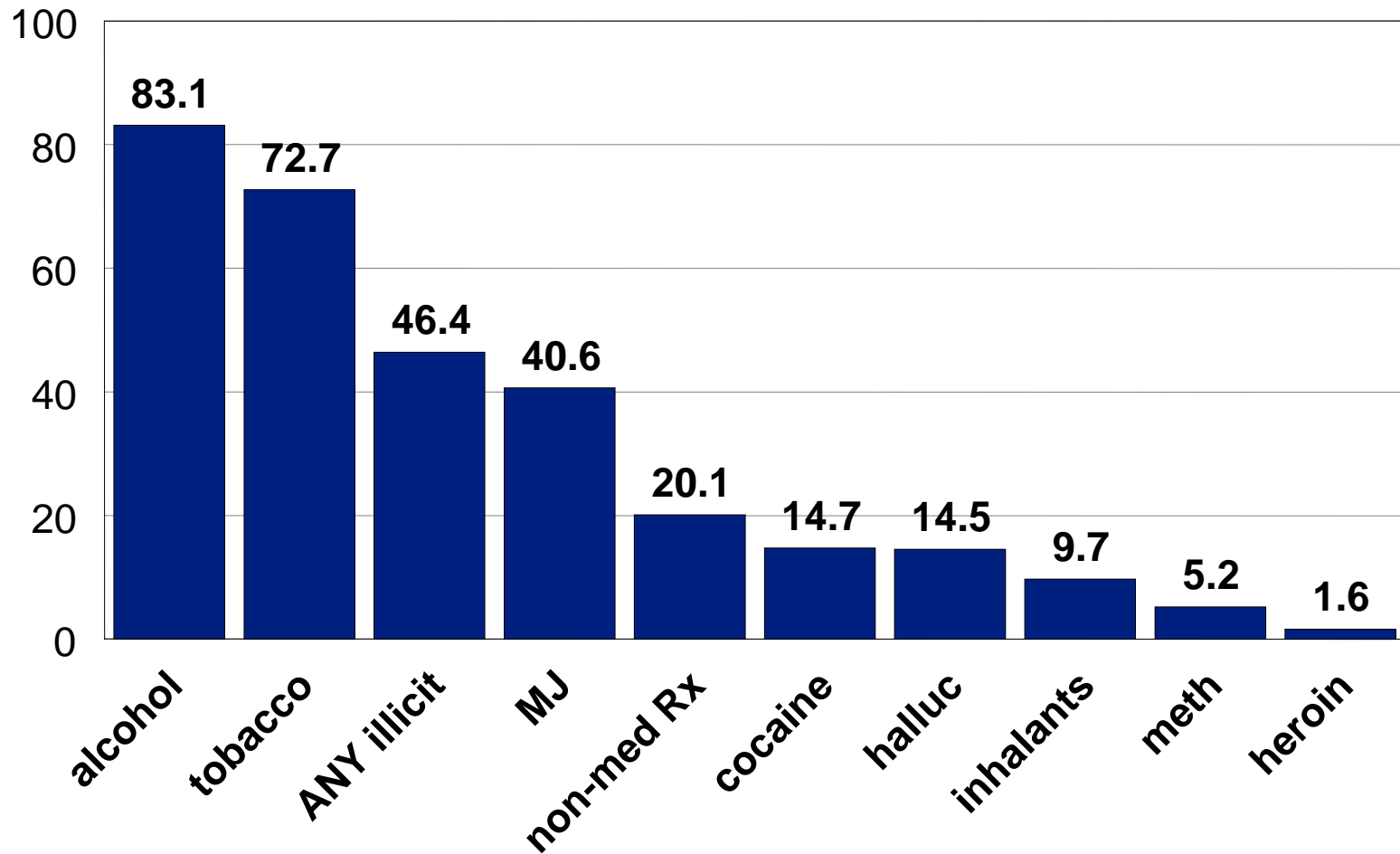
# National Institute on Drug Abuse:

VG)



Provides community-level, epidemiological surveillance of drug abuse through ongoing analysis of quantitative research data in 20 US cities since 1976.

# Percent of population reporting lifetime use of selected substances

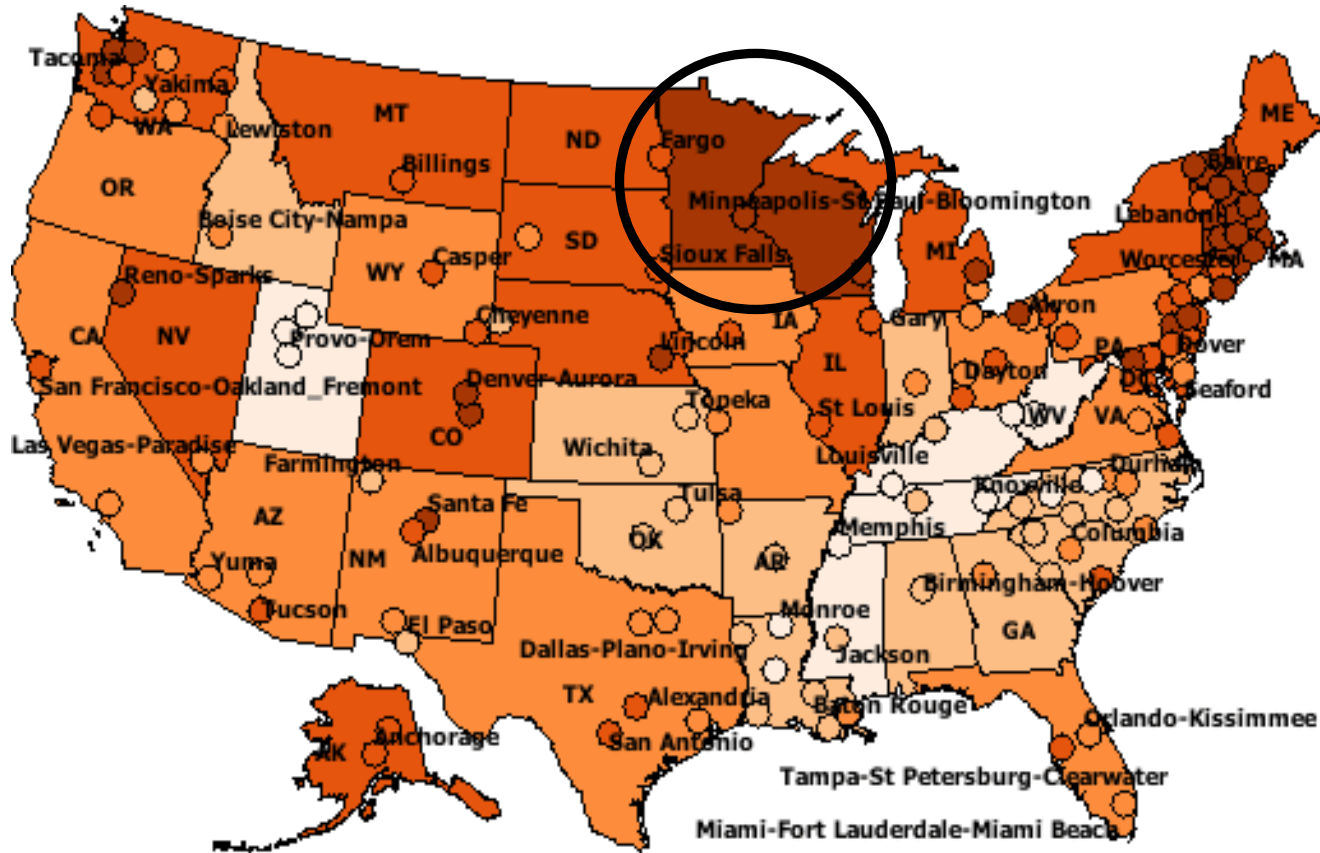


SOURCE: 2003 National Survey on Drug Use and Health, SAMHSA. Respondents = age 12 and older.

WI = 67.8%  
 MA = 67.4%  
 RI = 66.3%  
**MN = 66.2%**  
 |  
 KY = 31.7%  
 WVA = 30.2%  
 UT = 28.7%

# Current alcohol use – 2004 (any alcohol use in past 30 days)

**National**  
**56.8%**



Percent

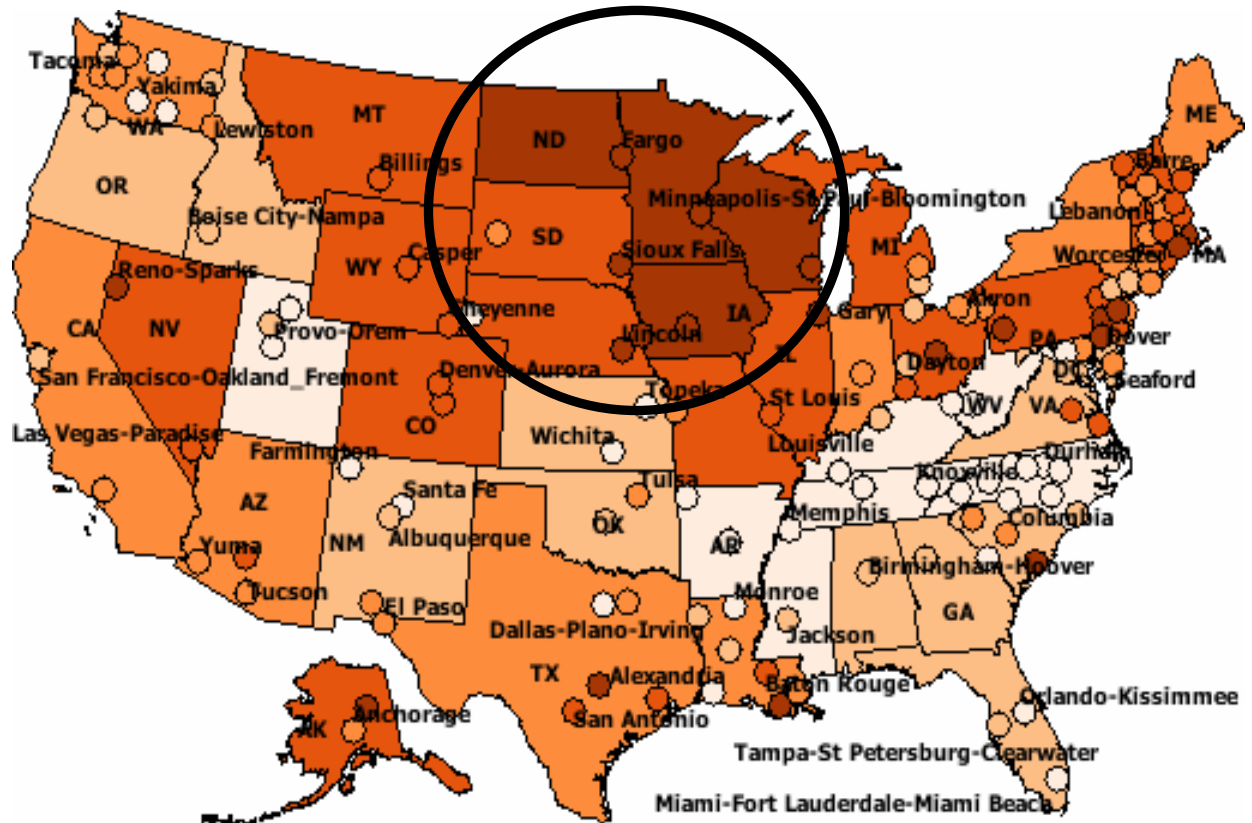
- <= 40.1
- 40.2 to 49.9
- 50 to 57.3
- 57.4 to 62.5
- >= 62.6
- No Data

SOURCE: Percent of respondents age 18 and older who reported having at least one drink of alcohol in past 30 days. National Center for Chronic Disease Prevention and Health Promotion, 2004 Behavioral Risk Factor Surveillance System, online at: [www.cdc.gov/brfss](http://www.cdc.gov/brfss)

WI = 21.8%  
 ND = 20.4%  
**MN = 19.8%**  
 I  
 UT = 9.2%  
 TN = 8.2 %

# Binge drinking - 2004 (having five or more alcoholic drinks on one occasion)

**National  
 14.9%**

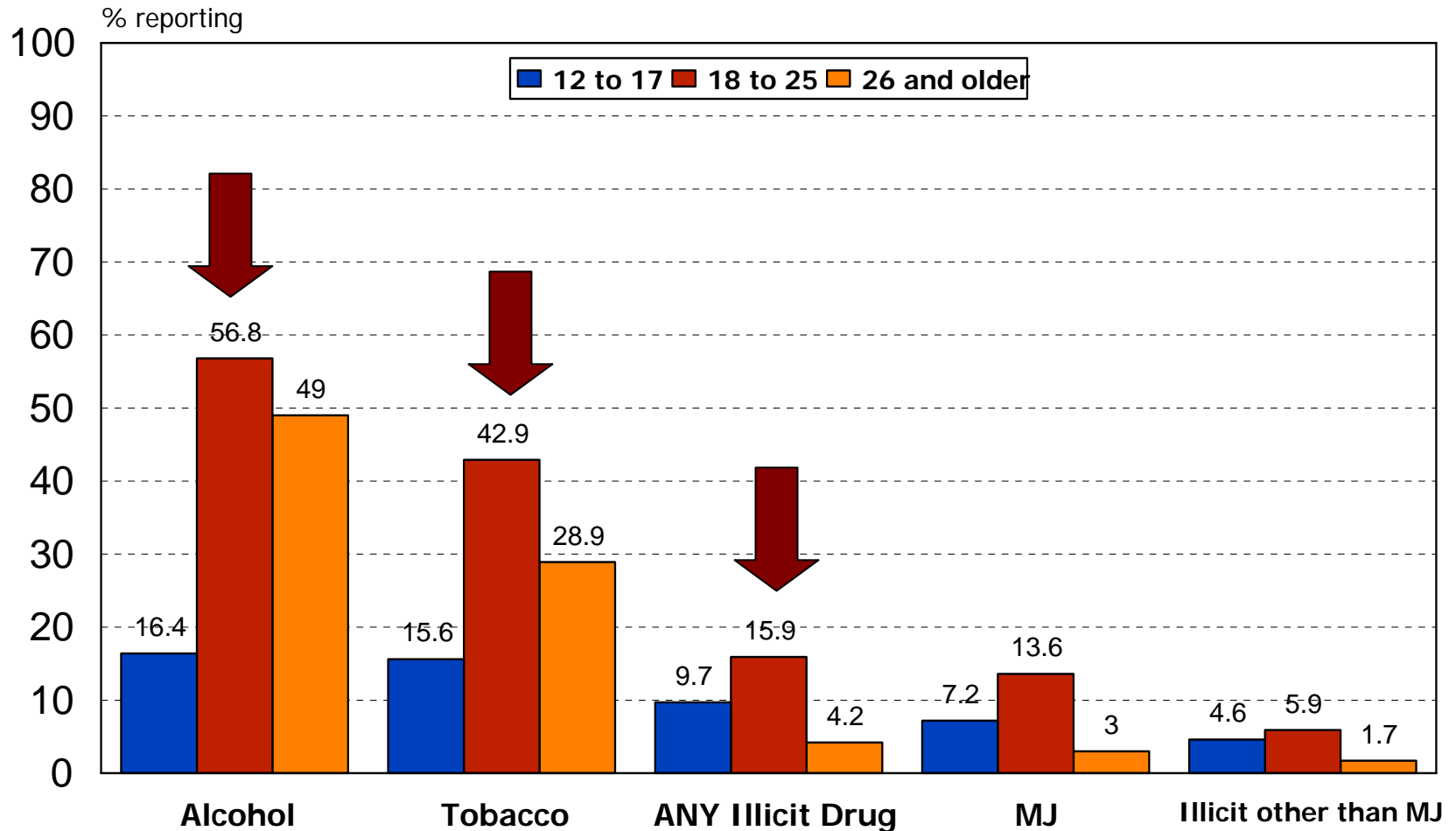


Percent

- <= 12
- 12.1 to 13.7
- 13.8 to 15.6
- 15.7 to 18.2
- >= 18.3
- No Data

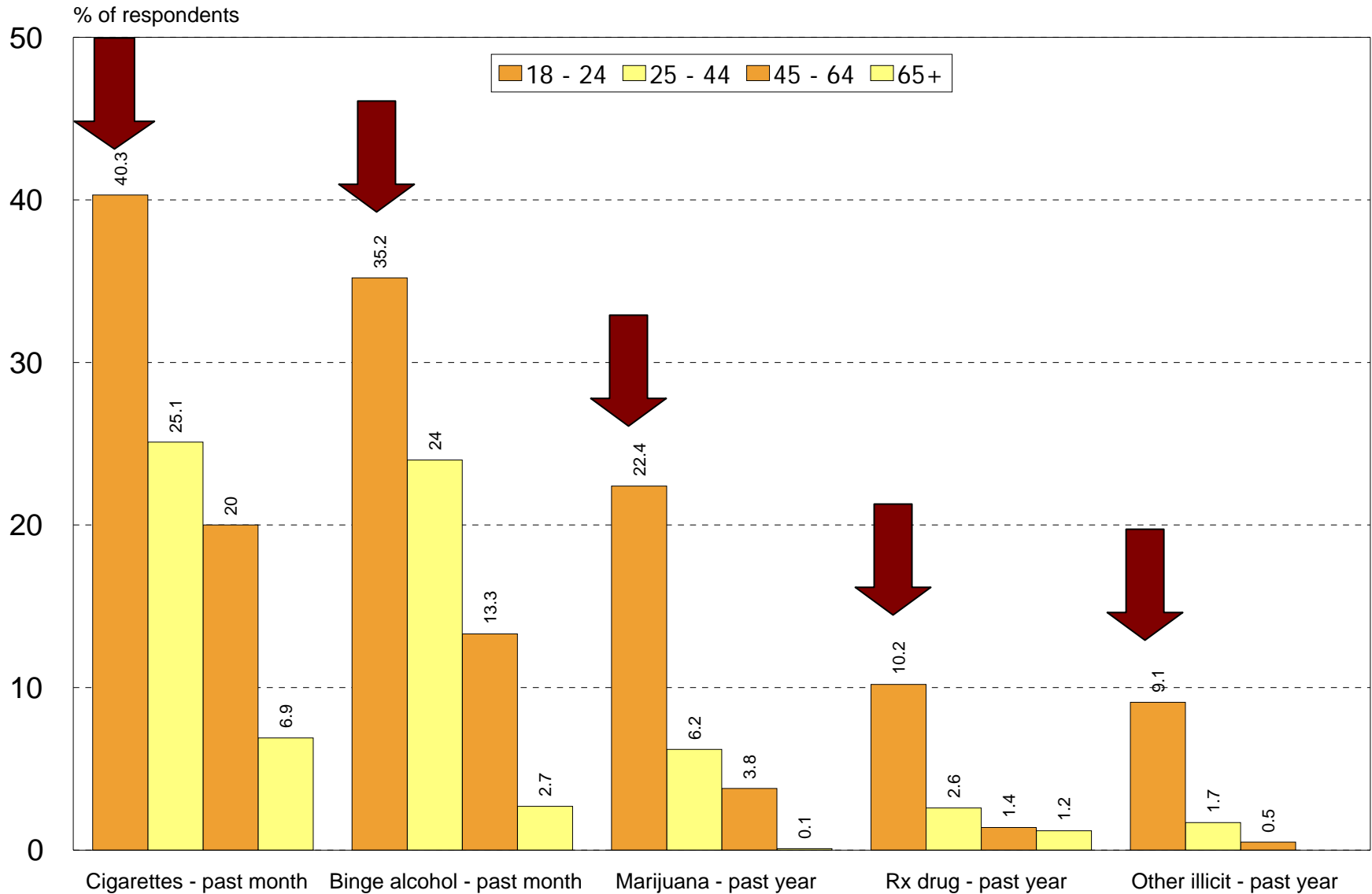
SOURCE: All respondents 18 and older who reported having five or more drinks on an occasion, one or more times in the past 30 days. National Center for Chronic Disease Prevention and Health Promotion, 2004 Behavioral Risk Factor Surveillance System, online at: [www.cdc.gov/brfss](http://www.cdc.gov/brfss)

# Past Month Alcohol, Tobacco, and Illicit Drug Use by Age Group



SOURCE: Substance Abuse and Mental Health Services Administration, Summary of Findings from the 2000 National Household Survey on Drug Abuse, NHSDA Series H-13, Rockville, MD.

# Substance use by age - Minnesota



SOURCE: 2004/2005 Minnesota Treatment Needs Assessment Survey, Performance Measurement and Quality Improvement Division, Minnesota Department of Human Services, January 2006. Online at: [www.dhs.state.mn.us/main/groups/healthcare/documents/pub/dhs\\_id\\_055443.pdf](http://www.dhs.state.mn.us/main/groups/healthcare/documents/pub/dhs_id_055443.pdf)

# ALCOHOL

75% drink before high school graduation,  
60 % have been drunk.

**20 % of 8th graders  
and  
42 % of 10th graders  
have been drunk at least once.**



# ALCOHOL

TREND - drink as much as possible  
as quickly as possible

## EXTREME DRINKING

Beer bong, power hour, drinking games



By the time children reach driving age they will have seen 75,000 ads for alcohol



**\$1.4 billion** = recent advertising expenditures  
in the US for **beer, wine, and liquor**



20 times more than the **\$70.5 million**  
spent on **milk** advertising

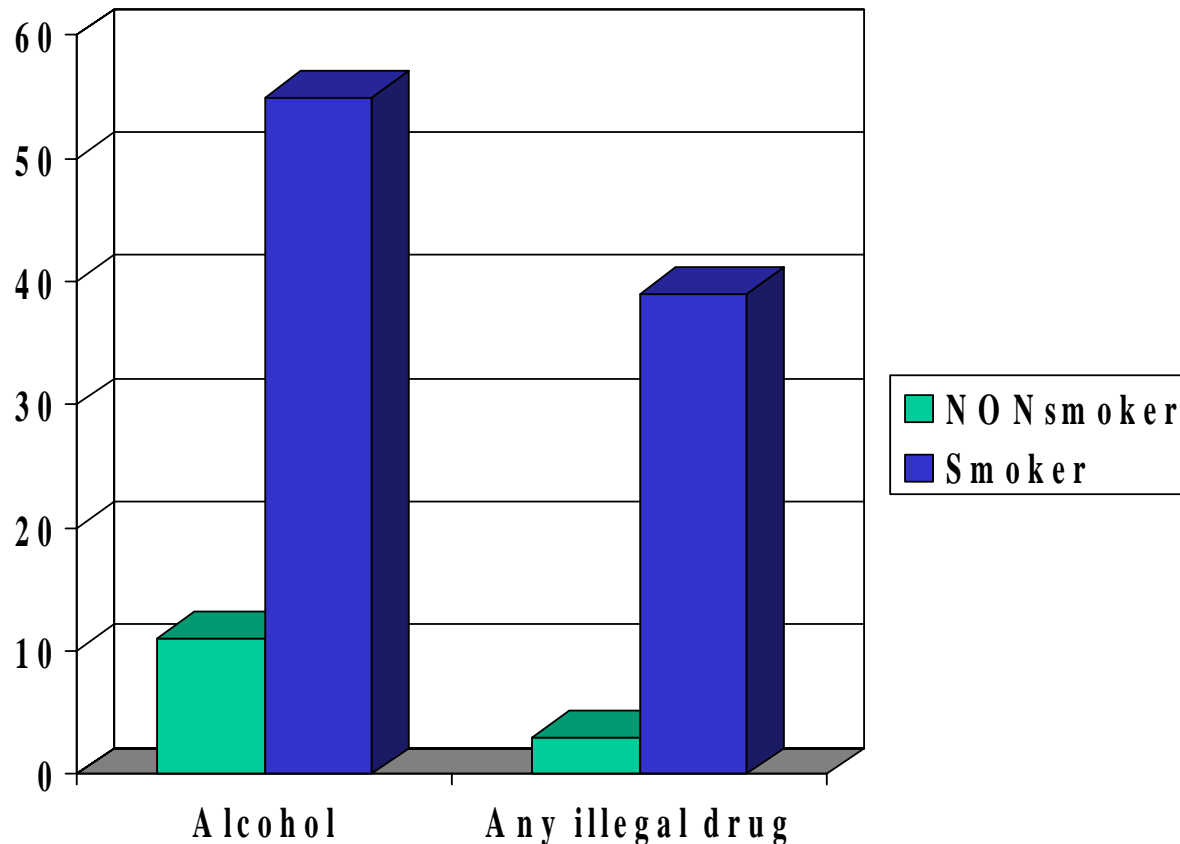


SOURCE: Adams Business Research. Adams Liquor Handbook 2001. Adams Wine Handbook 2001, New Adams Beer Handbook 2001. New York: Adams Business Media, AND Blisard N, Balyney D, Chandran R, et al. 1999. Analyses of Generic Dairy Advertising, 1984-97. Technical Bulletin No. 1873. Washington, DC: US Department of Agriculture, Food and Rural Economics Division, Economic Research Service.



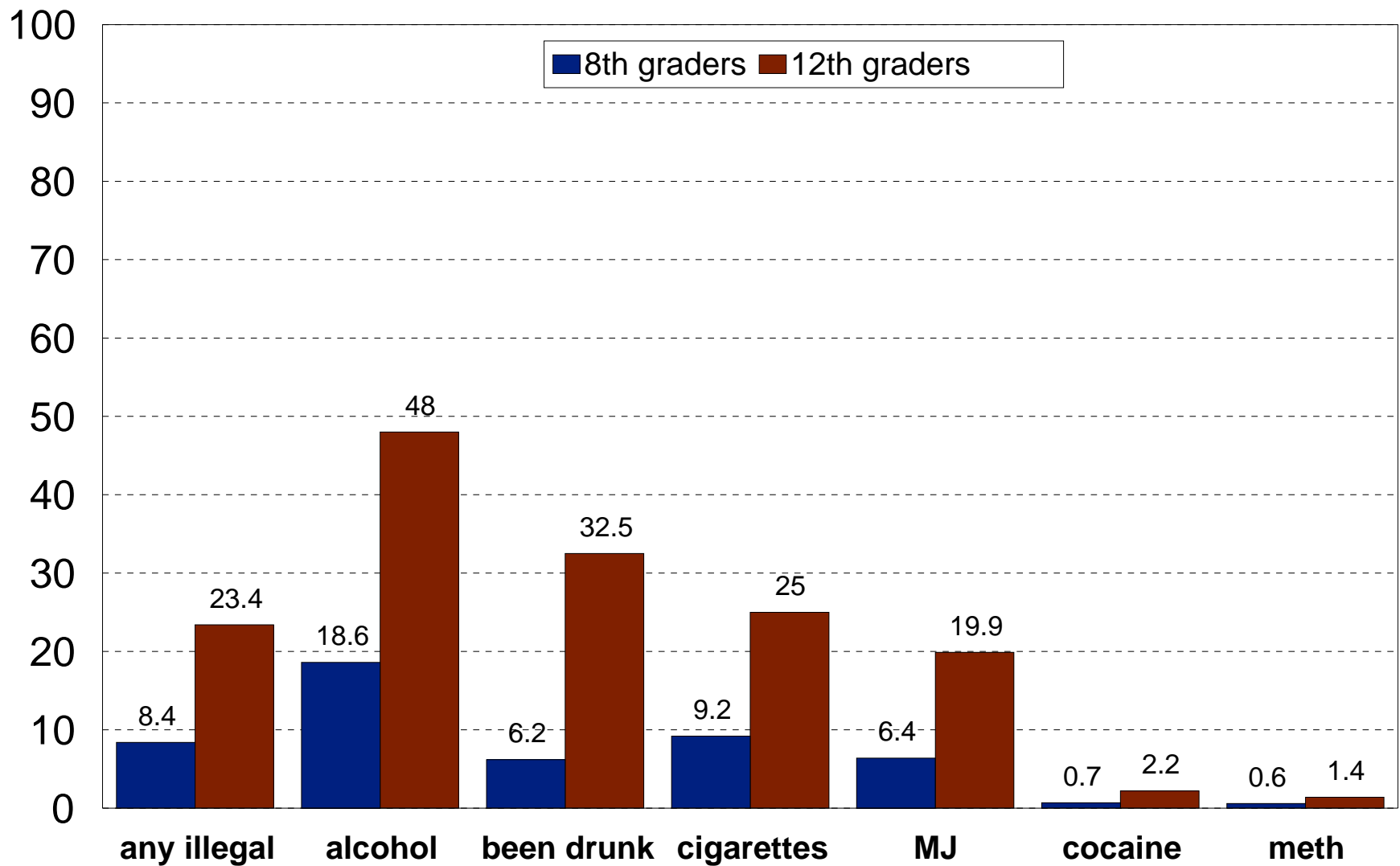
*"Now, kids, don't look until you're twenty-one."*

# Kids (age 12 - 17) who smoke cigarettes are much MORE LIKELY to drink alcohol and use drugs



SOURCE: 1998 Household Survey on Drug Abuse, U.S. Dept of Health and Human Services. USE = any past month use

# CURRENT Use of Selected Substances by 8th and 12th Grade



SOURCE: Johnston, L. D., O'Malley, P. M., Bachman, J. G. & Schulenberg, J. E. (2004). Monitoring the Future Survey, University of Michigan. Ann Arbor, MI. [On-line at: [www.monitoringthefuture.org](http://www.monitoringthefuture.org)]

## Percent of high school seniors reporting lifetime use:



75% alcohol (60% drunk)



45% marijuana



13% Rx opiates

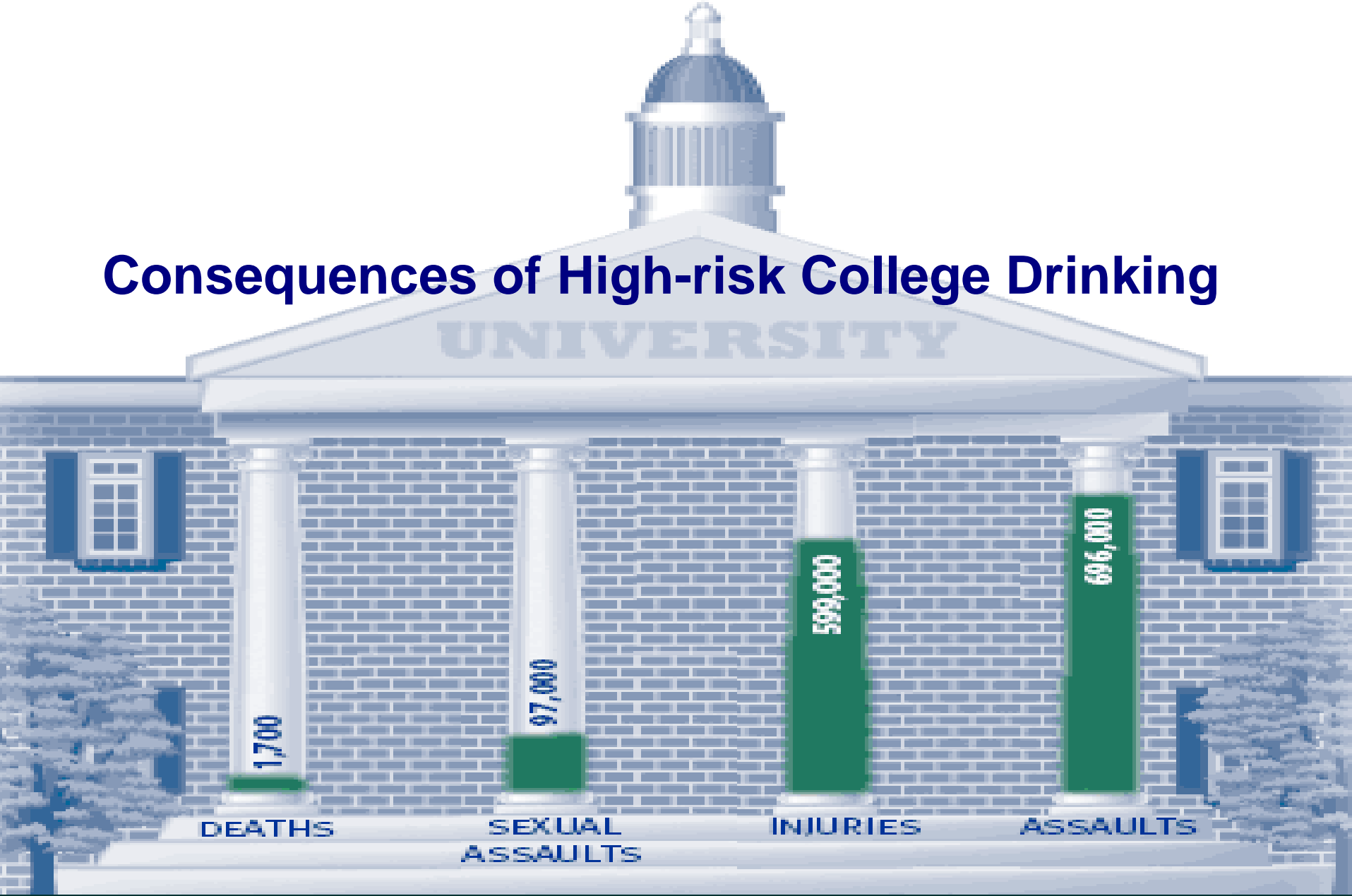


6% meth

By the time children reach college age most have already consumed alcohol.



# Consequences of High-risk College Drinking



Source: Hingson, R. et al. Magnitude of Alcohol-Related Mortality and Morbidity Among U.S. College Students Ages 18-24: Changes from 1998 to 2001. Annual Review of Public Health, vol. 26, 259-79; 2005.

# Consequences of High-risk College Drinking

Lower grades  
Failed courses  
More illnesses  
More STDS  
Blackouts  
Addiction



# College drinking

- ❑ Continuation of HS drinking patterns
- ❑ Part of larger alcohol-saturated culture
- ❑ Acceptable rite of passage, behavior
- ❑ Long-standing, widely-accepted tradition

# What is Prevention?

- **School**
- **Home**
- **Community**

# What is Prevention?

Same message

Different messengers

(schools, homes, communities)

# What Can Schools Do?

*CONNECT WITH KIDS*

SOURCE: "The Wingspread Declaration on School Connections." This document and six supporting articles were published in the September 2004 issue of the Journal of School Health.

# School Connectedness =

- Being held to high academic standards
- Getting support to meet those standards
- Structured and caring classroom environments
- Positive relationships with adults
- Feeling physically and emotionally safe at school

SOURCE: "The Wingspread Declaration on School Connections." This document and six supporting articles were published in the September 2004 issue of the Journal of School Health.

# School Connectedness:

**Students who experience these factors tend to be academic achievers--no matter what their race, ethnic group, or level of family income.**

**They're more likely to delay:**

- **use of tobacco, alcohol, and other drugs**
- **their first sexual experience**

**They also have fewer problems with:**

- **emotional distress**
- **violent behavior**
- **gang membership.**

SOURCE: "The Wingspread Declaration on School Connections." This document and six supporting articles were published in the September 2004 issue of the Journal of School Health.

# What Can Parents Do?

- ❑ Stay up-to-date, accurate.
- ❑ Talk early. Talk often. Listen.
- ❑ Make expectations clear.
- ❑ Set consequences and enforce.
- ❑ Model behaviors that reflect your values.
- ❑ Pay attention, be nosy, stay engaged.
- ❑ Reduce opportunities for unsupervised use.
- ❑ Lock up the liquor.
- ❑ Keep the conversation going.
- ❑ **Get help when you need it**

SOURCE: Falkowski, Carol L., *Dangerous Drugs: An Easy-to-Use Reference for Parents and Professionals*, Hazelden Publishing, 2003.

# What Can Communities Do?

## Advocate for Policies:

- Graduated driver's licenses
- Keg registration
- Happy hour regulations
- Social host laws
- Sales to minors
- Restricted advertising to kids

**Set good examples/norms**

# What is Prevention?

Same message

Different messengers

**What is prevention  
at colleges and  
universities?**

**Who are the messengers?**

# College Messengers:

- 1- Individuals, including at-risk and addicted drinkers**
- 2 - Student body as a whole**
- 3 - College and surrounding community**

# College Messengers:

## 1- Individuals, including at-risk and addicted drinkers

- Increase screening
- Increase opportunities for intervention
- Increase sober living options
- Increase recovery supported living and groups

# College Messengers:

## 2 - Student body as a whole

Address factors that encourage high-risk drinking:

- ❑ Widespread availability to students
- ❑ Aggressive commercial and social promotion of alcohol
- ❑ Large amounts of unstructured time
- ❑ Inconsistent enforcement of campus policies/laws
- ❑ Students perception of heavy alcohol use as the norm

# College Messengers:

## 3 - College and surrounding community

Through campus/community coalitions address:

- Server training
- Alcohol outlet density
- Taxes on alcohol
- Happy hour restrictions
- Promotional advertising
- Event sponsorships

# College Messengers:

- 1- Individuals, including at-risk and addicted drinkers**
- 2 - Student body as a whole**
- 3 - College and surrounding community**

# What is Prevention?

Same message

Different messengers

(at-risk students, entire student body,  
campus, surrounding community)

Data??

**Data help define the nature and extent of the problem.**

**Data help measure the effectiveness of interventions over time.**

# Target and Include:

- 1- Individuals, including at-risk and addicted drinkers**
- 2 - Student body as a whole**
- 3 - College and surrounding community**