Welcome to PREVENTING UNDERAGE DRINKING

A webinar series sponsored by the federal Interagency Coordinating Committee on the Prevention of Underage Drinking

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Office of Safe and Healthy Students

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Indian Health Service

- National Institute on Alcohol Abuse and Alcoholism
- National Institute on Drug Abuse
- Office of the Assistant Secretary for Health
- Office of the Assistant Secretary for Planning and Evaluation
- Office of the Surgeon General
- Substance Abuse and Mental Health Services Administration

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Introduction and Series Overview

Pointers for participation—

- Turn up your speakers;
- Use question box (on left) to submit technical problems;
- Use same box to submit questions for presenters;
- Submit questions for presenters at any time.



UNDERAGE DRINKING

Introduction to the Scope and Nature of the Problem

ICCPUD Webinar Series – Webinar I

Kenneth R. Warren, Ph.D.

Acting Director, National Institute on Alcohol Abuse and Alcoholism



Alcohol is the drug of choice among youth.

Many young people drink alcohol ...

- By the 8th grade, 3 in 10 teens have had at least 1 drink.¹
- By the 10th grade, more than half of teens have had a drink.¹
- By the 12th grade, 7 in 10 teens have had a drink.
- In 2011, 9.7 million young people ages 12–20 reported that they drank alcohol beyond "just a few sips" in the past month.²

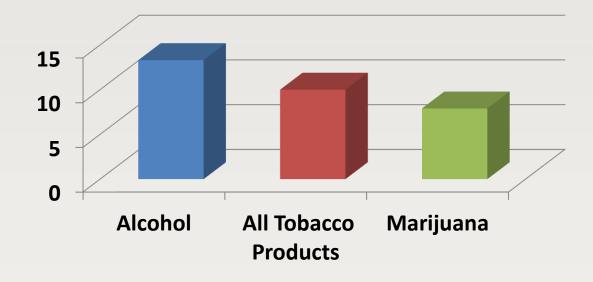
¹ Monitoring the Future, 2012

² National Survey on Drug Use and Health (NSDUH), 2011



More young people use alcohol than use tobacco or marijuana (or any other illicit drug).

Percentage of Youths Ages 12–17 Using Alcohol, Tobacco, and Marijuana (NSDUH, 2011)*



*Alcohol includes binge drinking (7.4%); tobacco includes cigarettes (7.8%).

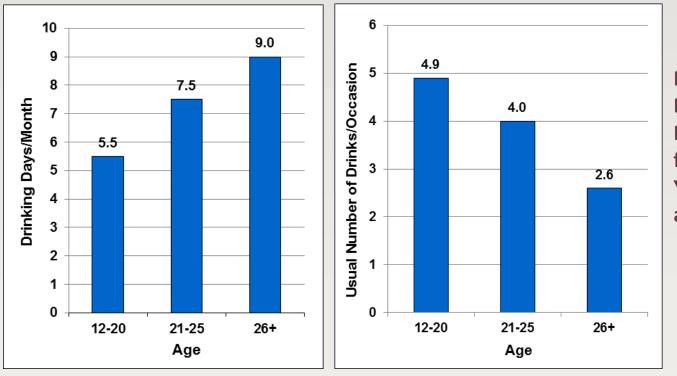


Many young drinkers binge when they drink.

- Binge drinking accounts for more than 90 percent of the alcohol consumed by youth.
- Youth ages 12–20 drink 11 percent of all alcohol consumed in the United States.



Many young drinkers binge when they drink. Although youth drink less often than adults do, when they do drink, they drink more.



Drinking Days per Month and Number of Drinks per Occasion for Youth (12–20), Young Adults (21–25), and Adults (≥26)

SAMHSA, CBHSQ, NSDUH, special data analysis 2012 (2011 NSDUH data)



Underage drinking results in a range of acute consequences.

- Deaths of young people under age 21 as a result of underage drinking. Each year in the U.S. there are about:
 - 1,900 deaths from motor vehicle crashes;
 - 1,600 deaths from homicides;
 - 1,200 deaths from alcohol poisoning, falls, burns, and drowning;
 - 300 deaths from suicides.
- Injuries
 - In 2008 alone, about 190,000 people under age 21 visited an emergency room for alcohol related injuries.
- Economic Cost
 - In 2006, underage drinking cost an estimated \$27 billion.



Underage drinking increases risk for other adverse consequences

- Impairs judgment
 - Drinking can lead to poor decisions about engaging in risky behavior, including drinking and driving, sexual activity (such as unprotected sex), and aggressive or violent behavior.
- Increases the risk of physical and sexual assault
 - Underage drinkers are more likely to carry out or be the victim of a physical or sexual assault after drinking than others their age who do not drink.
- Can lead to other problems
 - Underage drinkers may have trouble in school or with the law.
 - Drinking alcohol is associated with the use of other drugs.



Underage drinking can also have long-term consequences.

Affects the developing brain

- Young people's brains develop well into their 20's.
- During adolescence, the brain undergoes significant growth and remodeling.
- Alcohol can alter this development, potentially affecting both brain structure and function, and may cause cognitive or learning problems.

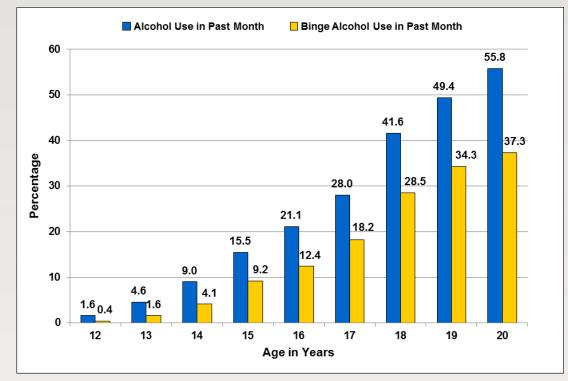
Increases the risk of alcohol problems later in life

• People who start drinking before the age of 15 are four times more likely to meet the criteria for alcohol dependence at some point in their lives.



Underage drinking is a developmental issue.

Current and Binge Alcohol Use Among Persons Ages 12–20



Note the *distinct age-related pattern;* drinking alcohol and binge drinking become more prevalent as young people get older.

SAMHSA detailed tables, NSDUH, 2011



Underage drinking is a developmental issue.

Underage drinking is affected by development. Risk-taking is common among many adolescents.

- As children mature, it is natural for them to assert their independence, seek new challenges, try new things, and take risks.
- Underage drinking is a risk that attracts many developing adolescents and teens. Many want to try alcohol, but often do not fully recognize its effects on their health and behavior.

Other developmental factors contribute:

- Peer pressure;
- Increased independence and unsupervised time; and
- Increased responsibility and stress.



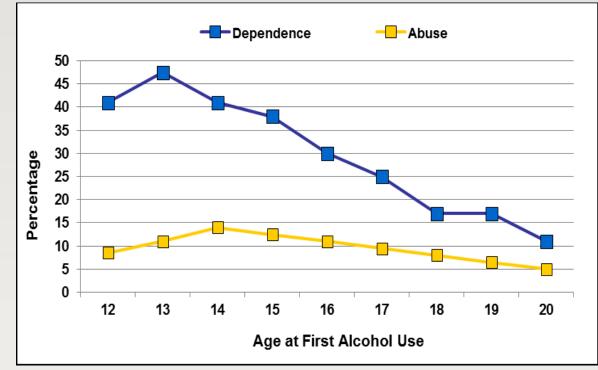
Underage drinking is a developmental issue.

Underage drinking affects development.

- Underage drinking can affect developmental trajectories and negatively impact development. Examples include:
 - School failure;
 - Trouble with the law; and
 - Increased liability for alcohol addiction.



Underage drinking is a developmental issue. Underage drinking can affect developmental trajectories and negatively impact development.



Ages of Initiation and Levels of DSM Diagnoses for Alcohol Abuse and Dependence

This figure shows the association of early drinking and alcohol dependence.

Grant & Dawson, 1997



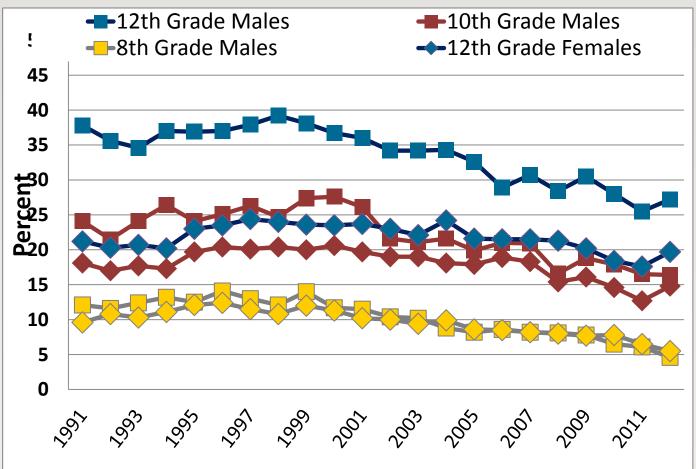
So how do we address this public health issue?

- Track progress over time with epidemiologic studies.
- Initiate research to investigate key questions.
- Ensure that interventions take development into account.
- Disseminate research-based information about interventions to those who can put this knowledge to work.

Tracking Progress



Epidemiological Tracking of Rates of Binge Drinking Among Male and Female 8th, 10th, and 12th Graders



Rates of Binge Drinking in the Past 2 Weeks Among Male and Female 8th, 10th, and 12th Graders, 1991–2012

Data from Monitoring the Future

Research



So what do we do now?

Stimulating and supporting research to investigate key questions

Areas of Investigation

Alcohol and the developing adolescent brain--Significant questions remain:

- What are the effects of both long- and shorter-term child and adolescent alcohol exposure on the developing human brain and how do they affect brain function and behavior?
- What is the effect of timing, dose, and duration of alcohol exposure on brain development?
- To what extent do these effects resolve or persist?
- Do the same processes that confer adaptability of the adolescent brain to its environment also make it more vulnerable to alcohol-induced changes, and do such changes increase an individual's risk for future dependence?



So what do we do now?

Ensure that interventions take development into account. Child and adolescent alcohol screening

 NIAAA recently released an alcohol screening guide for health care providers to identify alcohol use and alcohol use disorders in children and adolescents, and to identify risk for alcohol use, especially for younger children.

The guide is empirically based and is currently being evaluated in a variety of "real world" settings.



National Institute on Alcohol Abuse and Alcoholism

So what do we do now?

Disseminate research-based information about interventions to those who can put this knowledge to work.

- NIAAA works to disseminate research based information and materials to multiple audiences
 - Websites
 - Publications
- Collaborates with partners, (federal and other) to get information to those who need it.
 - Example: this series of webinars.



Thank you.

For more information, please visit our website:

www.niaaa.nih.gov

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Preventing Underage Drinking: The Shape of the Solution

Frances M. Harding, Director, Center for Substance Abuse Prevention, SAMHSA

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Consequences of Underage Drinking

Youth who drink are more likely to experience:

- School problems (e.g., failing grades);
- Social problems (e.g., fighting);
- Legal problems (e.g., arrest for driving under the influence);
- Physical problems (e.g., hangovers or illnesses);
- Disruption of normal growth and sexual development;
- Physical and sexual assault;

- Higher risk for suicide and homicide.
- Alcohol-related car crashes and other unintentional injuries;
- Memory problems;
- Abuse of other drugs;
- Changes in brain development that may have lifelong effects; and
- Death from alcohol poisoning.

Source: Centers for Disease Control and Prevention. (2012). *Fact Sheets: Underage Drinking.*





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Evidence-Based Prevention of Underage Drinking—Selected References

- A Call to Action: Changing the Culture of Drinking at U.S. Colleges (Task Force of the National Institute on Alcohol Abuse and Alcoholism, 2002)
- Reducing Underage Drinking: A Collective Responsibility (National Research Council and Institute of Medicine, 2004)
- Surgeon General's Call to Action To Prevent and Reduce Underage Drinking (U.S. Department of Health and Human Services, Office of the Surgeon General, 2007)
- What Colleges Need to Know Now: An Update on College Drinking Research (National Institute on Alcohol Abuse and Alcoholism, 2007)
- Strategies To Reduce Underage Alcohol Use: Typology and Brief Overview (Office of Juvenile Justice and Delinquency Prevention, 2009)
- Report to Congress on the Prevention and Reduction of Underage Drinking (U.S. Department of Health and Human Services, 2012)







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Elements of Effective Solutions

• Both individual and environmental approaches are important and make a difference, particularly when used together.





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- Some things put young people at risk of underage drinking, while other things protect them.







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Examples of Risk and Protective Factors

| Risk Factor | Domain | Protective Factor |
|------------------------------|------------|------------------------|
| Early aggressive behavior | Individual | Impulse control |
| Lack of parental supervision | Family | Parental monitoring |
| Alcohol use | Peers | Academic competence |
| Easy access to alcohol | Community | Enforcement of laws |









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Examples of Community Risk and Protective Factors

| Risk Factor | Protective Factor |
|--|---|
| Easy access to alcohol from retail outlets | Enforcement of underage drinking laws (e.g., compliance checks); reduced alcohol outlet density |
| Easy access to alcohol from parents or peers | Enforcement of underage drinking laws (e.g., social host liability laws) |
| Norms that tolerate or encourage underage drinking | Norms that demonstrate disapproval of underage drinking |





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Elements of Effective Solutions

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- Some things put young people at risk of underage drinking, while other things protect them
- Prevention should come early, be reinforced during transition points, and continue over the long term.





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- Prevention should come early, be reinforced during transition points, and continue over the long term.
- Addressing the full environment in which alcohol use takes place also is critical.
- Comprehensive, data-driven approaches that address a variety of factors and engage multiple partners are more effective than those that have a single focus.









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Study Citations

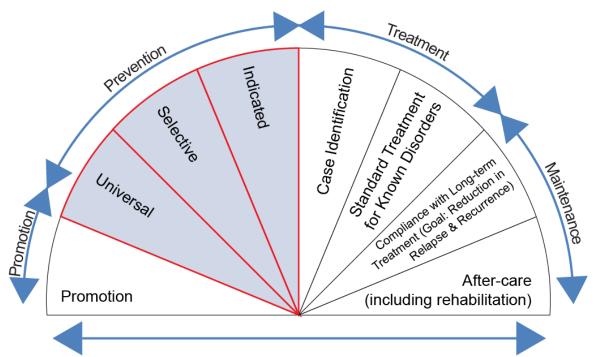
- Saltz, R. F., Paschall, M. J., McGaffigan, R. P., & Nygaard, P. M. (2010). Alcohol risk management in college settings: The safer California universities randomized trial. *American Journal of Preventive Medicine*, 39(6):491–99.
- Paschall, M. J., Antin, T., Ringwalt, C. L., & Saltz, R. F. (2011). Evaluation of an Internet-based alcohol misuse prevention course for college freshmen: Findings of a randomized multi-campus trial. *American Journal of Preventive Medicine*, *41*(3):300–08.





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Who Are You Targeting With Prevention?



Source: National Research Council and Institute of Medicine. (2009). Preventing Mental, Emotional, and Behavioral Disorders Among Young People: Progress and Possibilities.



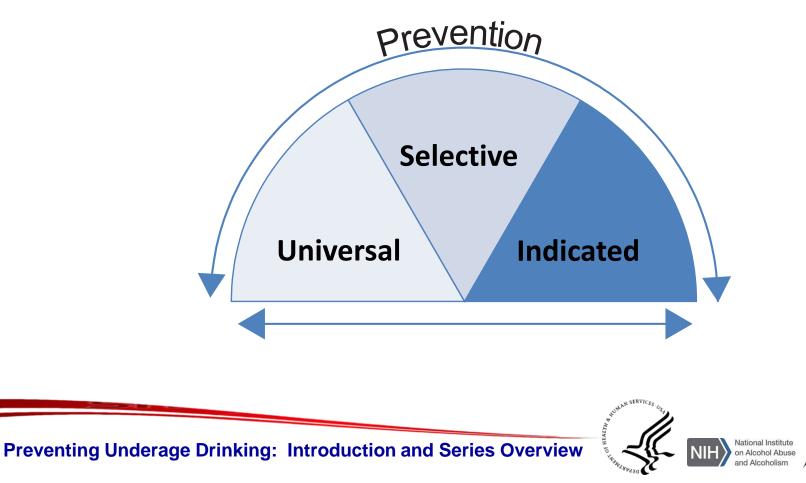




on Alcohol Abuse

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Who Are You Targeting With Prevention?





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What Strategic Decision-Making Framework Will Be Used?

Key framework elements—

- Assessment of risk and protective factors in your community;
- Identification of existing and needed capacity to respond;
- Selection of evidence-based strategies addressing targeted factors; and an
- Evaluation plan for measuring progress toward goals and adjusting the intervention over the long term.





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Key Considerations in Developing a Prevention Strategy

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- Use data to drive your assessments and measure progress;
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Key Considerations in Developing a Prevention Strategy

- Use data to drive your assessments and measure progress;
- Select strategies that are culturally appropriate;
- Select strategies that are achievable;
- Target as many sectors as appropriate; and
- Implement with fidelity and monitor fidelity of implementation.





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Challenges Ahead

• Expectancies related to college drinking;







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Challenges Ahead

- Expectancies related to college drinking;
- National culture of drinking;
- Emerging threats from easy access to alcohol, new and appealing products, and increasing consequences; and
- Competing messages.



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Take-Away Messages

- Solid prevention science has identified effective strategies.
- Prevention approaches are most effective when they:
 - Are comprehensive and data driven;
 - Address both individual and environmental factors;
 - Recognize and address risk and protective factors in their design; and
 - Are age and culturally appropriate.
- Important to address underage drinking on college campuses.







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Questions?

Use the question box on the left of your screen to submit questions for Dr. Warren and Director Harding.



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For More Information

Please visit <u>www.stopalcoholabuse.gov</u> for:

- Future webinar dates;
- Archived sessions;
- Resource links.