



PRC COMMUNITY OUTREACH

<http://resources.prev.org/>

February, 2013

Welcome to our first newsletter edition in 2013!

In this issue we introduce a new contributor and have a new article from our resources site. There are also new articles on college drinking, secondary prevention programs, community influence on youth drinking, and parent supply of alcohol. If you have any community news or projects to share, please contact LisaMarie at lmiramontes@prev.org.

Reminder! Please complete our survey at your earliest convenience. Thus far we have gathered some very interesting and important information. The survey takes less than 15 minutes and can be found at:

<http://www.surveymonkey.com/s/2QPRWGL>



Ask Sgt Bob

It is our pleasure to introduce "Sgt Bob". Sgt. Bob Del Torre is a 33 year veteran of the San Francisco Police Department. He now teaches Responsible Beverage Service Training throughout California. If there are any questions or specific alcohol related issues you would like to read about, please contact us.

One of the operations Sgt. Del Torre and his team of officers initiated with Alcohol Beverage Control, was addressing the problem of 20 bars located in his police district. The major problems were that of **servicing obviously intoxicated patrons, servicing minors, drug use in the bars, and unruly patrons** that frequented these bars. The community had expressed their frustration over the unruly bars in their neighborhood.

A record **120 arrests** were made, most for:

Serving alcohol to intoxicated patrons

Minors in possession of alcohol

Possession of weapons (guns, illegal knives)

Serving alcohol to minors

Narcotic violations

Outstanding warrants and Parole Violations

The bars were shut down for 15 days and many received heavy fines. After reopening, the owners "cleaned up" and set about to follow the rules. Neighbors started to revisit their neighborhood bars, which had been catering mostly to gang members before the shut-down operation.

The Sgt. reports that after the shut-down, there was a significant decrease of violence, no loitering drunks, and less juveniles hanging nearby.

More from Sgt. Bob! In this edition "Did you know" can be found on page 5.

Secondary Prevention Programs

A common problem for programs that target more general populations is that they often miss those who need their services the most. In the case of prevention, school based programs are an example of a primary prevention that targets the entire school population. However, Marsiglia and colleagues point out, the prevention efforts often do not reach or address the higher risk populations. The researchers looked at a primary prevention program called *keepin' it REAL* and a secondary prevention program *REAL Groups* that focuses on higher risk populations. The secondary prevention program was culturally grounded and included peer norms, prosocial behaviors, neighborhood adjustment, and group membership issues.

The *keepin' it REAL* and *REAL Groups* are ten and eight weeks long respectively, and are taken at the same time. The researchers expected that middle school students identified as higher risk who take the courses during the 7th grade would be less likely to have used alcohol by the end of 8th grade compared to other high-risk students who only take the primary program *keepin' it REAL*. A total of 361 students participated in the study, and 107 participated in both programs.

Overall those who participated in both the primary and secondary prevention programs were less likely to have used alcohol at the end of 8th grade. Differences were greater when compared to students with similar demographics who only participated in the primary program or when compared to other high risk students who did not participate in any program. The researchers concluded that their findings support the theory that multi components to prevention efforts may be more effective particularly with higher risk populations, and the importance of components using culture related strategies. The researchers also point out that it is unknown how effective the secondary prevention program is if used as a primary and only prevention program. Future research is needed on secondary programs and other programs that focus on higher risk populations. It is also possible that secondary programs may have “secondary” outcomes, or may have success as a primary program.

Marsiglia et al (2012). Beyond primary prevention of alcohol use: A culturally specific secondary prevention program for Mexican heritage adolescents. *Prevention Science*, 13, 241-251.

Parents Supplying Alcohol: Responsible or Not?

In previous editions we have included articles on parents supplying youth with alcohol. During our time spent with community coalitions, the topic has been discussed on whether or not parents can teach “responsible drinking”. Researchers have also looked at parental supply of alcohol to their children, some finding later problem behavior with alcohol use during adulthood.

A recent study sought to see if there is an association between parental supply and risky drinking, and included examining whether or not there was parental supervision when supply was given to minors. The study was conducted in Australia, where one has to be 18 to purchase alcohol but there is no law on age alcohol consumption. Minors may be supplied alcohol in private settings. Further, there are no laws on supervision of underage drinkers although in some states there is an “irresponsible supply” offense if minors are provided with excessive amounts of alcohol or are not supervised when drinking. The researchers noted recent data that found parents are the most common source of alcohol (34%) to underage drinkers and that parents gave them their most recent drink. Surveys were given out to seven high schools that included items on alcohol consumption, peers’ consumption, sources of alcohol, and parental supply of alcohol. Over 500 students completed the survey and the ages ranged from 13 to 17 with the average age being 16 (SD = 1.3) and 53% were female.

Results found that risky drinking was common and increased for each school year, from 7.9% in school year eight to 77% in school year 12. Among students who reported risky drinking, alcohol was most often supplied by friends (41.9%) and parents (30.5%). While there was no association found in parental supply and risky drinking, the researchers found when alcohol was supplied by parents for consumption with no supervision the odds of risky drinking was four times greater. The researchers also found that perceptions of peer drinking was associated with risky drinking, and suggested that future studies look at how much alcohol is supplied to youth.

Gilligan et al (2012). Parental supply of alcohol and adolescent risky drinking. *Drug and Alcohol Review*, 31, 754-762

Community Influence on Youth and Risk for Alcohol Use

It is common to look at how parents, teachers, and peers having an influence on adolescents and the decisions they make, such as whether or not to drink alcohol and how much. A study at Penn State evaluated seven risk and protective factors as predictors to alcohol use. Protective factors consisted of family, school, and community. Risk factors were family risk, antisocial attitudes, antisocial behaviors, and association with antisocial peers. Data was analyzed from over 200,000 students in 8th and 10th grade and found the protective factors had a moderate influence on alcohol use. Youth with antisocial attitudes and antisocial friends who reported positive experiences in their community were less likely to use alcohol. However, some risk factors were more predictive of alcohol use such as antisocial peer risk than some of the protective factors. The researchers hope to identify the most important and influential factors to help prevention efforts, and how they might differ among community types such as size and income. <http://psychcentral.com/news/2013/01/13/it-takes-a-village-to-curb-teenage-alcohol-use/50312.html>

Outcome News: Communities That Care

A recent report show that the Communities that Care (CTC) found more than just reductions in smoking and delinquent behavior among youth. CTC is a coalition-based community prevention operating system that uses a public health approach to prevent youth problem behaviors such as underage drinking. The intervention delayed initiation of alcohol use and binge drinking, for example 5th graders who had not yet tried alcohol were 38 percent less likely to use have tried alcohol by the 10th grade. The same group was also 46 percent less likely to have tried smoking cigarettes. It has been noted that CTC towns have cost-effective benefits, in monetary value researchers at the University of Washington estimate for every dollar invested in prevention, communities receive a return of over five dollars. For more information on CTC: www.communitiesthatcare.net.

Alcohol Brand Allegiance

There is growing research on alcohol marketing and drinker identification/brand allegiance with problem and binge drinking. One recent study looked at alcohol-specific cognitions and found an association with alcohol marketing and drinking problems among underage drinkers. Data analyzed was gathered from over 1700 participants aged 15-20 who were asked about their exposure to alcohol marketing, such as from movies, the internet, and television. Youth more receptive to alcohol ads were more likely to binge drink, to identify themselves as a drinker, and to have a favorite alcohol brand. The researchers also note that initiation of alcohol use and responding to alcohol brands is associated with problem drinking. For more details:

http://www.eurekalert.org/pub_releases/2012-12/ace-amu120712.php

Alcohol Ads Online

A recent article accused alcohol companies of avoiding ad restrictions by using Facebook and the internet. While some of the sites put up warnings on age requirements or require users enter their age in order to enter the site, it is quite easy for a visitor to lie about their age and easily gain access. According to the source, 94% of youth 12-17 have seen alcohol ads on TV and 55% have seen alcohol ads on the internet. Last year alcohol brands ranked #2 for using Facebook as a way to engage consumers. Their websites often offer games and downloads as well as other activities to entertain users. From another source, alcohol brands have even reported that Facebook activity led to a 20% increase of sales, encouraging companies to send marketers off to "Facebook boot camps".



<http://www.couriermail.com.au/news/technology/alcohol-companies-market-to-children-on-facebook-and-internet/story-fn7cejkh-1226543723068>

<http://www.telegraph.co.uk/technology/facebook/9793739/Alcohol-companies-encourage-drinking-on-Facebook.html>

Legalization of Marijuana and Youth Use of Marijuana

The legalization of medical marijuana does not seem to increase marijuana use among youths, a recent study by scientists at the Prevention Research Center of the Pacific Institute for Research and Evaluation in Berkeley, California found. Instead, community social norms that are related to support for legalization of medical marijuana, rather than legalization *per se*, may affect use by youths. The study, carried out using data from Montana, examined the relationship between the number of adults in a county who have legal access to medical marijuana and the number of young people who use marijuana. The results show that living in a county with more medical marijuana users was *not* related to lifetime or 30-day marijuana use among 8th, 10th and 12th graders. However, level of voter approval of medical marijuana was positively related to lifetime and 30-day use among teens.

Marijuana use has been on the rise in the US and daily marijuana use is at a 30-year high among high school seniors, as indicated by the annual Monitoring the Future survey. Marijuana is the most commonly used illicit drug among US teens with 13% of 8th graders, 29% of 10th graders and 36% of 12th graders having used it in the past year. Marijuana is easily accessible to youths with 38% of 8th graders, 68% of 10th graders and 82% of 12th graders reporting that it is fairly easy or very easy to get marijuana.

The current study examined whether having a greater number of legal users of medical marijuana affects teen use. Most research suggests that easy availability of a substance (for example, alcohol or tobacco) increases use among teens – even if they are legally prohibited from using the substance. This study, however, did not find that result.

The survey data regarding teen use and attitudes were from the 2010 Prevention Needs Assessment (PNA) Community Student Survey, which is conducted by the Montana Department of Public Health and Human Services. This voluntary and anonymous survey is administered every other year to students in grades 8, 10 and 12. In 2010, data were collected using self-administered surveys given by teachers and other school staff in 73.5% of eligible Montana schools. More than 17,000 students were surveyed.

A third of youths surveyed reported that they had used marijuana at some point in their lifetime. More than half of these users (54.3%) reported having used marijuana in the past 30 days. On average, youth users of marijuana were 13.8 years old the first time they smoked marijuana. On average, perceived access to marijuana was rated as “somewhat easy” by all respondents and “easy” by marijuana users. Youths from counties with more medical marijuana users perceived that marijuana was easier to obtain than did youths from counties with fewer medical marijuana users.

Medical marijuana was legalized in Montana through a ballot initiative in 2004. In 2011, the number of medical marijuana cards per 1,000 population ranged from 2.6 to 67.3 cards per county with a mean of 25.1. Percent of yes votes for the legalization of medical marijuana in the general election in 2004 ranged from 36.5% to 73.2% across counties with a mean of 55.9%.

The study found that youths who lived in a county with a higher proportion of legal medical marijuana users were no more likely to use marijuana than youths in counties with few legal users. However, youths who lived in counties with higher levels of voter approval for legalization of medical marijuana were more likely to have used marijuana. The findings of this study suggest that it may be the normative environment more than the number of legal medical marijuana users *per se* in a community that is related to marijuana use among youths. The percentage of votes in favor of legalization of medical marijuana may represent not only greater acceptance of medical marijuana, but more tolerant attitudes towards marijuana use in general.

Lead author Dr. Bettina Friese stated, “These findings highlight the importance of the normative environment in which teens live. It is not just the presence of a substance in the community that affects the behavior of teens but the attitudes and the culture around them. Votes for the legalization of medical marijuana can be seen as an expression of these community norms. Our findings suggest that if the existing community norms are supportive of medical marijuana use, then marijuana use among teens is higher. We need to make a greater effort to change how teens view marijuana use in order to reduce marijuana use among teens.”

The study suggests that reducing marijuana use among youths will require comprehensive prevention efforts. Prevention efforts should focus on changing norms surrounding marijuana use in the community, family and among peers in order to reduce marijuana use among youths.

Did you know?

- It is against the law to be drunk in a bar- Bars are public places and it's against the law to be drunk in a public place.
- As a bartender, waitress or liquor store clerk: It is against the law to serve an obviously intoxicated person. It is a Misdemeanor.

Obviously Intoxicated: If the person ACTS like he/she is DRUNK then it is illegal. This is a very serious crime and major problem in our communities.

- If you have a liquor license, Alcohol Beverage Control Investigators and the Police can search your premises during business hours without a warrant.

UDETTC Monthly Update

SUCCESS STORY: NEVADA Impacting Youth Access to Alcohol and Reducing Crime in Las Vegas

Clark County, Nevada, is home to the city of Las Vegas and approximately 71 percent of Nevada's population, including 80 percent of the state's underage population. Alcohol is available 24/7 and the enforcement of liquor laws is the responsibility of local law enforcement agencies. Despite these challenges, the Las Vegas Metropolitan Police Department (LVMPD) has achieved impressive results in reducing youth access to alcohol and crime in hot spots of the city. Under the leadership of Captain Chris Jones and Lieutenant James Seebock, community policing officers, along with patrol officers, conducted high visibility enforcement in the 'hot spot' areas with high priority calls and high alcohol retailer density. This Success Story describing Nevada's effective use of mapping software and policing resources and can be read in its entirety by visiting the following hyperlink below: You may read January's Success Story in its entirety by visiting the following link: http://www.udetc.org/documents/success_stories/NV0213.pdf

More on Ignition Interlock Devices (IIDs)

Last December, the National Transportation Safety Board recommended that all cars and trucks be equipped with a standard device based on IIDs to monitor alcohol use for all vehicles on the road. There are reports that automakers in Detroit have been testing in-dash systems since last summer. The NTSB hopes to greatly reduce alcohol-impaired accidents and deaths. While some worry how devices might distinguish between a driver and passenger, there is also the question of privacy and what kind of data might be stored within the vehicle or reported to the government.

<http://www.examiner.com/article/government-board-calls-for-alcohol-detectors-all-cars>

Articles from PRC Researchers

In the previous issue we highlighted an article published in an issue of Alcohol Research and Health, and included four articles from PRC Researchers, a total of 5 from PIRE. The link below gives an overview of each publication, and we've included a couple of the titles.

<http://pubs.niaaa.nih.gov/publications/arh342/133-134.htm>

Prevention Interventions of Alcohol Problems in the Workplace: A Review and Guiding Framework

Regulating Availability: How Access to Alcohol Affects Drinking and Problems in Youth and Adults

Environmental Approaches to Prevention in College Settings

UDETTC Online Courses

The Underage Drinking Enforcement Training Center (UDETTC) has available three on-line distance learning courses. These courses provide a *no-cost* training that focuses on the reduction of underage access to alcohol and are developed to support enforcement and community agencies in preventing underage drinking and youth access to alcohol. The courses can be accessed at: <http://www.udetc.org/distancelearning.htm>.

UDETTC: <http://www.udetc.org/>

Resources from UDETTC and PIRE:

http://www.udetc.org/College_eKit/index.asp

http://www.udetc.org/College_eKit/Publications.html

Updates on College Drinking

An article reporting on recent NIAAA data tells us half of college students engage in heavy, risky drinking, and that 25% of college students report negative academic consequences such as missing class, low test scores and low final grades as a result of their drinking. And many drinkers start before college. Monitoring the Future data found that 22% of 12th graders report heavy drinking, and 40% report having had alcohol within the last 30 days. Thus alcohol is already a part of young people's lives when they enter college. In fact, students often overestimate other college students' drinking behaviors, making the drinking norm seem higher than it is, no pun intended, and the perception that alcohol is needed for social success.

Further, the NIAAA reports that undergraduates use alcohol at higher rates than their peers who don't attend college, also alluding to the perception that alcohol is a part of college life and necessary for success. Researchers at our own institution have found that young people who work after high school rather than attend college full-time report a decrease in either alcohol, marijuana, or both.

Some of the efforts colleges are making to reduce harmful drinking include restricting the availability of alcohol on campus, reporting the number of students who drink moderately or not at all, and encouraging student leaders to plan alternative events without alcohol.

<http://www.forbes.com/sites/collegeprose/2012/12/17/a-sober-assessment-of-high-risk-drinking-on-college-campuses/>

Another recent study on college drinking notes that the negative consequences of drinking, such as hangovers, fighting, blackouts, drinking and driving, and falling behind on school-work have increased among older college students over the last decade.



The article also discusses high-risk students, high-risk events, and how positive consequences reinforce drinking whereas negative consequences may lead to a reduction in drinking.

Mallett et al (2012). An update of research examining college student alcohol-related consequences: New perspectives and implications for interventions. *Alcoholism: Clinical and Experimental Research*, 36(12).

<http://onlinelibrary.wiley.com/doi/10.1111/acer.12031/pdf>

Research at PRC has indicated that environmental interventions can make a significant difference in heavy and risky drinking among college students. For college drinking articles on our resources, go to: <http://resources.prev.org/collegedrinking.htm>. The following link is to PRC's article on Safer Colleges: <http://resources.prev.org/documents/SaferCollegesSummaryRFS.pdf>

NIAAA's College Drinking Intervention Decision Tool

As posted on our Facebook page, the NIAAA Newsletter's Winter Edition announced that the tool will be released sometime this year, as a result of efforts to improve student health and prevent high-risk college drinking. The matrix consists of 60 strategies in 7 categories and includes both individual and environmental intervention strategies.

For the article and related links:

<http://pubs.niaaa.nih.gov/publications/Newsletter/Winter2012/article04.htm>

For other articles in the issue: http://pubs.niaaa.nih.gov/publications/Newsletter/Winter2012/newsletter_number25.htm