



State of Alaska

Plan ^{to}
Reduce &
Prevent
Underage
Drinking

Prepared by the

**Alaska Interagency Coordinating Committee
on the Prevention of Underage Drinking**

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Draft

Background

Underage drinking in the United States has long been a concern by health professionals, educators, treatment providers, and prevention specialists. In 2002, Congress responded by asking the National Research Council and the Institute of Medicine of the National Academies of Science (IOM/NAS) to develop a national strategy to reduce and prevent underage drinking. The IOM/NAS created a committee that conducted a broad review of federal, state, and non-governmental programs. During the review the committee utilized scientific literature, research, public input, and the expertise of the selected members. In 2004, *Reducing Underage Drinking: A Collective Responsibility*ⁱ (widely referred to as the IOM/NAS Report) was published outlining several components for action by national, state, and local governments; the alcohol and entertainment industries; retailers, restaurants and bars; colleges and universities; schools; law enforcement agencies; community organizations; and parents and other adults.

The goal of the national strategy as outlined in the IOM/NAS Report is to reduce and prevent childhood and underage alcohol use through the creation and sustainability of broad societal commitment. Such commitment will require the active participation of multiple individuals and organizations at the national, state, and local levels, as stated in the report and supported again by Congress in 2004.

In 2004, as part of Consolidated Appropriations Act, Congress directed the Secretary of Health and Human Services (HHS) to establish an Interagency Coordinating Committee on the Prevention of Underage Drinking (ICCPUD). The ICCPUD was charged with submitting a report to Congress which outlined a plan for combating underage drinking. The federal ICCPUD membership consists of representatives from the Office of the Surgeon General, the Centers for Disease Control and Prevention, the Administration for Children and Families, and the Office of the Assistant Secretary for Planning and Evaluation, the National Institute on Alcohol Abuse and Alcoholism, the Department of Justice/Office of Juvenile Justice and Delinquency Prevention, the Department of Education/Office of Safe and Drug Free Schools, the Department of Transportation/National Highway Traffic Safety Administration, and the Office of National Drug Control Policy.

In 2005, the Substance Abuse and Mental Health Services Administration (SAMHSA), an agency within HHS, and the federal ICCPUD planned a national meeting of the states. Each state's Governor's Office was responsible for determining the lead agency for the national meeting and the make up of the team to be sent. Alaska's Governor appointed the Department of Health and Social Services, Division of Behavioral Health as the lead agency. A team of seven was created with representatives from the Alaska Court System; the Department of Education and Early Development; Department of Transportation/Highway Safety Office; Department of Health and Social Services, Division of Juvenile Justice; Department of Health and Social Services, Division of Behavioral Health/Prevention; Department of Health and Social Services, Division of Behavioral Health/Alcohol Safety Action Program; and the

Department of Public Safety/Alcoholic Beverage Control Board. A representative from the Alaska Native Justice Center was asked to join the team upon the team's return from the national meeting.

The meeting was held in Washington, D.C. to support teams consisting of government officials from each State, territory, and the District of Columbia to address the serious problem of underage alcohol use. Participants were provided with the most recent information on the scope and consequences of underage alcohol use as well as evidence-based strategies for addressing the issue. Teams were encouraged to assist communities in their states in hosting Town Hall meetings in March 2006 in an effort to "Start Talking Before They Start Drinking", also the name of a national PSA campaign, which kicked off in November 2005.

Alaska's team committed to supporting the national Town Hall meeting event in Alaska and chose the temporary name: Alaska Interagency Coordinating Committee on the Prevention of Underage Drinking (Committee).. The new media campaign entitled "Start Talking Before They Start Drinking" was introduced to Alaska communities starting with Anchorage on November 15, 2005 at a Town Hall meeting. To date, Town Hall meetings have been held in Anchorage (two times), Juneau, Valdez, Fairbanks, Galena, Yakutat, Nome, and Sitka. Whereas, the federal Town Hall initiative has been completed, the Committee believes that the Town Hall meeting process is invaluable in terms of gathering information and feedback on reducing and preventing underage drinking and therefore, has incorporated it as one tool in the state strategy addressed in this report.

As the Committee received feedback from the various Town Hall meetings, it became increasingly clear that Alaska needed to develop its own strategy to reduce and prevent underage drinking. In October 2006, Committee members began reviewing plans from other states: Wyomingⁱⁱ, Ohioⁱⁱⁱ, New Hampshire^{iv}, and Florida^v. Committee members also reviewed the comprehensive integrated mental health plan released by the Department of Health and Social Services in November 2001, which discussed goals, performance measures, and strategies to address underage drinking in the State of Alaska^{vi}. In December 2006, the Committee agreed that the Wyoming state plan was the most comprehensive, mirrored the national strategy, and was reasonable in terms of adaptation to Alaska's needs. The Committee also acknowledged that federal H.R. 864, commonly referred to as the STOP Act (Sober Truth on Preventing Underage Drinking Act) became Public Law 109-422 on December 20, 2006 and should be held in consideration during the drafting of the state strategy.

In February 2007, the Committee met for two days in Juneau to work on Alaska's strategy to reduce and prevent underage drinking. The following pages contain recommendations for each of the components for action called for by the IOM/NAS Report.

Executive Summary

We know that Alaska has a serious underage drinking problem. In 2005, underage drinkers consumed 19.2% of all alcohol sold in Alaska, totaling \$74 million in sales. These sales provided profits of \$36 million to the alcohol industry^{vii}. A myriad of catastrophic health, social and economic problems resultant from underage drinking has impacted Alaska's youth. Childhood and underage drinking has been shown to be a causal factor in homicide, suicide, traumatic injury, drowning, burns, violent and property crime, high risk sex, fetal alcohol syndrome, alcohol poisoning, and the need for treatment for alcohol abuse and dependence.

The cost of underage drinking to the citizens of Alaska was \$317 million in 2005, inclusive of medical care, work loss, and pain and suffering^{viii}. This is equivalent to \$3,944 per year for each youth in the State. Based on these figures, per capita, Alaska is second among the fifty states for the cost of underage drinking.

As demonstrated in the table below, the largest costs to the State of Alaska can be attributed to youth violence and traffic crashes by underage youth under the influence of alcohol. Furthermore, a multitude of other problems contribute significantly to the overall cost. For example, among teen mothers, fetal alcohol syndrome (FAS) costs Alaska \$4.6 million. Young people who begin drinking before age 15 are four times more likely to develop alcohol dependence and are two and a half times more likely to become abusers of alcohol than those who begin drinking at age 21^{ix}. In 2003, 366 youth 12-20 years old were admitted for alcohol treatment in Alaska, accounting for 11% of all treatment admissions for alcohol abuse in the State^x.

Costs of Underage Drinking by Problem, 2005	
Problem	Total Costs (in millions)
Youth Violence	225.5
Youth Traffic Crashes	24.9
High-Risk Sex, Ages 14-20	18.4
Youth Property Crime	7.2
Youth Injury	16.8
Poisoning and Psychoses	1.6
FAS Among Mothers Ages 15-20	4.6
Youth Alcohol Treatment	17.5
Total	316.5

The Alaska Departments of Education and Early Development and Health and Social Services conduct a biannual statewide student survey on health behavior. Alaska uses the Alaska Youth Risk Behavior Survey (YRBS), based upon the U.S. Centers for Disease Control and Prevention's (CDC) epidemiological surveillance system^{xi}. This survey was established to monitor the prevalence of behaviors that not only influence adolescent health, but also put youth at risk for the most significant health and social problems. Participating school districts receive a full report of their local data, which they use as the centerpiece of their own local needs assessments, adding other data such as the Search Institute's Developmental Assets^{xii} survey and local law enforcement data. In 2003, 1,349 surveys were completed from 38 high schools, a response rate of 62%. The results of that survey demonstrated that underage drinking is clearly widespread in Alaska. Approximately 33,000 underage youth in Alaska drink each year. In 2003, according to self-reports by Alaskan students in grades 9-12:

- 75% had at least one drink of alcohol on one or more days during their life.
- 23% had their first drink of alcohol, other than a few sips, before age 13.
- 39% had at least one drink of alcohol on one or more occasion in the past 30 days.
- 27% had five or more drinks of alcohol in a row (i.e. binge drinking) in the past 30 days.
- 5% had at least one drink of alcohol on school property on one or more of the past 30 days.

In 2000, the Alaska Department of Health and Social Services, Division of Juvenile Justice sponsored an assessment of underage drinking in Alaska. Investigators examined statewide efforts and data and conducted more detailed inquiries by interviewing 203 key informants from 17 rural and urban sample communities. The consequences of underage drinking in Alaska are reflected in an increase in the number of alcohol-related accidents among youth requiring hospitalization of 66.3% between 1991 and 1998. Over this period, Alaska averaged 30 suicide attempts annually among youth where alcohol was a factor^{xiii}.

According to the Alaska Highway Safety Office 2006 Annual Report, a third of alcohol impaired drivers and 47% of speeding drivers were under the age of 26. Furthermore, 1,516 traffic crashes and six traffic fatalities involved drivers aged 14-20^{xiv}. According to the 2003 YRBS results, 11.3% of Alaska youth self-reported driving and drinking.

Despite the toll that underage drinking brings to bear on all citizens of Alaska — be it physical, mental, social, or economic — social norms remain static leaving the overall impression that underage drinking in Alaska “isn't a problem”. Alaska has made great strides in the prevention of underage tobacco use and the parallels between the two drugs, alcohol and tobacco, are remarkable. That being said, enforcement efforts within the Departments of Health and Social Services and Public Safety have been coordinated for both tobacco and alcohol. As a result, an interesting pattern has emerged, which clearly demonstrates exactly where social attitudes lie. For example, in 2006 13% of all retailers investigated sold tobacco to underage buyers whereas 30% of all retailers investigated sold alcohol to underage buyers.

The Alaska-specific information and recommendations contained herein provide a blueprint for a range of science-based state and community actions that are necessary in order to successfully reduce underage drinking in Alaska. These recommendations are based on the IOM/NAS Report: *Reducing Underage Drinking: A Collective Responsibility*. The Committee prioritized recommendations for Year One, which are as follows:

- 1) S3-1: Encourage the Alaska State Legislature to conduct an interim review of state statutes and regulations using this report as a blueprint to reduce youth access to alcohol.
- 2) S6-1: Expand assessment, treatment and prevention services to all youth but not limited to those entering into courts for alcohol-related offenses.
- 3) S5-5: Provide ongoing training and education for all criminal justice stakeholders and policymakers to include evidence-based best practices and strategies in underage alcohol use reduction and prevention.
- 4) S3-8: Assess feasibility of making penalties for sales of alcohol to a minor consistent with penalties for sales of tobacco to a minor. If feasible, then create and encourage the application of consistent penalties for selling alcohol to a minor.
- 5) S3-3: Strengthen Alaska's compliance check program in retail outlets, restaurants, and bars, using media campaigns and license revocations to increase compliance. The program should include regular notification and education of retailers and the public concerning the program and publicizing the outcome. (DOT & PF Alaska Strategic Highway Safety Plan, AL.7, Page C-15).
- 6) S1-4: A website should be built and maintained, and should provide continuous updates of national, state and community developments. The website should also focus on providing model policies, ordinances and prevention strategies. The website should include information about over-the-counter (OTC) products containing alcohol and include measures of youth exposure to alcohol advertising through a "Talk Back" format to assist in research and evaluation.

Holding youth solely responsible for underage drinking is unreasonable. As the national report concluded, "Youth drink within the context of a society in which alcohol use is normative behavior and images about alcohol are pervasive." Efforts to reduce and prevent underage drinking, therefore, need to focus on a variety of environmental strategies which include adults, youth, and engage the society at large. Alaska's plan employs a variety of strategies, including, but not limited to: public awareness; alcohol advertising; education; limiting access; collaboration; governmental assistance; and research and evaluation.

The problem of underage drinking in Alaska is significant but not insurmountable. It will, however, require determination and commitment to a long-term effort on the part of our citizens, state and community leaders to get involved and to take the action necessary to make a difference.

Strategy Component: Media Campaign
RECOMMENDATIONS

IOM/NAS	State	Local
<p>N6-1: The federal government should fund and actively support the development of a national media effort as a major component of an adult-oriented campaign to reduce underage drinking.</p>	<p>S1-1: The state should allocate sufficient resources to mount an aggressive messaging campaign which should coincide with and enhance a national campaign.</p>	<p>L1-1: Encourage local messaging efforts to coordinate, coincide with, support and enhance the statewide media campaign. Community stakeholders, including youth, should work to close gaps and remedy deficiencies in the statewide dissemination strategy.</p>
<p>N10-1: Intensive research and development of a youth-focused media campaign relating to underage drinking should be initiated at the national level.</p>	<p>S1-2: Develop/strengthen youth leadership in the creation of a messaging campaign.</p>	<p>L1-2: Endorse local efforts to focus on localizing the messaging and facilitating community action to include writing letters to the editor; scheduling press conferences; hosting community forums such as town hall meetings; and placing radio or television, poster, and public service announcements throughout the community.</p>
<p>N7-1: All segments of the alcohol industry that profit from underage drinking, inadvertently or otherwise, should join with other private and public partners to establish and fund an independent nonprofit foundation with the sole mission of reducing and preventing underage drinking.</p>	<p>S1-3: The state should coordinate, support and assist communities in localizing and enhancing the messaging campaign.</p>	<p>L1-3: Local coalitions should serve as the information source for members of the media for contact information on local underage drinking efforts and to provide feedback to the state campaign.</p>
	<p>S1-4: Messaging efforts should focus on supporting the implementation of best-practice environmental strategies at the community and state levels.</p>	
	<p>S1-5: A website should be built and maintained; provide continuous updates of national, state and community developments; focus on providing model policies, ordinances and prevention strategies; include information about over-the-counter (OTC) products containing alcohol and include measures of youth exposure to alcohol advertising through a “Talk Back” format to assist in research and evaluation.</p>	
	<p>S1-6: All segments of the alcohol industry that profit from underage drinking should join with other private and public partners to establish and support an independent foundation with the sole mission of reducing and preventing underage drinking in Alaska. The foundation shall ensure that local communities have funding opportunities to implement local recommendations.</p>	

Rationale

Alaska's most recent statewide effort to raise awareness about the criminal penalties to adults providing alcohol to youth occurred in 2002, with the "You Buy, You Lose" Campaign. The current level of alcohol consumption by Alaska youth is alarming as evidenced by the fact that in 2005 underage drinkers consumed 19.2% of all alcohol sold in the state^{xv}. Equally alarming is the fact that Alaska is among the top states in the nation in several categories involving alcohol and youth: early consumption (by age 13), binge drinking, and driving after drinking^{xvi}.

Underage drinking cost the citizens of Alaska \$317 million in 2005. Costs include medical care, work loss, and pain and suffering^{xvii}. This translates to a cost of \$3,944 per year for each youth in the State. Alaska ranks 2nd highest among the 50 states for the cost per youth for underage drinking.

Youth violence and traffic crashes attributable to alcohol use by underage youth in Alaska represent the largest costs for the state. Furthermore, a host of other problems contribute significantly to the overall cost. For example, among teen mothers, fetal alcohol syndrome (FAS) costs Alaska \$4.6 million. Young people who begin drinking before age 15 are four times more likely to develop alcohol dependence and are two and a half times more likely to become abusers of alcohol than those who begin drinking at age 21^{xviii}. The average age of a child's first drink is now 12, and nearly 20 percent of 12 to 20 year-olds are considered binge drinkers. In 2003, 366 youth 12-20 years old were admitted for alcohol treatment in Alaska, accounting for 11% of all treatment admissions for alcohol abuse in the State^{xix}.

There exists a perception that adolescents can easily recover from drinking because their bodies are more resilient; however, the opposite is true. According to the American Medical Association, alcohol can seriously damage long and short term growth processes of the brain during adolescence. Frontal lobe development and the refinement of pathways and connections continue until the age of 16, and a high rate of energy is used as the brain matures until the age of 23. Damage from alcohol prior to age 23 can be long-term and irreversible. Furthermore, even moderate drinking impairs learning and memory in youth^{xx}.

All Alaskans must be educated about the dangers to our youth when they consume alcohol and the subsequent impact their consumption has on everyone. Alcohol has been implicated in nearly one-third of youth alcohol traffic crashes and is also associated with youth violence, suicide, educational failure, teen pregnancy, and other problem behaviors. Communities, commercial establishments, and adults must learn what is and isn't appropriate in terms of purchasing or providing alcohol to underage persons and what the legal (both civil and criminal) penalties are.

Strategy Component: Alcohol Advertising
RECOMMENDATIONS

IOM/NAS	State	Local
<p>N7-2: Alcohol companies, advertising companies and commercial media should refrain from marketing practices (including product design, advertising and promotional techniques) that have substantial underage appeal and should take reasonable precautions in the time, place and manner of placement and promotion to reduce youthful exposure to other alcohol advertising and marketing activities.</p>	<p>S2-1: The state should establish guidelines for alcohol sponsorship and alcohol advertising for state-sponsored or state-funded events, especially in venues that include a large number of young people.</p> <p>S2-2: The state should support and encourage local communities to review policies regarding alcohol sponsorship at events that include a large number of young people.</p>	<p>L2-1: Local communities should strengthen their advertising codes to preclude placement of alcohol messages and alcohol industry sponsorship in venues where a significant portion of the audience is expected to be young people.</p>
<p>N7-3: The alcohol industry trade associations, as well as individual companies, should strengthen their advertising codes to preclude placement of commercial messages in venues where a significant portion of the expected audience is underage, to prohibit the use of commercial messages that have substantial underage appeal, and to establish independent external review boards to investigate complaints and enforce the codes.</p>	<p>S2-3: The state should establish and/or strengthen its advertising statutes and/or regulations to preclude placement of alcohol messages in areas where large numbers of young people would be exposed; i.e., schools, youth organization sponsorship or hosting of alcohol events, websites, etc.</p>	<p>L2-2: Local communities should establish a process to investigate complaints and enforce the codes. The results of these complaints should be made available to the public on a regular basis.</p>
<p>N7-4: Congress should appropriate the necessary funding for the U.S. Department of Health and Human Services to monitor underage exposure to alcohol advertising on a continuing basis and to report periodically to Congress and to the public. The report should include information on the underage percentage of the exposed audience and estimated number of underage viewers of print and broadcasting alcohol advertising in national markets and for television and radio broadcasting in a selection of large or regional markets</p>	<p>S2-4: The alcohol trade associations within the state, as well as individual companies, should establish and/or strengthen their advertising codes to preclude placement of commercial messages in venues where a significant portion of the expected audience is underage, to prohibit the use of commercial messages that have substantial underage appeal, and to establish independent external review boards to investigate complaints and enforce the codes and make this process transparent to the public.</p>	

Rationale

To change the perception among youth that alcohol is an acceptable choice, alcohol advertising should be banned at venues hosting youth events predominantly attended by youth. This includes college sporting events.

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Strategy Component: Limiting Access
RECOMMENDATIONS

IOM/NAS	State	Local
<p>N9-1: The minimum drinking age laws of each state should prohibit: Purchase or attempted purchase, possession and consumption of alcoholic beverages by persons under 21; Possession of and use of falsified or fraudulent identification to purchase or attempt to purchase alcoholic beverages; Provision of any alcohol to minors by adults, except to their own children and in their own residences; and Underage drinking in private clubs and establishments.</p>	<p>S3-1: Encourage the Alaska State Legislature to conduct an interim review of state statutes and regulations using this report and the members of the Committee as resources to reduce youth access to alcohol.</p>	<p>L3-1: Communities, including youth, should review existing resolutions and city ordinances related to underage drinking and strengthen them accordingly, including environmental focus on zoning, outlet density and related issues.</p>
<p>N9-2: States should strengthen their compliance check programs in retail outlets using media campaigns and license revocation to increase deterrence. Communities and states should undertake regular and comprehensive compliance check programs including notification of retailers concerning the program and follow-up communication to them about the outcome (sale/no sale) for their outlet. Enforcement agencies should issue citations for violations of underage sales laws with substantial fines and temporary suspension of license for first offenses and increasingly stronger penalties thereafter, leading to permanent revocation of license after three offenses. Communities and states should implement media campaigns in conjunction with compliance check programs detailing the program, its purpose and its outcomes.</p>	<p>S3-2: Encourage the Alaska State Legislature to create a committee to review state by state comparison of alcohol laws as prepared by resources such as Century Council (www.centurycouncil.org), Alcohol Policy Information System (http://alcoholpolicy.niaaa.nih.gov/), or Mothers Against Drunk Driving (http://www.madd.org/).</p>	<p>L3-2: Local police, working with community leaders, should adopt and announce policies for detecting and terminating underage drinking parties, including: Routinely responding to complaints from the public about noisy teenage parties and entering the premises when there is probable cause to suspect underage drinking is taking place; routinely checking, as a part of regular weekend patrols, open areas where teenage drinking parties are known to occur; and routinely citing underage drinkers and, if possible, the person who supplied the alcohol when underage drinking is observed at parties.</p>
	<p>S3-3: Strengthen Alaska’s compliance check program in retail outlets, restaurants, and bars, using media campaigns and license revocations to increase compliance. The program should include regular notification and education of retailers and the public concerning the program and publicizing the outcome. (DOT & PF Alaska Strategic Highway Safety Plan, AL. 7, page C-15).</p>	
	<p>S3-4: In keeping with recommendations from the Alaska Rural Justice and Law Enforcement Commission, the state should strengthen enforcement of importation of alcohol (bootlegging and manufacture) in communities exercising local option laws and clarify language in sections of Title 4 that pertain to importation and manufacture of alcohol to “dry” villages.</p>	<p>L3-3: Damp communities should consider establishing local distribution sites for alcohol to assure compliance with alcohol laws, specifically aimed at reducing bootlegging, compliance with probation conditions, and ordering over the legal allowable amount of alcohol per person.</p>

N9-3: The federal government should require states to achieve designated rates of retailer compliance with youth access prohibitions as a condition of receiving relevant block grant funding, similar to the Synar Amendment requirements for youth tobacco sales.

N9-4: States should require all sellers and servers of alcohol to complete state-approved training as a condition of employment.

N9-5: States should enact or strengthen dram shop liability statutes to authorize negligence-based civil actions against commercial providers of alcohol for serving or selling alcohol to a minor who subsequently causes injury to others, while allowing a defense for sellers who have demonstrated compliance with responsible business practices. States should include in their dram shop statutes key portions of the Model Alcoholic Beverage Retail Licensee Liability Act of 1985, including the responsible business practices defense.

N9-6: States that allow internet sales and home delivery of alcohol should regulate these activities to reduce the likelihood of sales to underage purchasers: Require all packages for delivery containing alcohol to be clearly labeled as such; Require persons who deliver alcohol to record the recipient's age identification information from a valid government-issued document (such as a driver's license or ID card); and Require recipients of home delivery of alcohol to sign a statement verifying receipt of alcohol and attesting that he or she is of legal age to purchase alcohol.

S3-5: Alaska's education,

prevention, and enforcement strategies should be reviewed and clarified.

S3-6: Create legislation for a system requiring the registration of beer keg sales.

S3-7: Create legislation and/or regulations for APSIN codes specific to underage drinking law violations in order to create a system for tracking underage alcohol offenses.

S3-8: Assess feasibility of making penalties for sales of alcohol to a minor consistent with penalties for sales of tobacco to a minor. If feasible, then create and encourage the application of penalties for selling alcohol to a minor consistent with penalties for selling tobacco to a minor.

S3-9: Require that mandatory evidence-based alcohol server education for employees of licensed alcohol establishments be paid for by employers and/or licensees and that employees are compensated for training time. Provide training to retailers at the licensee's expense on Title 4 that includes information on retailer liability for sales to underage persons and enforcement of license suspension/revocation laws. Title 4 violators would have to retake any training at the employer's expense.

S3-10: Prohibit the production, sale, distribution, possession, and use of false identification for attempted alcohol purchase.

S3-11: Educate the public and all Criminal Justice system stakeholders on the false identification laws.

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N9-7: States and localities should implement enforcement programs to deter adults from purchasing alcohol for minors. States and communities should: Routinely undertake shoulder tap or other prevention programs targeting adults who purchase alcohol for minors, using warnings rather than citations for the first offense; Enact and enforce laws to hold retailers responsible, as a condition of licensing, for allowing minors to loiter and solicit adults to purchase alcohol for them on outlet property; and use nuisance and loitering ordinances as a means of discouraging youth from congregating outside of alcohol outlets in order to solicit adults to purchase alcohol.

N9-8: States and communities should establish and implement a system requiring registration of beer kegs that records information on the identity of purchasers.

N9-9: States should facilitate enforcement of zero tolerance laws in order to increase their deterrent effect. States should: Modify existing laws to allow passive breath testing, streamlined administrative procedures and administrative penalties; and implement media campaigns to increase young people's awareness of reduced BAC limits and of enforcement efforts.

N9-10: States should enact and enforce graduated driver licensing laws.

N9-11: States and localities should routinely implement sobriety checkpoints.

S3-12: Implement administrative penalties (e.g., immediate confiscation of a driver's license and issuance of a citation resulting in a substantial fine) for attempted use of a false identification by minors for alcohol purchases.

S3-13: Continue to monitor and control the number of alcohol outlets.

S3-14: Establish a system to control and monitor the density of alcohol outlets.

S3-15: Establish legislation that would regulate internet sales and home delivery of alcohol to reduce the likelihood of sales to underage purchasers: Require all packages for delivery containing alcohol to be clearly labeled as such; Require persons who deliver alcohol to record the recipient's age identification information from a valid government-issued document (such as a driver's license or ID card); and Require recipients of home delivery of alcohol to sign a statement verifying receipt of alcohol and attesting that he or she is of legal age to purchase alcohol.

S3-16: Increase variety of enforcement operations to include shoulder tap or other prevention programs targeting adults who purchase alcohol for minors, using warnings rather than citations for the first offense; Enact and enforce laws to hold retailers responsible, as a condition of licensing, for allowing minors to loiter and solicit adults to purchase alcohol for them on outlet property; and use nuisance and loitering ordinances as a means of discouraging youth from congregating outside of alcohol outlets in order to solicit adults to purchase alcohol.

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N9-12: Local police, working with community leaders, should adopt and announce policies for detecting and terminating underage drinking parties, including: Routinely responding to complaints from the public about noisy teenage parties and entering the premises when there is probable cause to suspect underage drinking is taking place; routinely checking, as a part of regular weekend patrols, open areas where teenage drinking parties are known to occur; and routinely citing underage drinkers and, if possible, the person who supplied the alcohol when underage drinking is observed at parties.

N9-13: States should strengthen efforts to prevent and detect use of false identification by minors to make alcohol purchases. States should: prohibit the production, sale, distribution, possession, and use of false identification for attempted alcohol purchases; issue driver's licenses and identification cards that can be electronically scanned; allow retailers to confiscate apparently false identification for law enforcement inspection; and implement administrative penalties (e.g., immediate confiscation of a driver's license and issuance of a citation resulting in a substantial fine) for attempted use of false identification by minors for alcohol purchases.

N9-14: States should establish administrative procedures and non-criminal penalties, such as fines or community service, for alcohol infractions by minors.

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Rationale

Alaska should continue its work to prevent youth access to alcohol. Alaska has a number of laws related to youth access to alcohol. However, there have been a number of questions and issues raised with respect to court jurisdiction, tracking of minor consuming offenses, increasing blood alcohol content in youth who repeatedly appear in court, etc. With respect to tracking of minor consuming offenses, APSIN, is the tool peace officers use in issuing citations and courts use in entering convictions. A review of practices throughout the state revealed that whereas there is a code in APSIN for “Alcohol Offenses” there is nothing specific to “underage alcohol offenses”, and nothing tied to specific statutory codes. Therefore, when an individual is cited for underage drinking or possession, an officer has no indication as to the number of times a youth has been cited previously and it gets even more convoluted if the youth is from another community within Alaska. District Court clerks, have an unreliable system, of hand-tallying, the number of times a minor comes before the court on a particular charge. Again, that is not entered into a statewide database, as would be the case with APSIN, because there is no specific code for underage alcohol offenses.

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Strategy Component: Youth Oriented Interventions

RECOMMENDATIONS

IOM/NAS	State	Local
<p>N10-1: Intensive research and development for a youth-focused national media campaign relating to underage drinking should be initiated. If this work yields promising results, the inclusion of a youth-focused campaign in the strategy should be considered.</p>	<p>S4-1: Promote research-based positive school climate frameworks that develop school cultures which include alcohol prevention and intervention strategies.</p>	<p>L4-1: Support the development of parent peer groups that would offer the following resources: presentations to parents (and to children/youth when appropriate) by parents of teens killed or injured in alcohol-related crashes; information on civil and criminal liability when supplying alcohol to youth; tools to use when talking to children about the effects of alcohol; education on the adverse impact of alcohol on a child’s developing brain; brochures discussing the consequences of parent-hosted house parties; education on risk and protective factors associated with alcohol use; and parenting skills directed at youth alcohol use.</p>
<p>N10-2: The U.S Department of Health and Human Services and the U.S. Department of Education should fund only evidence-based education interventions, with priority given to both those that incorporate elements known to be effective and those that are part of comprehensive community programs.</p>	<p>S4-2: Identify prevention programs that show proven success in reducing alcohol use and encourage replication of the most appropriate prevention programs in Alaska.</p>	
<p>N10-3: Residential colleges and universities should adopt comprehensive prevention approaches including evidence-based screening, brief intervention strategies, consistent policy enforcement, and environmental changes that limit underage access to alcohol. They should use universal education interventions as well as selective and indicated approaches with relevant populations.</p>	<p>S4-3: Encourage districts to initiate and to implement comprehensive health education programs as referenced in AS 14.30.360 which include alcohol and drug abuse education.</p>	
<p>N10-4: The National Institute on Alcohol Abuse and Alcoholism and the Substance Abuse and Mental Health Services Administration should continue to fund evaluations of college-based interventions with particular emphasis on targeting of interventions to specific college characteristics and should maintain a list of evidence-based programs.</p>	<p>S4-4: Alaska schools will be encouraged to conduct district-wide/ statewide surveys and evaluations (e.g. YRBS) to gather base-line data for alcohol prevention planning and evaluation for alcohol prevention efforts.</p>	
	<p>S4-5: Conduct annual statewide assessments of alcohol-related suspensions and expulsions in Alaska 's public schools and report results to public.</p>	
	<p>S4-6: Encourage colleges and universities to mobilize campus/ community coalitions to change the environment that supports the high risk use of alcohol. (DOT & PF Alaska Strategic Highway Safety Plan, AL.1, page C-2).</p>	

N10-5: The U.S. Department of Health and Human Services and states should expand the availability of effective clinical services for treating alcohol abuse among underage populations and for following up on treatment. The U.S. Department of Education, the U.S. Department of Health and Human Services and the U.S. Department of Justice should establish policies that facilitate diagnosing and referring underage alcohol abusers, and those who are alcohol dependent, for clinical treatment.

S4-7: Encourage colleges and universities to focus prevention education on students graduating high school and entering college, student athletes, and Greek organizations to discourage high risk use of alcohol.

S4-8: Encourage colleges and universities to provide education to members of the campus/community including parents, alumni, faculty and staff on the signs and symptoms of alcohol abuse; appropriate counseling and self-help referral information; underage drinking laws and policies; and non-judgmental ways to talk to college students about alcohol use and abuse.

S4-9: Encourage colleges and universities to adopt consistent policy enforcement and environmental changes that limit underage access to alcohol.

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Rationale

In 2005, a University of Michigan survey entitled *Monitoring the Future*, confirmed heavy drinking by the underage population (pre-college) throughout the nation. Data from that survey demonstrated nearly half the students were regular drinkers and that 75% of students had consumed alcohol more than experimentally by the end of high school. Early onset drinking is a major indicator of alcohol addiction in later life and is measured in both the YRBS and *Monitoring the Future* surveys. The sample populations used for the surveys questioned enrolled students only, at their schools. These samples did not consider students who had dropped out of school legally after the age of 16 (in Alaska) or who were expelled before that age. Alternative-schooled students were not made part of the surveys. The surveys may, therefore, have missed the highest risk subpopulation among the youth in the communities they measured. The validity of these surveys are further put into question by the Juneau survey which indicated many children dropped out of high school due to substance abuse^{xxi}.

Furthermore, recent research (Reifman & Watson, 2003) has found a great deal of continuity between high school drinking patterns and college drinking patterns of students. Therefore, interventions at the state and local level should include the university system as well as all of the school districts. If the institutions of higher education in the state only focus on the end result of the problem (i.e., when the student gets to college) we are missing a large piece of the intervention puzzle. Institutions of higher education should collaborate with state and local entities in the application of new and unique programming that would enhance already proven strategies to reduce this high-risk behavior.

Strategy Component: Community Interventions
RECOMMENDATIONS

IOM/NAS	State	Local
<p>N11-1: Community leaders should assess the underage drinking problem in their communities and consider effective approaches – such as community organizing, coalition building and the strategic use of the mass media – to reduce drinking among underage youth.</p> <p>N11-2: Public and private funders should support community mobilization to reduce underage drinking. Federal funding for reducing and preventing underage drinking should be made available under a national program dedicated to community-level approaches to reduce underage drinking, similar to the Drug Free Communities Act which supports communities in addressing substance abuse with targeted prevention strategies.</p>	<p>S5-1: Step up meaningful collaboration among state and tribal agencies and other stakeholders to engage shared responsibility in addressing youth access to alcohol in the state of Alaska.</p> <p>S5-2: Ensure statewide data collection of underage use and abuse of alcohol and other drugs through the Alaska Epidemiological Outcomes Workgroup, including a statewide survey and MIS on alcohol attitudes.</p> <p>S5-3: The Governor’s Office shall receive recommendations from the Alaska Interagency Coordinating Committee on the Prevention of Underage Drinking and provide recommendations for policy development regarding youth alcohol issues.</p> <p>S5-4: Public and private funding resources should be made available to support community mobilization under every applicable strategy component to reduce underage drinking.</p> <p>S5-5: Provide ongoing training and education for all stakeholders and policymakers to include evidence-based best practices and strategies in underage alcohol use reduction and prevention.</p>	<p>L5-1: Provide literature for landlords (especially landlords in college communities and communities with transient populations) about liability and ramifications of the illegal use of alcohol on their property.</p> <p>L5-2: Provide the faith community with underage drinking education information.</p> <p>L5-3: Partner with private driving schools and driver education classes to add and/or strengthen the alcohol education portion of the curriculum.</p> <p>L5-4: Partner with local colleges and the university to develop strategies to change the drinking culture both on and off campus that contributes to underage drinking and high-risk drinking.</p> <p>L5-5: Assess the underage drinking problem in communities and consider effective approaches, such as community organizing, parent/ adult education, coalition building and the strategic use of the media, to reduce the illegal use of alcohol by youth.</p> <p>L5-6: Encourage representation and participation of all community stakeholders including health care providers, local businesses, parents, schools, colleges and the university and law enforcement in local coalitions, to achieve a more holistic approach to reducing underage drinking.</p>

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L5-7: Review existing resolutions and city ordinances related to underage drinking and strengthen them accordingly, including environmental focus on zoning, outlet density, and related issues.

L5-8: Encourage collaboration among families, schools, the courts, and treatment providers.

L5-9: Increase the use and role of School Resource Officers.

Rationale

At the state and local levels, community mobilization can be a powerful vehicle to implement and support interventions. People working together have a greater ability to educate many Alaskans about the dangers of alcohol use and abuse by Alaska's youth.

Coalitions provide a wonderful opportunity for youth voice in an issue that directly impacts them and affords a forum for multiple sectors of the community to come together to provide mentoring, citizenship development and peer-to-peer education while lending expertise in government, business, and medicine. At a grass-roots level, this structure provides a myriad of methods and strategies to address the issue of underage alcohol use.

Communities united can speak with one loud voice to advocate to policymakers to address and solve the consequences of underage drinking by incorporating information about social and economic costs. Through the work of the coalitions, communities will also be able to aggressively impact and alter social norms that have remained static for so long.

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Strategy Component: Governmental Assistance and Coordination

RECOMMENDATIONS

IOM/NAS	State	Local
<p>N12-1: A federal interagency coordinating committee on prevention of underage drinking should be established, chaired by the secretary of the U.S. Department of Health and Human Services.</p>	<p>S6-1: Expand affordable assessment, treatment and prevention services to all youth and families including those children and families who are not involved in the court or social services systems.</p>	<p>L6-1: Adopt approaches that involve the entire family as well as youth in the treatment process, from assessment to aftercare, when a young person enters the system because of alcohol addiction.</p>
<p>N12-2: A National Training and Research Center on Underage Drinking should be established in the U.S. Department of Health and Human Services. This body would evaluate support and would monitor progress in implementing national goals.</p>	<p>S6-2: All segments of the alcohol industry should join with other private and public partners to establish and support an independent, non-profit foundation with the sole mission of preventing and reducing underage drinking. The foundation should ensure that local communities have funding opportunities to implement local recommendations.</p>	<p>Encourage the use of telemedicine, telebehavioral health, and access to assessment and treatment for substance abuse.</p>
<p>N12-3: The secretary of the U.S. Department of Health and Human Services should issue an annual report on underage drinking to Congress summarizing all federal agency activities, progress in reducing underage drinking, and key surveillance data.</p>	<p>S6-3: Encourage and support legislative hearings to address the issue of underage drinking as outlined in this report.</p>	<p>L6-2: Adopt approaches that involve the community in which the youth lives including: schools, vocational agencies, local mental health professionals, and supportive peer network.</p>
<p>N12-4: Each state should designate a lead agency to coordinate and spearhead its activities and programs to reduce and prevent underage drinking.</p>	<p>S6-4: Support legislation to fund the development of a statewide media effort.</p>	
<p>N12-5: The annual report of the secretary of the U.S. Department of Health and Human Services on underage drinking should include key indicators of underage drinking.</p>	<p>S6-5: Designate an agency to monitor underage exposure to alcohol advertising to determine its impact on youth for the purposes of guiding policy decisions.</p>	
<p>N12-6: The Monitoring the Future Survey and the National Survey on Drug Use and Health should be revised to elicit more precise information on the quantity of alcohol consumed and to ascertain brand preferences of underage drinkers.</p>	<p>S6-6: Encourage and assist communities in the development and expansion of juvenile diversion programs with an emphasis on alcohol.</p>	

Rationale

In looking at the cost of underage drinking to Alaskans, the total is approximately \$317 million. Of that amount, \$17.5 million is spent on youth treatment and the rest is spent on problems such as youth violence, FASD among teen mothers, traffic crashes, etc. Translated loosely, 6% is spent toward treating the problem of underage drinking. By providing education and training to stakeholders on evidence-based policies, practices, strategies, programming, and resources available for prevention, intervention, and treatment, many more young people would have access to services.

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Strategy Component: Alcohol Excise Taxes

RECOMMENDATIONS

IOM/NAS

N12-7: Congress and state legislatures should raise excise taxes to reduce underage consumption and to raise additional revenues for this purpose. Top priority should be given to raising beer taxes. Excise tax rates for all alcoholic beverages should be indexed to the consumer price index to keep pace with inflation without the necessity of further legislation.

State

S7-1: Communities should be given the ability to levy taxes on all alcohol products at the local level as a revenue enhancement tool for funding best-practice strategies to reduce underage drinking.

S7-2: The state should review and raise the license fees.

S7-3: Allocate alcohol tax revenue to enforcement, prevention, treatment, and evaluation of underage alcohol use.

Local

L7-1: Increase community readiness to accept taxing alcohol products, if given the ability by the state. Allocate funds to youth strategies to prevent, intervene, and treat underage alcohol use and abuse.

L7-2: Revenue from alcohol taxes and fines collected should be allocated to local governments for funding best-practice strategies to reduce underage drinking.

Rationale

Alaska raised its alcohol tax and has the highest alcohol tax in the nation. That being said, the state does not allow municipalities to levy taxes on alcohol at this time. Furthermore, the commercial alcohol license fee for obtaining an alcohol license has not been raised for over 25 years.

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Strategy Component: Research and Evaluation

RECOMMENDATIONS

IOM/NAS

N12-8: All interventions, including media messages and education programs, whether funded by public or private sources, should be rigorously evaluated. A portion of all federal grant funds for alcohol-related programs should be designated for evaluation.

N12-9: States and the federal government – particularly the U.S. Department of Health and Human Services and the U.S. Department of Education – should fund the development and evaluation of programs to cover all underage populations.

State

S8-1: All publicly funded prevention and intervention, including media messages and education should be evaluated (qualitative and quantitative) for effectiveness. A portion of all state grant funds for alcohol-related programs should be designated for evaluation. All evaluation findings should be posted publicly.

Local

L8-1: All publicly funded prevention and intervention, including media messages and education should be evaluated (qualitative and quantitative). A portion of all state grant funds for alcohol-related programs should be designated for evaluation.

L8-2: Evaluation finds should be posted publicly.

Rationale

Rigorous research and evaluation are needed to assess the effectiveness of specific interventions and to ensure that future refinements of the strategy are grounded in evidence-based approaches. In addition, continued research and evaluation is necessary to develop new approaches aimed at reaching all segments of the underage population.

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Committee Members

MaShelle Atherton Hess, Chair
Department of Health and Social Services
Division of Behavioral Health
Prevention and Early Intervention Services

Todd Brocious
Department of Education and Early Development
Safe and Drug Free Schools

Candace Brower
Department of Health and Social Services
Division of Juvenile Justice
Enforcing Underage Drinking Laws

Cindy Cashen
Department of Transportation
Alaska Highway Safety Office

Judge Leonard Devaney
Alaska Court System
4th Judicial District Bethel

Doug Griffin
Department of Public Safety
Alcoholic Beverage Control Board

Brenda Horvath
Alaska Native Justice Center
Program Coordinator

Ronald Taylor
Department of Health and Social Services
Division of Behavioral Health
Alcohol Safety Action Program

Biography of Committee Members

MaShelle Atherton Hess is a Project Coordinator with Prevention and Early Intervention Services within the Department of Health and Social Services, Behavioral Health. Her duties include oversight of a portion of the Substance Abuse Prevention and Treatment Block Grant, general fund dollars toward prevention grants for communities, training and technical assistance in the development and implementation of the Strategic Prevention Framework, and service as the Legislative Liaison for the division. She has been with the division since August of 2005. She joined Behavioral Health after serving for three years as the Associate Coordinator for the Enforcing Underage Drinking Laws and Juvenile Accountability Incentive Block Grant, managed the Alaska Youth Court and Community Panel Program, monitored compliance under the Formula Grant and served as the Juvenile Deputy Compact Administrator during her tenure with Alaska Juvenile Justice. Her prior experience includes over fifteen years in the justice field, both adult and juvenile, in Alaska and Washington. She also worked in an Alaska juvenile detention center; worked as part of a team to develop and implement a juvenile treatment curriculum for Alaska Juvenile Justice; worked as part of a team to develop and implement a pre-treatment curriculum for felony adult probationers convicted of drunk driving in Alaska while working as an Adult Probation and Parole Officer with the Alaska Department of Corrections; and developed a gang-intervention program in Seattle, Washington. MaShelle has lived in Alaska since 1984 and has lived in Wrangell and Juneau. She and her husband Dan live in Juneau with their son Geoffrey. She has also served on the Board of Directors for the Juneau Youth Court and the United Youth Courts of Alaska.

Todd Brocious has been an Education Specialist with the Department of Education & Early Development for the past 7 years where his primary duties have been managing the Fetal Alcohol Spectrum Disorders initiatives and stewarding the No Child Left Behind Title IV Safe and Drug-Free Schools Program. In addition to his membership on the Alaska Interagency Coordinating Committee on the Prevention of Underage Drinking, Todd is also currently active on the U.S. Department of Education Interagency Coordinating Committee on Fetal Alcohol Syndrome, The Council on Domestic Violence & Sexual Assault Legislative Task Force, the Alaska Epidemiological Outcomes Workgroup, the Alaska Public Health and Social Service Block Grant Advisory Committee, and the Alaska School Health and Safety Advisory Committee. Prior to his work at the Department of Education, Todd spent 15 years concentrating on supporting at-risk youth and families in a broad array of settings including counseling emotionally disturbed children in residential treatment at Intermountain Children's Home in Montana, managing the Alaska Youth Initiative in Juneau which provided wrap-around services to families with children at risk for requiring out-of-state residential care, and working as a Social Worker III for the Office of Children's Services in Juneau, conducting both investigations of child abuse and neglect and supporting families with ongoing needs as part of the permanency team. Todd currently resides in Juneau with his wife Heidi and their daughter Molly.

Candace Brower is an Associate Coordinator in the Department of Health and Social Services, Division of Juvenile Justice. Her duties include oversight of three federal grants: a Congressional Earmark to support youth courts statewide; the Juvenile Accountability Grant and the Enforcing Underage Drinking Laws. She has extensive experience working the criminal justice field through previous employment at McLaughlin Youth Center and the Johnson Youth Center. She has most recently spent the bulk of her career in Adult Corrections as a probation officer, parole board administrator, and Legislative Liaison for the Department of Corrections. She is married to Dave Brower and they have two daughters, 24 and 14. She also serves on the Board of Directors for the Tongass Alaska Girl Scout Council.

Cindy Cashen is the Administrator for the Department of Transportation and Public Facilities, Alaska Highway Safety Office (AHSO) and is responsible for the federal funds which support transportation safety programs. “Over the Limit, Under Arrest”, and “Click It or Ticket” are only two of more than fifty impaired driving and seat belt enforcement projects supported by the AHSO. As one who lost a family member to drunk driving, she knows too well the importance of maximizing federal dollars with effective and sustainable programs that foster state and local ownership and respects community readiness levels. Between 2001 and 2005 Ms. Cashen was a founding member and Executive Director of the MADD—Juneau Chapter. During that time she worked with legislators to lower the legal BAC limit to .08, participated in the Alaska Therapeutic Court program, and advocated for the Graduated Drivers License program and a Primary Seat Belt Law. She was a volunteer on the Drunk Driving Panel and spoke before classrooms, public hearings, and drunk driving offenders. She is currently President of the Juneau Youth Court Board and a member of the Faith Based Community Initiative Board. She has been on the Douglas Island Pink and Chum Hatchery (DIPAC) board since its creation in 1976. Cindy was born and raised in Juneau and is married to Dan Cashen, and the mother of Sam (18), Anne Marie (17), and Donna (13).

Judge Leonard Devaney was appointed to the superior court in Bethel in February 2002 and currently serves on the CINA Court Improvement Committee and as a member of the Alaska Interagency Coordinating Committee on Prevention of Underage Drinking. Prior to being appointed to the bench, Judge Devaney practiced law in Nome Alaska. He spent time as a tribal lawyer, Assistant Attorney General/Assistant District Attorney as well as time in private practice. He is a 1990 graduate of the University of Montana School of Law.

Doug Griffin was appointed Director of the Alaska Alcoholic Beverage Control Board by Governor Tony Knowles and began service in the position January 8, 1996. Prior government experiences included eight years as City Manager for the City of Valdez where he addressed local government challenges in 1989 as a result of the grounding of the crude oil discharge From the *Exxon Valdez*. Mr. Griffin began his government career as a Local Government Specialist with the Alaska Department of Community and Regional Affairs in 1977 and ended

his service there as a Deputy Director in 1987. He graduated with a Bachelor of Science in Political Science and a Masters of Public Administration from American University in Washington, D.C. While attending college Doug worked on the staff of Alaska Senator Mike Gravel. Mr. Griffin has lived in Alaska since 1964 and has lived in Barrow, Wainwright, St. Michael, Sitka, Juneau, Valdez, and Anchorage. Doug and his wife Barbara presently live in Anchorage and have two grown children, Laura and Doug.

Brenda Horvath is the program coordinator for the Alaska Native Justice Center. Part of her responsibilities include working as part of a team in the restorative justice diversion program for Alaska Native youth and their families. Brenda comes to the Alaska Native Justice Center from the clinical community having worked for five years with Volunteers of America youth programs and another five years with Southcentral Foundation and Cook Inlet Tribal Council as a core partner and coordinator in youth diversion efforts. She arrived in Alaska in 1971 and has a son who is 24.

Ronald Taylor is currently the Program Manager for the Alaska Alcohol Safety Action Program (ASAP). For 11 years, he has been responsible for providing overall statewide direction and supervision of both the adult misdemeanor probation and juvenile monitoring components of the ASAP program. Recently, Mr. Taylor assumed supervision of the Tobacco Enforcement section, as well as the development and implementation of the therapeutic court community supervision unit. Prior to this, he worked for over 5 years as an Adult Probation Officer providing case management and monitoring to offenders on misdemeanor probation with substance abuse and/or other behavioral health requirements. Additionally, Mr. Taylor serves as a liaison between professionals in the criminal justice and social service agencies, as well as the current president of the National Organization of State Impaired Driving Programs (NOSIP).

Endnotes

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^{viii}Miller, TR, Levy, DT, Spicer, RS, & Taylor, DM. (2006) Societal costs of underage drinking *Journal of Studies on Alcohol*, 67(4) 519-528.

^{ix}Grant, B.F., & Dawson, D.A. (1997). Age at onset of alcohol use and its association with DSM-IV alcohol abuse and dependence: Results from the Nation Longitudinal Alcohol Epidemiologic Survey. *Journal of Substance Abuse* 9: 103-110.

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Draft
State of Alaska
Plan to Reduce & Prevent Underage Drinking

November 2007



Sarah Palin, Governor, State of Alaska

Karleen K. Jackson, Commissioner, Dept. of Health & Social Services
Melissa Stone, Director, Behavioral Health
<http://hss.state.ak.us/dbh/prevention/programs/substanceabuse/default.htm>
Steve McComb, Director, Juvenile Justice
<http://www.hss.state.ak.us/djj/grants/>

Dana Fabe, Chief Justice, Alaska Court System
Stephanie J. Cole, Director, Office of the Administrative Director
<http://www.state.ak.us/courts/>

Barbara Thompson, Commissioner, Dept. of Education and Early Development
Paul Prussing, Acting Director, Teaching and Learning Support
<http://www.eed.state.ak.us/tls/support/>

Walt Monegan, Commissioner, Dept. of Public Safety
Doug Griffin, Executive Director, Alcoholic Beverage Control Board
<http://www.dps.state.ak.us/ABC/>

Leo Von Scheben, Commissioner, Dept. of Transportation
Cindy Cashen, Administrator, Highway Safety Office
<http://dot.alaska.gov/stwdplng/hwysafety/index.shtml>

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Additional copies may be obtained by sending a written request to:**

**Department of Health and Social Services
Behavioral Health
Attn: Preventing Underage Drinking Plan
P.O. Box 110620
Juneau, AK 99811-0620**

Or by calling 1-877-393-2287