

**ALASKA'S STRATEGIES  
TO PREVENT  
UNDERAGE DRINKING**

# Alaska's Strategies to Prevent Underage Drinking

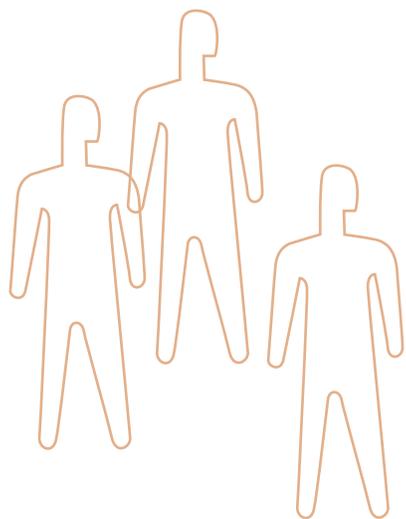
---



A special thank you to Sherrie Wilson, MS, Center for Substance Abuse Prevention Fellow 2010-2012, for research, proofreading, editing and developing report narrative on this revision as well as to the communities around the state that supported this process through their comments, including: the 2010 Rural Providers Town Hall Participants, 2010 Lead On! youth leaders, 2010 & 2012 Comprehensive Prevention Grantee Meeting Focus group participants and the Alaska Mental Health Board and Advisory Board on Alcoholism and Drug Abuse.

## Table of Contents

How to Use This Document.....	5
The Numbers.....	6
The Consequences.....	7
The Cost.....	8
The Positives.....	9
The Approach.....	10
So What Do We Do Now?.....	11
Strategy 1: Availability.....	12
Strategy 2: Prevention.....	14
Strategy 3: Treatment.....	16
Strategy 4: Coordination.....	18
Strategy 5: Social Norms and Culture.....	20
Strategy 6: Research.....	22
Appendix A: History.....	25
Appendix B: End Notes.....	26
Appendix C: Alaska Committee to Prevent Underage Drinking (ACPUD).....	30
Appendix D: Alaska Community Coalitions.....	31





# How to Use This Document

---

The problem of underage drinking in Alaska is significant but not insurmountable. Alcohol has been present in our lives, community functions and culture for a long time. Records suggest alcohol was first introduced to the Alaska region in 1741<sup>1</sup>. To be effectively addressed it will require collaboration and commitment to a long-term effort. Efforts to reduce and prevent underage drinking need to focus on a variety of environmental strategies. 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. The Alaska Committee to Prevent Underage Drinking (ACPUD), whose members are listed in Appendix C, have prepared this plan for those of you working at the community level as a resource.

This document is based on current prevention research, community work around underage drinking in Alaska and ten strategic initiatives, plans and research. Some of these documents already support the work of each other. Alaska's Strategies to Prevent Underage Drinking incorporates some of these recommendations. They are: Alaska's Strategic Traffic Safety Plan 2011; Alaska School Health and Safety Framework 2011; Analysis of Strategies Designed to Reduce Sales of Alcohol and Tobacco to Underage Persons, Casting the Net Upstream Alaska State Suicide Prevention Plan 2012-2015, Final Report; Status of Underage Drinking in Alaska: From the Perspective of Alaska's Youth, 2005; Moving Prevention Upstream, Alaska's SPF SIG Strategic Plan, 2011; Pathways to Preventing Domestic Violence in Alaska 2010-2016; Recover Alaska Initiative Strategic Plan 2011; UAA Alcohol and Wellness Program Recommendations, 2011; and the State of Alaska Plan to Reduce & Prevent Underage Drinking, 2009.

The ACPUD is recommending aligning the common concepts of improving health and decreasing risk behaviors of Alaskans to produce a collective impact on the problem issues these projects seek to address. This is a first step towards bringing these plans together and demonstrating collaboration. We hope to work towards successfully incorporating public health and behavioral health efforts, while empowering communities to prevent underage drinking.

The way in which this resource is intended to be used is a four step process, educate, create, implement and communicate.

**EDUCATE:** Educate yourself by becoming familiar with the strategies, reviewing the statewide numbers and costs and the resources provided. Educate others, make sure your coalition or interested community members understand the issues around underage drinking.

**CREATE:** Create a local effort by conducting an assessment to determine if your local community has a problem, by looking at the data. Form a coalition or group of partners to address the issue at the community level and identify which strategies will work best in your community.

**IMPLEMENT:** Move forward with the plan based on community data and needs and put in place the strategies. Be sure to measure the effect of your work.

**COMMUNICATE:** Contact the ACPUD Members or Chair and share what is working and not working with this resource. Collect and share the success of the community level strategies with the ACPUD and the larger prevention community.

Send your comments, questions, suggestions and successes to [PreventingUnderageDrinking@alaska.gov](mailto:PreventingUnderageDrinking@alaska.gov).

---

**Intended user:** Community level prevention professionals across the state working in both rural and urban environments.

# Underage Alcohol use in Alaska

Negative effects and damaging consequences.

## The NUMBERS

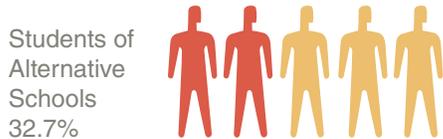
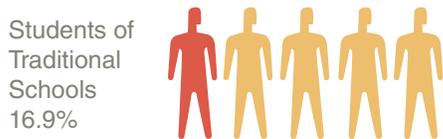
Underage drinking is a concern among health professionals, educators, treatment providers, and prevention specialists. An analysis of Alaska Youth Risk Behavior Surveillance Survey trends from 2005-2011 show traditional school use trending down and alternative school use disproportionately higher.

### USE

While some progress has been made, more work needs to be done to further decrease the consumption rates and negative consequences related to underage consumption of alcohol in Alaska.

In 2011 the following was learned about 9th to 12th graders in traditional<sup>2</sup> and alternative<sup>3</sup> schools in Alaska.

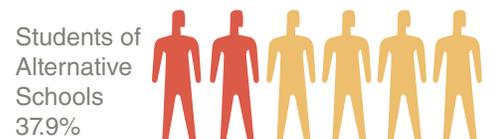
#### Drank prior to age 13



#### 30 day use



#### Binge drinking



### Positive

Two of the Healthy Alaskans 2010 target rates<sup>4</sup> (set in 2005) regarding youth behaviors around alcohol were met.



### Concerning<sup>5</sup>

Alternative school students are using alcohol at twice the rate of their traditional school counterparts and are initiating use earlier.

2x

The following schools were included in the Alternative School YRBS Sample with 970 out of 1489 students participating, giving us a response rate of 65%.

#### School

Avail School  
Benson Secondary/S.E.A.R.C.H  
Continuation School  
Crossroads School  
S.A.V.E  
New Horizons High School  
Yaakoosge Daakahidi Alternative HS  
Kenai Alternative High School

Revilla Jr/Sr High School  
Bethel Alternative Boarding School  
American Charter Academy  
Burchell High School  
Mat-Su Day School  
Valley Pathways  
Kiita Learning Community  
Pacific High School

# Underage Alcohol use in Alaska

Negative effects and damaging consequences.

## The CONSEQUENCES

**581**

Number of 12-20 year olds admitted for alcohol treatment in 2010<sup>6</sup>.

Alcohol related injuries requiring hospitalization in those under 20<sup>7</sup>.

1999  
2004  
2007



**10%**

In 2010 youth made up 10% of treatment for alcohol abuse.<sup>8</sup>

**30,998**

The number of alcohol related misdemeanor charges of youth aged 20 and under from 2000-2008. The majority of these were minor in possession minor/consuming<sup>9</sup>.

**262**

youth alcohol related traffic injuries in 2009.<sup>10</sup>

Young people who began drinking

before age **15** are **4x** more likely to develop

**ALCOHOL DEPENDENCE**

and **2.5x** more likely to become

**ALCOHOL ABUSERS.**<sup>11</sup>



**Minors receiving citations for alcohol consumption in 2011.**<sup>12</sup>

**3,471**

A recent study compared Alaska's 1995-1999 minor consuming cases with 1995-2006 DUI court cases and "found that 24.4% of youth with minor consuming arrests go on to have DUI offenses before their 31st birthday."<sup>13</sup>

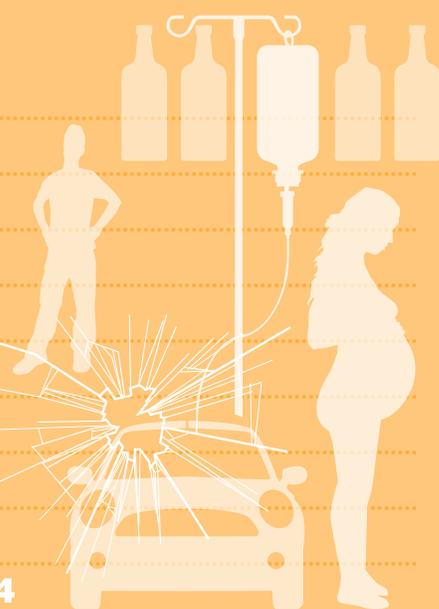
# Underage Alcohol use in Alaska

Negative effects and damaging consequences.

## The COST

### The Cost of Underage Drinking by Problem, Alaska 2005 & 2010<sup>14</sup>

Total Cost (in millions)		
Problem	2005	2010
Youth Violence	\$225.5	\$154.7
Youth Traffic Crashes	\$24.9	\$91.0
High Risk Sex, Ages 14-20	\$18.4	\$11.0
Youth Property Crime	\$7.2	\$11.4
Youth Injury	\$16.8	\$21.5
Poisonings and Psychoses	\$1.6	\$1.7
FAS Among Mothers Age 15-20	\$4.6	\$4.9
Youth Alcohol Treatment	\$17.5	\$25.2
<b>Total</b>	<b>\$316.5</b>	<b>\$321.4</b>



The full details and descriptions of these costs can be found at [www.udetc.org/factsheets/AK.pdf](http://www.udetc.org/factsheets/AK.pdf).

# \$4,378

per Alaska youth annually.

National average per youth \$2073.



# Underage Alcohol use in Alaska

Positive change.

## The POSITIVE

The historical research tells us there are two protective factors that keep children from taking health risks in substance abuse, sexuality, violence, and emotional health: parent-family connectedness and school connectedness. "Parent-family connectedness meant that they felt that they were close to a parent, felt that a parent cared about them, felt satisfied with their parent relationships, and felt loved by their family. School connectedness referred to feeling that they were a part of their school and that they were treated fairly by their teachers"<sup>15</sup> There is new and emerging research which confirms

the need for prevention efforts at the universal level which increase protection and decrease or address risk. This research also indicates community context as having a significant impact on alcohol use in youth populations.<sup>16</sup> Monitoring protective factors and risk factors at the community and state level is essential for success, along with an increased focus on community context for prevention efforts. At this time the Division of Behavioral Health, Prevention Section is monitoring the following factors collected in the Youth Risk Behavioral Survey and the School Climate and Connectedness Survey.<sup>17, 18</sup>

### Protective Factors Monitored by DBH

	2007	2009	2011
Youth who feel comfortable seeking help from 2+ adults <sup>YRBS</sup>	70.1%	67.0%	66.9%
Youth engaged in alternative activities <sup>YRBS</sup>	68.9%	68.0%	87.7%
Youth who feel they matter to other people in the community <sup>YRBS</sup>	50.6%	54.0%	54.6%
Youth with social, emotional, and employability skills <sup>SCCS</sup>	30%	31%	39%
Students who feel connected to their school <sup>SCCS</sup>	24%	29%	35%

### Other positive things youth are reporting <sup>19</sup>

	Alternative Schools	Traditional Schools
Students who played on one or more sports teams during the past 12 months	29.7%	62.9%
Students whose parent's talks with them about what they are doing in school about once or twice a week.	74.5%	60.5%
Students who strongly agree or agree that their teachers really care about them and give them a lot of encouragement	72.3%	56.7%
Students who spend time volunteer at school or in the community weekly	41%	50.3%
Students that participate in organized out of school activities	35.1%	66%

# Underage Alcohol use in Alaska

Positive change.

- Engage individuals, families, communities and society
- Look to multi-strategy community based efforts taking into consideration context
- Decrease risk factors and increase protective factors
- Better research and evaluation of programs, policies and approaches

## The APPROACH



## So what do we do now?

**Individuals, families, communities and society all play a role in promoting protective factors, decreasing risk factors, and addressing factors within the environment that impact underage alcohol use.**

This navigation icon is simply a way to organize the different ways that communities can work to impact underage alcohol in their communities. Not all of these strategies will work in each community; it will all depend on community need and readiness. Each strategy has an overview, a set of recommendations, a “did you know?” section, specific actions, highlight of what is working, and places to go. The recommendations are an overview of what the existing literature describes as being effective within that strategy and the specific actions are the things the committee believes are possible to implement in the next three years and would help to build a stronger foundation in the statewide effort to prevent underage drinking.

**Availability:** Availability of alcohol to underage persons will be reduced by limiting retail and social access.

**Prevention:** Effective prevention will be comprehensive, begin early, be supported by evidence, increase protective factors, be developmentally appropriate and culturally-based.

**Treatment:** Mental health and addiction treatments will be widely available and stigma related to these issues will be diminished.

**Coordination:** Coordination will happen between individuals, families, communities, and governmental organizations to create comprehensive community solutions for underage drinking.

**Social Norms and Culture:** Alaskans will create positive social norms by choosing to live and model healthy lifestyles.

**Research:** Research and evaluation is necessary to ensure efforts are effective and allow for the development of new approaches.





## **Strategy 1: Availability**

**Availability of alcohol to underage persons will be reduced by limiting retail and social access.**

Alcohol use by underage persons can be greatly reduced by controlling the availability. Research has demonstrated that children and adolescents with greater access are more likely to use alcohol.<sup>21</sup> The strategy to reduce availability is therefore broken up into two areas of recommendations: retail availability

(including enforcement of laws and compliance checks) and social availability (including adult norms and consequences around providing alcohol). Effective compliance checks and enforcement of laws can reduce sales of alcoholic beverages to underage persons and are associated with reductions in use of such dangerous substances.<sup>22</sup> A variety of studies have found that compliance checks and enforcement of laws reduces the likelihood that underage persons are able to purchase alcoholic beverages from retailers.<sup>23</sup> Access to alcohol is provided by adults, either intentionally or unintentionally. Social access to alcohol includes provision of alcohol to underage persons by family, friends, and strangers. Family members are the most common social source of alcohol for younger youth.<sup>24</sup>

---

### **Recommendations: What actions can we take?**

**Recommendation 1:** Effective application, consistent and timely enforcement of existing sanctions, associated with retail sales of alcohol, will be a part of any comprehensive prevention strategy.<sup>25,26,27</sup>

**Recommendation 2:** Retail availability will be reduced by controlling zoning and outlet density through municipal codes, and strengthening compliance check programs, and license suspensions to ensure compliance.<sup>28,29,30</sup>

**Recommendation 3:** Social access will be reduced through enforcement of social host liability, restricting alcohol access at social events and increasing shoulder tap operations.<sup>31,32,33,34</sup>

## Specific Action:

- Fund the Alaska Alcoholic Beverage Control Board at a level that provides annually for compliance checks on all package stores, restaurants, and bars
- Enforce Title 4, Alcoholic Beverages laws consistently and timely through the concerted effort of ABC Board investigators, state troopers and local police
- Internet sales and direct shipping of alcohol to consumers should be regulated and include requirements on age verification, state approval/permit, reporting and shipping labels
- Revise AS 04.21.070 to include a language requiring the state to track in one easy-to-access database information on local and state enforcement strategies including cops in shops, shoulder tap operations, party patrol operation/programs and local compliance checks for use in research and federal reporting
- Review and adopt appropriate recommendations from the ABC Board work group created to review and recommend on possible Title 4 changes
- Strengthen and apply social host liability AS 04.21.020 widely throughout the state
- Initiate legislation that would require keg registration so law enforcement can track a keg back to the buyer
- Implement a statewide universal ID check for alcohol sales

## Did you know?

The Municipality of Anchorage has a municipal code that requires keg registration; however, the state does not currently have a law. This type of law is important because it requires the purchaser of the keg to provide identifying information and the keg is tagged with an identification number. If the keg is used to supply an underage party, the police can track the keg back to the buyer. In addition, the purchaser has to think more about whether they want to put their name on a keg that would provide alcohol to minors. Both the keg registration law and a strengthened social host law would increase the required responsibility of our communities and decrease the culture of acceptance of underage drinking. The Anchorage Municipal Code 10.50.050 deals with keg or container registration. And can be found at <http://library.municode.com/index.aspx?clientId=12717>.

## What is working:

The Alcoholic Beverage Control Board has run a compliance check program for over 10 years. Checking approximately 800 alcoholic beverage retailers for compliance in refusing alcohol to underage persons each year. A total of 804 compliance checks were conducted for in 2011 and 88% were compliant.<sup>35</sup> The liquor industry rose to the challenge of working towards decreasing access to alcohol. This program has been funded the Enforcement of Underage Drinking Laws (EUDL) with pass through funds from the Department of Health and Social Services. These dollars funded the salary and benefits of one investigator who conducted compliance checks on liquor licensed establishments. The EUDL grant ended on December 31, 2012, if funding is continued by the state, this essential program will be able to continue. Recent data suggests that with funds to sustain the program, compliance will increase and access to alcohol by youth will continue to decrease in Alaska.<sup>36</sup>

## Places to go:

- **Alcoholic Beverage Control Board, Alaska:** <http://commerce.alaska.gov/dnn/abc/Home.aspx>
- **Center for Disease Control Community Guide:** [www.thecommunityguide.org/alcohol/index.html](http://www.thecommunityguide.org/alcohol/index.html)
- **Prevention of Underage Drinking: Logic Model Documentation:** [www.pire.org/documents/UnderageDrinking.doc](http://www.pire.org/documents/UnderageDrinking.doc)
- **STOP Underage Drinking:** [www.stopalcoholabuse.gov/default.aspx](http://www.stopalcoholabuse.gov/default.aspx)
- **Underage Drinking Enforcement Training Center:** [www.udetc.org](http://www.udetc.org)



## Strategy 2: Prevention

**Effective prevention will be comprehensive, initiated early, supported by evidence, developmentally appropriate and culturally-based.**

Prevention occurs on a spectrum from broad-based health and wellness promotion efforts to targeted interventions for higher risk youth. The four recommendations that fall under prevention programs examine the characteristics that successful prevention programs have in common. Extensive research has identified

factors that impact youth problem behaviors such as substance use, violence, suicide ideation, and early sexual activity. Studies have found, the more risk factors an adolescent has, the greater the likelihood of problem behavior. Conversely, youth with more protective factors are less likely to be involved in problem behaviors and more likely to do well in school and in life.<sup>37</sup> Communities with youth engaged with volunteering and alternative activities will have positive outcomes for youth.<sup>38,39</sup> A YRBS analysis conducted with Anchorage School District data, identified youth volunteering three or more hours per week or being involved in organized after school activities two or more days a week as possessing significant protective factors for 30 day use and binge use of alcohol.<sup>40</sup>

### **Recommendations: What actions can we take?**

**Recommendation 1:** Programs should focus on promoting non-use, establishing healthy norms, increasing protective factors, and implementing strategies in school, university and workplace, in addition to other settings in the community.<sup>41,42,43,44,45</sup>

**Recommendation 2:** Programs should begin at an early age, be interactive, involve the use of peers and social influences to facilitate non-use, be implemented with fidelity, provide sufficient dose and provide follow-up.<sup>46,47,48,49</sup>

**Recommendation 3:** Youth alcohol screening should be a critical element that integrates systems with services, such as pediatric, school-based and university screening for alcohol use or abuse.<sup>50,51,52,53</sup>

**Recommendation 4:** Community level interventions should be culturally-based, incorporate cultural values and practices, and involve the local community in design and delivery.<sup>54,55,56,57</sup>

## Specific action:

- Ensure that community-based organizations that provide support and engagement for youth are fully funded and able to provide services year-round, especially during the months of June and July when initiation of alcohol is most common.
- Support coordinated school health programs and comprehensive health education and encourage more school districts to implement the Fourth R curriculum, which engages students in developing healthy relationships and the skills needed to resist peer pressure, including the pressure to use alcohol.
- Funding should be made available to support a full-time Alcohol, Drug, & Wellness Educator to serve the entire University of Alaska system, and increase the number of alcohol, drug, and wellness programs and services to universities throughout the state.
- To reach youth who are not in traditional school programming, coalitions should specifically target employers with a high volume of youth employees, to implement prevention programs and establish workplace policies and procedures that discourage drinking.

## Did you know?

Anchorage School District has focused on asset building and increasing school climate and connectedness for several years. This has been done through the following broad-based strategies: promoting small learning communities where students have a regular check-in time with school staff on academic and non-academic issues; developing and implementing the standards and benchmarks social-emotional/employability skills; offering staff development to teach and coach all staff in school climate and asset building practices and policies; Implementation of targeted programs: Change of Heart, Be the Change, Resolving Conflict Creatively; Aggressors, Victims and Bystanders. Schools with increased climate, connectedness and SEL have seen increases in academic achievement and some have tracked a decrease in suspensions for fighting and alcohol/drug offenses.

## What is working:

The Fourth R Healthy Relationships Program is an evidence-based curriculum for 7th, 8th, and 9th-grade students that is designed to promote healthy and safe behaviors related to dating, bullying, healthy growth and substance use. Based on the social learning theory and implemented at appropriate stages of social development, the Fourth R focuses on improving students' relationships with peers and dating partners and avoiding symptomatic problem behaviors.<sup>58</sup> This program has been strategically adapted to better suit the needs of Alaskan youth and is being implemented in numerous middle and high schools throughout the state. A statewide program evaluation of the Alaska Fourth R curricula is being conducted. If you are interested in learning more about this effort go to: [http:// education.alaska.gov/tls/schoolhealth/fourth.html](http://education.alaska.gov/tls/schoolhealth/fourth.html).

## Places to go:

- **After School Alliance:** [www.afterschoolalliance.org/researchTopics.cfm](http://www.afterschoolalliance.org/researchTopics.cfm)
- **Alaska School Health and Safety Framework 2011:** [education.alaska.gov/tls/schoolhealth/](http://education.alaska.gov/tls/schoolhealth/)
- **Alcohol Screening and Brief Intervention for Youth:** [www.niaaa.nih.gov/Publications/EducationTrainingMaterials/Pages/YouthGuide.aspx](http://www.niaaa.nih.gov/Publications/EducationTrainingMaterials/Pages/YouthGuide.aspx)
- **Anchorage Youth Activities:** [www.anchorageyouthcentral.org/](http://www.anchorageyouthcentral.org/)
- **Fourth R Development Group:** [www.youthrelationships.org/](http://www.youthrelationships.org/)
- **National Registry of Evidence-Based Programs & Practices (NREPP):** [www.nrepp.samhsa.gov](http://www.nrepp.samhsa.gov)
- **Native American Center for Excellence (NACE):** [nace.samhsa.gov](http://nace.samhsa.gov)
- **Prevention and Behavioral Health:** [captus.samhsa.gov/prevention-practice/prevention-and-behavioral-health](http://captus.samhsa.gov/prevention-practice/prevention-and-behavioral-health)
- **School Connectedness:** [www.cdc.gov/healthyyouth/adolescenthealth/connectedness.htm](http://www.cdc.gov/healthyyouth/adolescenthealth/connectedness.htm)
- **School Climate and Connectedness work in Alaska:** [alaskaice.org/school-climate/what-is/](http://alaskaice.org/school-climate/what-is/)
- **Safe and Civil Schools (Positive Behavioral Supports):** [safeandcivilschools.com/index.php](http://safeandcivilschools.com/index.php)
- **UAA Alcohol and Wellness Plan:** [www.uaa.alaska.edu/students/drugsandalcohol.cfm](http://www.uaa.alaska.edu/students/drugsandalcohol.cfm)
- **Que Pasa Anchorage:** [www.facebook.com/QuePasaAnchorage](http://www.facebook.com/QuePasaAnchorage)



## Strategy 3: Treatment

**Mental health and addiction treatments will be widely available in a variety of settings and stigmatism related to these issues will be diminished.**

In order for youth to choose to be alcohol free, the family that they are supported by must also make healthy lifestyle choices. We need to change the “drinking isn’t a problem” here thinking.<sup>59</sup> The emerging research related to Adverse Childhood Experiences (ACE) and the

strong relationship to youth alcohol initiation and youth drinking in early childhood is building momentum and warrants a comprehensive prevention strategy to address them. There is strong evidence that in order to address underage drinking with the population of families and youth with ACEs impacting them, prevention planning must consider stress and trauma.<sup>60</sup> Currently in Alaska, the Department of Corrections and the Department of Health and Social services are training staff and others on the ACEs and how to provide trauma informed care. Having effective, accessible treatment, integrated health care and alternative justice models like therapeutic courts and an effort to normalize mental health and substance abuse treatment, will positively impact youth.

---

### Recommendations: What actions can we take?

**Recommendation 1:** To address alcohol abuse of underage persons and family members, Screening and Brief Intervention to Treatment should be Integrated into health care services, vocational settings, and college campus services.<sup>61,62,63,64</sup>

**Recommendation 2:** The statewide dialogue to understand Adverse Childhood Experiences and their impacts on behavior should be expanded to involve all levels of society.<sup>65,66</sup>

**Recommendation 3:** Barriers to treatment will be addressed by ensuring ease of access through having an adequate number of providers to meet demand, providers trained in prevention practices, addressing language access, and finding culturally and gender appropriate service delivery methods.<sup>67,68</sup>

**Recommendation 4:** Alternative court options for alcohol related misdemeanors for adults should be available and include education, treatment options and drug testing along with a screening process

to determine appropriate level of intervention and use of predictive factors to focus treatment. <sup>69,70,71,72,73,74</sup>

## Specific Action:

- Integration of healthcare, public health and behavioral health should continue to be a priority at the state level.
- Ensure that SBIRT (Screening, Brief Intervention, and Referral to Treatment) Training is available to all appropriate healthcare providers in the state of Alaska.
- Training on what Adverse Childhood Experiences and how they impact future health will be made widely available, with a special focus on law makers, coalitions, providers, teachers and youth development professionals.
- Increase support and treatment for children in the foster care system as well as children recently aged out.
- Continue to support the use of therapeutic or alternative courts.

## Did you know?

Screening and Brief Intervention to Treatment (SBIRT) is a universal screening tool designed to target risky alcohol use. Research has shown this to be an effective comprehensive approach which can be utilized in non-substance abuse settings like trauma centers, public health centers, vocational settings or primary care when administered by a trained professional.<sup>75</sup> With a high rate of injuries and costs in Alaska due to alcohol related injury, utilizing a screening approach may reduce DUI arrests, health care costs and trauma recidivism in Alaska.<sup>76</sup>

## What is Working:

Therapeutic courts represent an intensive, coordinated effort of the Division of Behavioral Health, in partnership with the Alaska Court System and behavioral health professionals, to actively intervene and disrupt the cycle of substance abuse, addiction, and crime. There are Therapeutic Court Probation Officers in Anchorage, Juneau, Barrow, Fairbanks, Bethel, Palmer, and Ketchikan. Those who wish to participate in one of the therapeutic court programs must be referred by the District Attorney's office and enter the program voluntarily. By participating in the program, they receive intensive case management, such as daily contact, alcohol and other drug testing, random home and work visits, group sessions and weekly court sessions. Data shows that with the strict court monitoring, community supervision, intensive case-management, and long-term behavioral health treatment services of the therapeutic court programs, even individuals with felony alcohol and drug convictions are able to re-enter the community and be successful.

## Places to go:

- **Adverse Childhood Experiences:** [www.cdc.gov/ace/](http://www.cdc.gov/ace/)
- **Alaska Alcohol Safety Action Program:** <http://dhss.alaska.gov/dbh/Pages/Prevention/programs/asap/default.aspx>
- **Alaska Division of Behavioral Health:** <http://dhss.alaska.gov/dbh/Pages/default.aspx>
- **Alaska Immigration Justice Project:** <http://akijp.org/>
- **Clinical Manual of Prevention in Mental Health:** [www.appi.org/SearchCenter/Pages/SearchDetail.aspx?ItemId=62347](http://www.appi.org/SearchCenter/Pages/SearchDetail.aspx?ItemId=62347)
- **PCMH:** [www.pcmh.ahrq.gov](http://www.pcmh.ahrq.gov)
- **Real Tools: Responding to Multi Abuse Trauma:** [www.andvsa.org/home-featured/real-tools-responding-to-multi-abuse-trauma/](http://www.andvsa.org/home-featured/real-tools-responding-to-multi-abuse-trauma/)
- **Southcentral Foundation Nuka System of Care:** [www.scf.cc/nuka/index.ak](http://www.scf.cc/nuka/index.ak)
- **SBI Implementation Guide:** [www.cdc.gov/InjuryResponse/alcohol-screening/pdf/SBI-Implementation-Guide-a.pdf](http://www.cdc.gov/InjuryResponse/alcohol-screening/pdf/SBI-Implementation-Guide-a.pdf)
- **SBIRT Tools:** [http://sbirt.ireta.org/sbirt/clinical\\_tools.htm](http://sbirt.ireta.org/sbirt/clinical_tools.htm)
- **The People Awakening Project:** [www.uaf.edu/canhr/projects/past-project](http://www.uaf.edu/canhr/projects/past-project)



## **Strategy 4: Coordination**

**Coordination will happen between individuals, families, communities, and society to create comprehensive community solutions for underage drinking.**

Communities hold the understanding and solutions to the complex issues that face them. Therefore, it is important coordination happen within the community to involve diverse and representative partners including youth,

parents, business, media, schools, youth serving organizations, law enforcement, religious fraternal organizations, civic/volunteer groups, health care professionals, state/local/tribal government and other substance abuse organizations. It is important to ensure the coalition or partners reflect your community. In Alaska, coalitions should also consider having representation by elders, alcohol retail industry, and other regionally relevant groups. To efficiently change conditions, workforce capacity must be addressed at all levels. This will ensure that Alaska's prevention workforce is adequately trained and prepared to implement community change through evidenced-based processes. Instead of working in silos, various local and state groups must be prepared to remove barriers to communication, share resources, and work in concert on shared interests.

---

### **Recommendations: What actions can we take?**

**Recommendation 1:** Communities will use their own ways of knowing their local issues to solve problems related to underage drinking by forming broad coalitions of partners that engage communities and develop support to address issues related to underage drinking.<sup>77,78,79,80</sup>

**Recommendation 2:** Increase the capacity, training, and professionalism of Alaska's prevention workforce by establishing prevention core competencies and adopting and making widely available, the Substance Abuse Prevention Skills Training (SAPST).<sup>81,82,83</sup>

**Recommendation 3:** Communities will be informed by Alaskan research (state, regional and community) through a concerted effort to remove barriers in communication and make reports, strategic plans, and research results widely available across sectors and disciplines.<sup>84,85</sup>

## Did you know?

A training that helps coalitions and community members is the SAPST Training. SAPST: Substance Abuse Prevention Skills Training (SAPST) is a 4-day training that builds prevention workforce core competencies by looking at prevention science and the strategic prevention framework, a process that creates community-level change in the areas of alcohol, tobacco, and other drugs (ATOD). In July of 2012 all of the state prevention staff and community fourteen community prevention professionals completed this training. This was a pilot of the new SAPST curriculum. Soon this training will be widely available in Alaska. The SAPST preparation also is a pre requisite for becoming a Certified Prevention Specialist through the IC&RC, which is a national certifying board.

## Specific Action:

- Communities should address public health and behavioral health issue like underage drinking with a single comprehensive coalition.
- The State of Alaska can expand supports available to prevention providers to enhance the delivery of prevention services.
- Alaska should have a “one-stop-shop” to coordinate underage drinking prevention efforts, including town halls, research, prevention programming, and communication.
- The University of Alaska should increase opportunities for professionalized behavioral health prevention training and education in the Department of Health Sciences.
- Identify and promote prevention programs that show success in reducing youth alcohol consumption appropriate to Alaska, through methods like Service to Science and other efforts to highlight practice-based evidence.

## What is working:

Healthy Families, the Yu'pik Way follows the cultural practices, beliefs, values, teachings and traditions in teaching Yuuyaraq, our healthy way of life. Healthy Families is a process where participants are reminded that all the wisdom, knowledge, cultural practices, beliefs and values that have been passed on for generations, is still possessed and within reach for each person. These are strengths that maintain whole health, from conception to adulthood. In finding and enhancing these strengths people are better equipped to not allow unhealthy habits and behavior into their lives and their families.

The Yu'pik Way curriculum was put together by a group of Yup'ik professionals under the guidance of a respected elder who is very knowledgeable in their traditions. Healthy Families is a strength based, holistic approach to begin looking at oneself, and finding strengths within each and every participant. In Bethel and the YK region, Healthy Families the Yup'ik Way is being provided by Alaska Village Council Presidents, Orutsaramiut Native Council, Yukon Kuskokwim Health Corporation. Child welfare, women's shelter, schools, substance abuse treatment, tribal communities, tribal child welfare, youth facility, and many other agencies are accessing the Healthy Families model for the people they serve with positive results.



## Places to go:

- **ANTHC Substance Abuse Prevention Initiative:** [anthc.org/chs/behavioral/sapi.cfm](http://anthc.org/chs/behavioral/sapi.cfm)
- **Community Anti-Drugs Coalitions of America:** [www.cadca.org](http://www.cadca.org)
- **National Prevention Strategy:** [www.healthcare.gov/prevention/nphpphc/strategy/report.pdf](http://www.healthcare.gov/prevention/nphpphc/strategy/report.pdf)
- **Reducing Underage Drinking: A Collective Responsibility:** [www.nap.edu/openbook.php?isbn=0309089352](http://www.nap.edu/openbook.php?isbn=0309089352)
- **Casting the Net Upstream: Alaska State Suicide Prevention Plan 2012-2015:** [www.hss.state.ak.us/suicideprevention/pdfs\\_sspc/SSPC\\_2012-2017.pdf](http://www.hss.state.ak.us/suicideprevention/pdfs_sspc/SSPC_2012-2017.pdf)



## **Strategy 5: Social Norms and Culture**

**Alaskans will create positive social norms by choosing to live and model healthy lifestyles.**

Parental and role model behaviors, community ways, environments that either condone or encourage drinking behaviors and alcohol advertising are but a few of the multiple factors that affect norms around underage drinking.<sup>86</sup> “Evidence suggests that parents who form warm, nonconflictual relationships with

their children, provide adequate monitoring and supervision, and do not provide models of drug use help protect their children from developing substance use disorders.”<sup>87</sup> Individuals and communities must model positive behaviors in order to prevent future generations from developing substance use disorders. Things as simple as dining together as a family create positive norms for youth.<sup>88</sup> Research locally and nationally supports the concept that family support, monitoring and communication have an impact on youth alcohol behaviors.<sup>89</sup> Anchorage School District YRBS analysis showed youth who talk to their parents nearly every day about school as significant protective factors for 30 day use and binge use of alcohol.<sup>90</sup>

---

### **Recommendations: What actions can we take?**

**Recommendation 1:** Parents, guardians, and other caregivers will develop positive relationships with youth by spending time with them, expecting the positive, and providing the guidance necessary for them to grow up healthy, happy, and productive members of the community.<sup>91,92,93,94,95,96,97</sup>

**Recommendation 2:** Alaskans will model behavior related to alcohol use that promotes healthy lifestyles and communities and seek opportunities to mentor youth in values that lead to healthy choices.<sup>98,99,100,101</sup>

**Recommendation 3:** : Alaskans will demonstrate respect for all cultures and strive to eliminate the abuse and trauma that results when one cultural perspective is imposed on another.<sup>102</sup>

**Recommendation 4 :** Communities will foster positive, healthy attitudes and behavior tied to alcohol consumption through appropriate use of communication and media that eliminates community misconceptions tied to youth alcohol use, prohibits

alcohol advertisement that targets youth, and by developing regulations and policies that address content and placement of alcohol promotion.<sup>103,104,105,106,107,108</sup>

## Specific Action:

- A statewide media campaign should be developed that fosters healthy relationships between adults and youth in families and their community and eliminate misconceptions about alcohol use and its' impact.
- University and community settings will sponsor more events where alcohol is not present.
- Parents will host community cafés to increase parental resilience, social connections, knowledge of parenting and child development and concrete support in times of need
- Communities will review the level of alcohol advertisement that is visible and develop local ordinances to limit this type of promotional material where underage persons are regularly congregating.

## Did you know?

Research has demonstrated that positive alcohol expectancy, or the positive benefits a young person expects to have after drinking alcohol does impact the timing and amount an underage person will consume. Underage youth who have positive alcohol expectancies will drink more often and higher amounts than their peers. Positive alcohol expectancies are provided by peers, parents and other adults as well as the media and the environment in which they live.<sup>109</sup>

## What is working:

The Alaska Wellness Coalition is a statewide partnership that works together to improve the health in communities across the state of Alaska. The coalition serves to facilitate information sharing on state and local data, evidenced-based programming, best practices, strategic prevention, current health trends, statewide advocacy for health promotion, sharing funding opportunities and developing plans for statewide engagement to improve the health of Alaskans. Members are representative of communities from Anchorage, Bethel, Fairbanks, Homer, Juneau, Kenai, Kodiak, Palmer, Seward, Sitka, Valdez, Wasilla and Yakutat bringing a diverse group of communities together. We are stronger when we work together and seek to work to create a cooperative environment within the coalition that includes seeking joint funding and collaborating to sustain the work of coalition organizations.



## Places to go:

- **Alcohol Justice, Industry Watchdog:** [www.alcoholjustice.org/](http://www.alcoholjustice.org/)
- **Anchorage CMCA:** [www.voak.org/Services/Communities-Mobilizing-for-Change-on-Alcohol](http://www.voak.org/Services/Communities-Mobilizing-for-Change-on-Alcohol)
- **Center of Alcohol Marketing and Youth:** [www.camy.org/](http://www.camy.org/)
- **College Drinking-Changing the Culture:** [www.collegedrinkingprevention.gov/SupportingResearch/Journal/perkins2.aspx](http://www.collegedrinkingprevention.gov/SupportingResearch/Journal/perkins2.aspx)
- **Ethnicity, Culture & Alcohol:** [pubs.niaaa.nih.gov/publications/Social/Module10HEthnicity&Culture/Module10H.html](http://pubs.niaaa.nih.gov/publications/Social/Module10HEthnicity&Culture/Module10H.html)
- **Family Meals:** [casafamilyday.org/familyday/](http://casafamilyday.org/familyday/)
- **Parental Monitoring:** [www.cdc.gov/healthyyouth/adolescenthealth/monitoring.htm](http://www.cdc.gov/healthyyouth/adolescenthealth/monitoring.htm)
- **Positive Community Norms:** [www.mostofus.org/](http://www.mostofus.org/)
- **Strengthening Families:** [www.strengtheningfamilies.alaska.gov](http://www.strengtheningfamilies.alaska.gov)



## **Strategy 6: Research**

**Research and evaluation is necessary to ensure efforts are effective and allow for the development of new approaches.**

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. Increased attention is needed on research related to underage drinking in Alaska. Having a better understanding of the success and challenges of programs and interventions directed at reducing and preventing underage drinking is an essential step towards success on this issue. Making adaptations, tracking them and sharing them widely will provide all of Alaskans working to improve health new tools and understanding. While evaluation can be challenging or expensive, it is an essential component to ensure Alaskan adaptations and programs maintain fidelity and continue to be evidence based.

---

### **Recommendations: What actions can we take?**

**Recommendation 1:** Review of alcohol policies, statutes and regulations to identify needs and gaps.<sup>110,111,112</sup>

**Recommendation 2:** Alaskan based funders of alcohol prevention and early intervention should develop a shared measurement tool and support community based grantees in conducting outcome evaluations.<sup>113,114</sup>

**Recommendation 3:** Conduct additional research on the context in which youth consume alcohol, a survey on perceptions of adults who provide alcohol to underage persons, as well as more research on Alaskan-specific issues around alcohol.<sup>115,116,117</sup>

## Did you know?

Dr. Marny Rivera a UAA Justice Faculty member was honored in 2011 for her research on underage drinking. This honor was awarded by The Mutual of America Foundation for a Community Partnership Award. Dr. Rivera was recognized as a partner of the VOA Alaska's Juvenile Alcohol Safety Action Program, which was selected as a Merit Finalist. In addition to this research Dr. Rivera and her team have contributed to our understanding of issues related to underage drinking through bulletins, research and evaluation over the past few years in Anchorage.<sup>118</sup>

## Specific Action:

- Conduct a comprehensive review of compliance check program, including a review of the number of alcohol infraction cases that are filed, prosecuted, and convicted against youth or licensees for alcohol violations.
- Review and adopt appropriate recommendations from the ABC Board work group created to review and recommend possible Title 4 changes.
- Research the best practices in reducing retail access to alcohol by underage persons through laws and penalties, enforcement protocols and enforcement resources.
- Conduct a follow up study to establish further findings on the impact of the alcohol tax increase initiated in 2002, to determine if further tax increases would be beneficial.
- Implement research to identify cognitive, relational, socio-environmental and demographic factors associated with adults who provide alcohol to underage persons.
- Conduct additional research on the specific contexts in which youth both access and consume alcohol, survey perceptions of youth, near peers and adults regarding underage alcohol use, and conduct research on Alaska-specific alcohol issues, e.g. those influenced by issues of extreme climate and geography, as well as cultural trauma.

## What works:

Exploring the Relationship between Protective Factors, Risk Behaviors, and School Engagement Factors among Anchorage High School Students is a new report on the trends report of risk and protective factors among Anchorage high school students was recently published by Anchorage United for Youth (AUY) in May 2012. Dr. Gabriel Garcia from UAA Department of Health Sciences and Sarah Sledge of United Way of Anchorage, worked to address this gap in research. They found out it takes about 3 to 5 protective factors to significantly decrease the rates of risk behaviors. Each one-unit increase in the number of protective factors reported by youth can significantly decrease the likelihood of engaging in risk behaviors and increase the likelihood of positive school outcomes from 14% to 40%. The protective factors that had the strongest effect on decreasing the odds of youth engaging in risk behaviors were having caring and encouraging teachers, having parents that talk to them about school every day, volunteering or helping three or more hours per week in school or the community, and being involved in organized after school activities two or more days per week. To learn more or read the full executive summary and findings please go to [www.aydc.org](http://www.aydc.org).

## Places to Go:

- **CDC Research:** [www.cdc.gov/healthcommunication/Research/index.html](http://www.cdc.gov/healthcommunication/Research/index.html)
- **Center for Alaska Native Health Research:** [www.uaf.edu/canhr/](http://www.uaf.edu/canhr/)
- **Collective Impact:** [www.fsg.org](http://www.fsg.org)
- **Institute for Circumpolar Health Studies:** [www.uaa.alaska.edu/instituteforcircumpolarhealthstudies/](http://www.uaa.alaska.edu/instituteforcircumpolarhealthstudies/)
- **International Union for Circumpolar Health:** <http://iuch.net/index.php>
- **Native American Center for Excellence:** [nace.samhsa.gov](http://nace.samhsa.gov)
- **Pacific Institute Research and Evaluation:** [www.pire.org](http://www.pire.org)
- **Society for Prevention Research:** [www.preventionresearch.org/](http://www.preventionresearch.org/)
- **UAA, Justice Center Research:** [justice.uaa.alaska.edu/research/index.html](http://justice.uaa.alaska.edu/research/index.html)



## Appendix A

### History

Alaska's original plan, Plan to Reduce & Prevent Underage Drinking (2009) was a result of work that began in 2005 gaining momentum in 2005 due to federal governmental organization. In 2004, as part of the 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 that outlined a plan for combating underage drinking. 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 was created with representatives from:

- The Alaska Court System
- Department of Education and Early Development
- Department of Transportation/Highway Safety Office
- DHSS, Division of Juvenile Justice
- DHSS, Division of Behavioral Health/Prevention
- DHSS, Division of Behavioral Health/Alcohol Safety Action Program
- Department of Public Safety/Alcoholic Beverage Control Board
- The Alaska Native Justice Center

Alaska's committee, titled the Alaska Interagency Coordinating Committee on the Prevention of Underage Drinking (ACPUD) organized and worked from 2005-2009 to create the original plan to reduce underage drinking. The committee held many town hall meetings and looked at research to develop its own plan to reduce and prevent underage drinking.

Prevention publications must continually be updated to reflect current research, data, and to accurately reflect the wishes of the stakeholders. Some changes that have been made are as follows: The original Plan to Reduce & Prevent Underage Drinking included national recommendations under each strategy that have been removed from this plan. The current version, Alaska's Strategy's to Prevent Underage Drinking, has been modified to more accurately reflect Alaska local issues and to highlight current projects. Other changes made were to incorporate current research and findings from several prevention publications, such as the Surgeon General's Call to Action to Prevent & Reduce Underage Drinking (2007) and the National Prevention Strategy (2011). Comments received from individuals who reviewed the original plan through Town Hall meetings and stakeholder input has also been taken into consideration. This version of the plan, titled Alaska's Strategy's to Prevent Underage Drinking, has also been updated to include current data.

## Appendix B: End notes

- 1 Anderson, T (1988). Alaska Hooch: The History of Alcohol in Early Alaska. Fairbanks, Alaska: Hoo-Che-Noo
- 2 Alaska, Department of Health and Social Services, Division of Public Health. (2011). 2011 Alaska Traditional High School YRBS Results (by sex, grade and race). Retrieved from [http://www.hss.state.ak.us/dph/chronic/school/pubs/2011AKTradHS\\_Graphs.pdf](http://www.hss.state.ak.us/dph/chronic/school/pubs/2011AKTradHS_Graphs.pdf)
- 3 Alaska, Department of Health and Social Services, Division of Public Health. (2011). 2011 Alaska Alternative High School YRBS Results (by sex, grade and race). Retrieved from [http://www.hss.state.ak.us/dph/chronic/school/pubs/2011AKAlthS\\_Graphs.pdf](http://www.hss.state.ak.us/dph/chronic/school/pubs/2011AKAlthS_Graphs.pdf)
- 4 Alaska Department of Health and Social Services, Division of Public Health. (2005). Healthy Alaskans 2010 Targets and Strategies for Improved Health: Volume 1. Juneau: State of Alaska.
- 5 Alaska, Department of Health and Social Services, Division of Public Health. (2011). 2011 Alaska Alternative High School YRBS Results (by sex, grade and race). Retrieved from [http://www.hss.state.ak.us/dph/chronic/school/pubs/2011AKAlthS\\_Graphs.pdf](http://www.hss.state.ak.us/dph/chronic/school/pubs/2011AKAlthS_Graphs.pdf)
- 6 SAMDA 2010 TEDS Admissions – Quick Table query for Alaska admissions with alcohol reported as primary, secondary, or tertiary substance of use.
- 7 Rivera, M., & McMullen, J. (2010). Youth Alcohol Access, Consumption, and Consequences in Anchorage, Alaska: Identification of Indicators. Anchorage: University of Alaska Justice Center.
- 8 SAMDA 2010 TEDS Admissions – Quick Table query for Alaska admissions with alcohol reported as primary, secondary, or tertiary substance of use.
- 9 Rivera, M., & McMullen, J. (2010). Youth Alcohol Access, Consumption, and Consequences in Anchorage, Alaska: Identification of Indicators. Anchorage: University of Alaska Justice Center.
- 10 Pacific Institute for Research and Evaluation. (2011). Underage Drinking in Alaska: The Facts. Retrieved from <http://www.udetc.org/factsheets/AK.pdf>
- 11 Windle, M., & Zucker, R. A. (2010). National Institute on Alcohol Abuse and Alcoholism. Retrieved from Reducing Underage and Young Adult Drinking: <http://pubs.niaaa.nih.gov/publications/arh40/29-44.htm>
- 12 Alaska Court System. (2012). Minor Consuming Charges Charges Filed 01/01/2011 to 12/31/2011. Anchorage: State of Alaska
- 13 Hamilton, S. (2009). Evaluation of Risk Factors for Repeat DUI Offenses. Retrieved from, Alaska Highway Safety Office [http://www.dot.state.ak.us/stwdplng/hwysafety/assets/pdf/2009\\_DUI\\_MC\\_Report\\_Final.pdf](http://www.dot.state.ak.us/stwdplng/hwysafety/assets/pdf/2009_DUI_MC_Report_Final.pdf)
- 14 Pacific Institute for Research and Evaluation. (2011). Underage Drinking in Alaska: The Facts. Retrieved from <http://www.udetc.org/factsheets/AK.pdf>
- 15 Resnick, M. D., Harris, K. M., & Shew, M. (1997). Protecting Adolescents From Harm. The Journal of the American Medical Association, 823-831.
- 16 Jones, D. E., Feinberg, M. E., Cleveland, M. J., & Rhoades Cooper, B. (2012). A Multidomain Approach to Understanding Risk for Underage Drinking: Converging Evidence from 5 Data Sets. American Journal of Public Health, 2080-2087.
- 17 Spier, Elizabeth. (2012) Statewide Summary of the Connection to School and Emotional/Employability Learning Skills weighted data. [Personal Communication from S. Rue of Analysis of 9th to 12th grades for 2007, 2009, and 2011]. Association of Alaska School Boards School Connectedness Survey. Juneau, Alaska.
- 18 Alaska, Department of Health and Social Services, Division of Public Health. (2011). 2011 Alaska Traditional High School YRBS Results (by sex, grade and race). Retrieved from [http://www.hss.state.ak.us/dph/chronic/school/pubs/2011AKTradHS\\_Graphs.pdf](http://www.hss.state.ak.us/dph/chronic/school/pubs/2011AKTradHS_Graphs.pdf)
- 19 Alaska, Department of Health and Social Services. (2011). Alaska Statewide: Alternative HS 2011 Compared to Alaska Statewide: Traditional HS 2011. Anchorage: Division of Public Health
- 20 State of Alaska. (2011, January). Risk and Protective Factors for Adolescent Substance Use. Anchorage, AK. Retrieved from [http://www.hss.state.ak.us/dbh/prevention/programs/spfsig/pdfs/Risk\\_Protective\\_Factors.pdf](http://www.hss.state.ak.us/dbh/prevention/programs/spfsig/pdfs/Risk_Protective_Factors.pdf)
- 21 National Research Council and Institute of Medicine. (2009). Preventing Mental, Emotional, and Behavioral Disorders Among Young People. Washington D.C. : National Academies Press.
- 22 Bonnie, R. J., & O'Connell, M. E. (2004). Reducing Underage Drinking: A Collective Responsibility. Washington D.C.: The National Academies Press.
- 23 Community Preventative Services Task Force. (2012). The Guide to Community Preventative Services: The Community Guide, What Works to Promote Health. Retrieved from Preventing Excessive Alcohol Consumption: <http://www.thecommunityguide.org/alcohol/index.html>
- 24 Birckmayer, J. D., Boothroyd, R. I., Fisher, D. A., Grube, J. W., & Harold, H. D. (2008). Pacific Institute for Research and Evaluation. Retrieved from Prevention of Underage Drinking: Logic Model Documentation: <http://www.pire.org/logicmodels.htm>
- 25 National Research Council and Institute of Medicine. (2009). Preventing Mental, Emotional, and Behavioral Disorders Among Young People. Washington D.C. : National Academies Press.
- 26 Community Preventative Services Task Force. (2012). The Guide to Community Preventative Services: The Community Guide, What Works to Promote Health. Retrieved from Preventing Excessive Alcohol Consumption: <http://www.thecommunityguide.org/alcohol/index.html>
- 27 Birckmayer, J. D., Boothroyd, R. I., Fisher, D. A., Grube, J. W., & Harold, H. D. (2008). Pacific Institute for Research and Evaluation. Retrieved from Prevention of Underage Drinking: Logic Model Documentation:

# Alaska's Strategies to Prevent Underage Drinking

---

- 28 Compton, M. T. (2010). *Clinical Manual of Prevention in Mental Health*. Arlington: American Psychiatric Publishing, Inc.
- 29 National Prevention Council. (2011). *National Prevention Strategy*. Washington D.C. : U.S. Department of Health and Human Services, Office of the Surgeon General.
- 30 State of Alaska. (2012). Alaska Department of Transportation and Public Facilities. Retrieved from Alaska's Strategic Traffic Safety Plan: <http://dot.alaska.gov/stwdplng/stsp/index.shtml>
- 31 Imm, P., Chinman, M., Wandersman, A., Rosenbloom, D., Guckenburg, S., & Leis, R. (2007). *Preventing Underage Drinking: Using Getting to Outcomes with the SAMSHA Strategic Prevention Framework to Achieve Results*. Santa Monica: RAND Corporation.
- 32 State of Alaska. (2009). *State of Alaska Plan to Reduce & Prevent Underage Drinking*. Anchorage: State of Alaska, Department of Health and Social Services.
- 33 Bonnie, R. J., & O'Connell, M. E. (2004). *Reducing Underage Drinking: A Collective Responsibility*. Washington D.C.: The National Academies Press.
- 34 Thomas, S., Paschall, M. J., Grube, J. W., Cannon, C., & Treffers, R. (2012). *Underage Alcohol Policies Across 50 California cities: An Assessment of Best Practices*. Substance Abuse Treatment, Prevention, and Policy.
- 35 State of Alaska. (2012). Department of Commerce, Community and Economic Development. Retrieved from Alcohol Beverage Control Board: <http://commerce.alaska.gov/dnn/abc/Home.aspx>
- 36 Rivera, M., & Khristy, P. (2012). *Analysis of strategies designed to reduce sales of alcohol and tobacco to underage persons*. Anchorage: UAA Justice Center.
- 37 State of Alaska. (2011, January). *Risk and Protective Factors for Adolescent Substance Use*. Anchorage, AK. Retrieved from [http://www.hss.state.ak.us/dbh/prevention/programs/spfsig/pdfs/Risk\\_Protective\\_Factors.pdf](http://www.hss.state.ak.us/dbh/prevention/programs/spfsig/pdfs/Risk_Protective_Factors.pdf)
- 38 Jacobs, J. E., Vernon, M. K., & Eccles, J. (2005). Activity choices in middle childhood: The roles of gender, self-beliefs, and parents' influence. *Organized activities as contexts of development: Extracurricular activities, after-school and community programs*, 235-254.
- 39 Barber, B.L., et. al. (2005). *Adolescent Participation in Organized Activities*. In, K. Moore, L. Lippman (Eds.) *What do Children Need to Flourish?* Springer pp. 133-145.
- 40 Garcia G. Sledge, S. (2012) *Exploring the Relationship between Protective Factors, Risk Behaviors and School Engagement Factors among Anchorage High School Students*. Pps 25-26 Retrieved from [http://www.aydc.org/youth\\_data.asp](http://www.aydc.org/youth_data.asp)
- 41 State of Alaska. (2011). *Alaska School Health and Safety Framework*. Juneau: Department of Education & Early Development.
- 42 Bonnie, R. J., & O'Connell, M. E. (2004). *Reducing Underage Drinking: A Collective Responsibility*. Washington D.C.: The National Academies Press.
- 43 University of Alaska Anchorage. (2011). *Drug Free Schools and Communities Act 2009-2011 Biennial Review*. Anchorage: Dean of Students Office.
- 44 State of Alaska. (2011, January). *Risk and Protective Factors for Adolescent Substance Use*. Anchorage, AK. Retrieved from [http://www.hss.state.ak.us/dbh/prevention/programs/spfsig/pdfs/Risk\\_Protective\\_Factors.pdf](http://www.hss.state.ak.us/dbh/prevention/programs/spfsig/pdfs/Risk_Protective_Factors.pdf)
- 45 State of Alaska. (2009). *State of Alaska Plan to Reduce & Prevent Underage Drinking*. Anchorage: State of Alaska, Department of Health and Social Services.
- 46 Compton, M. T. (2010). *Clinical Manual of Prevention in Mental Health*. Arlington: American Psychiatric Publishing, Inc.
- 47 Bonnie, R. J., & O'Connell, M. E. (2004). *Reducing Underage Drinking: A Collective Responsibility*. Washington D.C.: The National Academies Press.
- 48 Brown, E. C., Catalano, R. F., Fleming, C. B., Haggerty, K. P., & Abbott, R. D. (2005). *Adolescent Substance Use Outcomes in the Raising Healthy Children Project: A Two-Part Latent Growth Curve Analysis*. *Journal of Consulting and Clinical Psychology*, 699-710.
- 49 Sherman, D. (2010). *A Paradigm Shift in Selecting Evidence-Based Approaches for Substance Abuse Prevention*. *Prevention Tactics*. Santa Rosa, California: Center for Applied Research Solutions.
- 50 State Suicide Prevention Council. (2012). Retrieved from *Casting the Net Upstream*: [http://www.hss.state.ak.us/suicideprevention/pdfs/sspc/SSPC\\_2012-2017.pdf](http://www.hss.state.ak.us/suicideprevention/pdfs/sspc/SSPC_2012-2017.pdf)
- 51 National Prevention Council. (2011). *National Prevention Strategy*. Washington D.C. : U.S. Department of Health and Human Services, Office of the Surgeon General.
- 52 National Institute on Alcohol Abuse and Alcoholism. (n.d.). *Alcohol Screening and Brief Intervention for Youth: A Practitioner's Guide*. Retrieved from <http://pubs.niaaa.nih.gov/publications/Practitioner/YouthGuide/YouthGuideOrderForm.htm>
- 53 Recover Alaska. (2011). *Recover Alaska Strategic Plan July 2011*. Anchorage, Alaska: Recover Alaska.
- 54 Windle, M., & Zucker, R. A. (2010). *National Institute on Alcohol Abuse and Alcoholism*. Retrieved 2012, from *Reducing Underage and Young Adult Drinking*: <http://pubs.niaaa.nih.gov/publications/arh40/29-44.htm>
- 55 U.S. Department of Health and Human Services. (2010). *To Live To See The Great Day That Dawns: Preventing Suicide by American Indian and Alaska Native Youth and Young Adults*. Rockville: Center for Mental Health Services, Substance Abuse and Mental Health Services Administration.
- 56 Mokuau, N. (2002). *Culturally Based Interventions for Substance Use and Child Abuse Among Native Hawaiians*. *Public Health Reports*, 83-87.
- 57 Walker, R. D., Bigelow, D. A., Loudon, L., Silk-Walker, P., & Singer, M. J. (2010). *Describing Culture-Based Interventions for Suicide, Violence, and Substance Abuse*. Oregon Health & Sciences University.
- 58 U.S. Department of Health and Human Services. (2012, September 19). *Fourth R: Skills for Youth Relationships*. Retrieved from SAMHSA's National Registry of Evidence-based Programs and Practices: <http://www.nrepp.samhsa.gov/ViewIntervention.aspx?id=207>

# Alaska's Strategies to Prevent Underage Drinking

- 59 State of Alaska. (2009). State of Alaska Plan to Reduce & Prevent Underage Drinking. Anchorage: State of Alaska, Department of Health and Social Services.
- 60 Dube, S. R., Miller, J. W., Brown, D. W., Giles, W. H., Felitti, V. J., Dong, M., & Anda, R. F. (2006, April). Adverse childhood experiences and the associations with ever using alcohol and initiating alcohol use during adolescence. *Journal of Adolescent Health, 38*(4). Retrieved from <http://www.ncbi.nlm.nih.gov/pubmed/16549308?dopt=Abstract>
- 61 State Suicide Prevention Council. (2012). Retrieved from Casting the Net Upstream: [http://www.hss.state.ak.us/suicideprevention/pdfs\\_sspc/SSPC\\_2012-2017.pdf](http://www.hss.state.ak.us/suicideprevention/pdfs_sspc/SSPC_2012-2017.pdf)
- 62 Recover Alaska. (2011). Recover Alaska Strategic Plan July 2011. Anchorage, Alaska: Recover Alaska.
- 63 National Prevention Council. (2011). National Prevention Strategy. Washington D.C. : U.S. Department of Health and Human Services, Office of the Surgeon General.
- 64 Walton, M. A., Chermack, S. T., Shope, J. T., Bingham, C. R., Zimmerman, M. A., Blow, F. C., & Cunningham, R. M. (2010). Effects of a Brief Intervention for Reducing Violence and Alcohol Misuse Among Adolescents, A Randomized Controlled Trial. *Journal of American Medical Association, 527-535*.
- 65 Anda, R. (n.d.). The Health and Social Impacts of Growing up with Adverse Childhood Experiences.
- 66 Dube, S. R., Miller, J. W., Brown, D. W., Giles, W. H., Felitti, V. J., Dong, M., & Anda, R. F. (2006, April). Adverse childhood experiences and the associations with ever using alcohol and initiating alcohol use during adolescence. *Journal of Adolescent Health, 38*(4). Retrieved from <http://www.ncbi.nlm.nih.gov/pubmed/16549308?dopt=Abstract>
- 67 Mrazek, P., & Ritchie, G. F. (2012). *Becoming a Preventionist: Making Prevention a Part of Your Mental Health Practice*. Alexandria, VA: National Association of State Mental Health Program Directors(NASMHPD).
- 68 Centers for Disease Control and Prevention. (2011). Public Health Action Plan to Integrate Mental Health Promotion and Mental Illness Prevention with Chronic Disease Prevention 2011-2015. Atlanta: U.S. Department of Health and Human Services.
- 69 Torgensen, K., Buttars, D., Norman, S., & Bailey, S. (2004). How drug courts reduce substance abuse recidivism. *The Journal of Law Medicine & Ethics, 32*(4), 69-72. DOI: 10.1111/j.1748-720X.2004.tb00192.x
- 70 Williams, D., Simmons, P., & Thomas, A. (2000). Predicting DUI Recidivism Following an Alcohol Safety Action Program. *Journal of Offender Rehabilitation, 32*(1/2), 129-145.
- 71 Wilson, J. J., Rojas, N., Haapanen, R., Duxbury, E., & Steiner, H. (2000). Substance Abuse and Criminal Recidivism: A Prospective Study of Adolescents. *Child Psychiatry, 31*(4), 297-312.
- 72 Dowden, C., & Brown, S. (2002). The role of substance abuse factors in predicting recidivism: A meta-analysis. *Psychology, Crime & Law, 8*(3).
- 73 Wilson, J. J., Rojas, N., Haapanen, R., Duxbury, E., & Steiner, H. (2000). Substance Abuse and Criminal Recidivism: A Prospective Study of Adolescents. *Child Psychiatry, 31*(4), 297-312.
- 74 Alaska, Department of Health and Social Services. (2006). Draft FY2006 Alaska Alcohol Safety Action program Strategic Plan. Anchorage: State of Alaska.
- 75 Substance Abuse and Mental Health Services Administration. (2011). Screening, Brief Intervention and Referral to Treatment (SBIRT) in Behavioral Health Care. Washington D.C. Retrieved from <http://www.samhsa.gov/prevention/sbirt/SBIRTwhitepaper.pdf>
- 76 Higgins-Biddle, J., Hungerford, D., & Cates-Wessel, K. (2009). Screening and Brief Interventions (SBI) for Unhealthy Alcohol Use: A Step-by-Step Implementation Guide for Trauma Centers. Atlanta: Centers for Disease Control and Prevention, National Center for Injury Prevention and Control.
- 77 State Suicide Prevention Council. (2012). Casting the Net Upstream. Retrieved from [http://www.hss.state.ak.us/suicideprevention/pdfs\\_sspc/SSPC\\_2012-2017.pdf](http://www.hss.state.ak.us/suicideprevention/pdfs_sspc/SSPC_2012-2017.pdf)
- 78 US Department of Health and Human Services. (2007). The Surgeon General's Call to Action to Prevent and Reduce Underage Drinking. Maryland: Office of Surgeon General.
- 79 Robert Wood Johnson Foundation. (2006). Building Successful Coalitions to Address Underage Drinking, A Step-By-Step Guide. New Jersey: Robert Wood Johnson Foundation.
- 80 U.S. Department of Health and Human Services. (2010). Focus on Prevention. HHS Publication no. (SMA) 10-4120. Maryland: Center for Substance Abuse Prevention, Substance Abuse and Mental Health Services Administration.
- 81 Substance Abuse and Mental Health Services Administration. (2012). Substance Abuse Prevention Skills Training (SAPST), Building Our Behavioral Health Workforce. Center for the Application of Prevention Technologies.
- 82 International Certification and Reciprocity Consortium. (2010, December). Credentialing of Prevention Professionals Is a Critical Component to Implementing National Health Care Reform. Harrisburg: International Certification and Reciprocity Consortium.
- 83 Alaska Strategic Prevention Framework State Incentive Grant Advisory Group. (2011). Moving Prevention Upstream. Juneau: Alaska Department of Health and Social Services.
- 84 Crozier, M. K., & Gressard, C. F. (2005). A National Study of Substance Abuse Prevention Professionals in Higher Education. *Journal of Alcohol & Drug Education, 43-65*.
- 85 Piper, D., Stein-Seroussi, A., Flewelling, R., Orwin, R. G., & Buchanan, R. (2012). Assessing state substance abuse prevention infrastructure through the lens of CSAP's Strategic Prevention Framework. *Evaluation and Program Planning, 66-77*.
- 86 Office of National Drug Control Policy. (2012). Drug Free Communities Support Program. Retrieved from The White House: <http://www.whitehouse.gov/ondcp/drug-free-communities-support-program>
- 87 National Research Council and Institute of Medicine. (2009). Preventing Mental, Emotional, and Behavioral Disorders Among Young People. Washington D.C. : National Academies Press.
- 88 The National Center on Addiction and Substance Abuse at Columbia University (2012) The Importance of Family Meals VIII. Retrieved from: <http://www.casacolumbia.org/upload/2012/2012924familydinnersVIII.pdf>

# Alaska's Strategies to Prevent Underage Drinking

---

- 89 Eisenberg, M. et al. (2004) Correlations Between Family Meals and Psychosocial Well-being Among Adolescents Arch Pediatr Adolesc Med. 2004;158(8):792-796.
- 90 Garcia G. Sledge, S. (2012) Exploring the Relationship between Protective Factors, Risk Behaviors and School Engagement Factors among Anchorage High School Students. Pgs 25-26 Retrieved from [http://www.aydc.org/youth\\_data.asp](http://www.aydc.org/youth_data.asp)
- 91 State Suicide Prevention Council. (2012). Casting the Net Upstream. Retrieved from [http://www.hss.state.ak.us/suicideprevention/pdfs\\_sspc/SSPC\\_2012-2017.pdf](http://www.hss.state.ak.us/suicideprevention/pdfs_sspc/SSPC_2012-2017.pdf)
- 92 Substance Abuse and Mental Health Services Administration, Center for Behavioral Health Statistics and Quality. (2012). The NSDUH Report: Monthly Variations in Substance Use Initiations among Adolescents. Rockville, MD.
- 93 Compton, M. T. (2010). Clinical Manual of Prevention in Mental Health. Arlington: American Psychiatric Publishing, Inc.
- 94 Howell, M. (2010). Media Plan for Reducing and Preventing Underage Drinking in Alaska. Anchorage: Alaska Injury Prevention Center.
- 95 Howell, M. (2010). Youth Underage Drinking Prevention, Parent Focus Groups. Anchorage: Alaska Injury Prevention Center.
- 96 The National Center on Addiction and Substance Abuse at Columbia University. (2012). National Survey of American Attitudes on Substance Abuse XVII: Teens. New York: QEV Analytics, Ltd.
- 97 Linkenbach, Jeffrey W., Seeds of Fire, Roots of Hope, Mill City Press, 2010.
- 98 University of Alaska Anchorage. (2011). Drug Free Schools and Communities Act 2009-2011 Biennial Review. Anchorage: Dean of Students Office.
- 99 Offices of National Drug Control Policy. (2012). Campaign Effectiveness. Retrieved from <http://www.whitehouse.gov/ondcp/campaign-effectiveness-and-rigor> not available via this path
- 100 Birckmayer, J. D., Boothroyd, R. I., Fisher, D. A., Grube, J. W., & Harold, H. D. (2008, February 8). Pacific Institute for Research and Evaluation. Retrieved from Prevention of Underage Drinking: Logic Model Documentation: <http://www.pire.org/logicmodels.htm>
- 101 White, H. R., Fleming, C. B., Kim, M. J., Catalano, R. F., & McMorris, B. J. (2008). Identifying Two Potential Mechanisms for Change in Alcohol Use among College-Attending and Non-College-Attending Emerging Adults. *Developmental Psychology*, 1625-1639.
- 102 Anderson, P. M. (2011, April 18). Suicide Among Alaska Natives. Anchorage, Alaska: Chugachmiut, Inc.
- 103 Anderson, P., Chrishom, D., & Fuhr, D. C. (2009). Effectiveness and Cost-Effectiveness of policies and programmes to reduce the harm caused by alcohol. *Lancet*, 2234-2246.
- 104 National Institute on Alcohol Abuse & Alcoholism. (2005). Environmental and Contextual Considerations. *Alcohol Research and Health*, 155-162.
- 105 The Center on Alcohol Marketing and Youth. (2012). Youth Exposure to Alcohol Advertising on Television, 2001-2009. Baltimore: Center on Alcohol Marketing and Youth.
- 106 The Center on Alcohol Marketing and Youth. (2012). State Laws to Reduce the Impact of Alcohol Marketing on Youth: Current Status and Model Policies. Baltimore: The Center on Alcohol Marketing and Youth.
- 107 Simon, M. (2008). Reducing Youth Exposure to Alcohol Ads: Targeting Public Transit. *Journal of Urban Health*, 506-516.
- 108 Linkenbach, Jeffrey W. (2010). The Positive Community Norms Workbook, July 2010.
- 109 Alcohol Research & Health. (2005). Psychosocial Processes and Mechanisms of Risk and Protection. *Alcohol Research & Health*, 143-154.
- 110 Rivera, M., & McMullen, J. (2010). Youth Alcohol Access, Consumption, and Consequences in Anchorage, Alaska: Identification of Indicators. Anchorage: University of Alaska Justice Center.
- 111 Russ, D. (2012). Multiple DUI Offenders: A Comparison between ASAP Completers and Non-Completers. unpublished.
- 112 Wagenaar, A. C., Maldonado-Molina, M. M., & Wagenaar, B. H. (2009). Effects of Alcohol Tax Increases on Alcohol-Related Disease Mortality in Alaska: Time Series Analyses from 1976-2004. *American Journal of Public Health*, 1-8.
- 113 Kania, J., & Kramer, M. (2011). Collective Impact. *Stanford Social Innovation Review*, 36-41.
- 114 Kramer, M., Parkhurst, M., & Vaidyanathan, L. (2009). Breakthroughs in Shared Measurement and Social Impact. FSG Social Impact Advisors.
- 115 Strunin, L. (2001). Assessing Alcohol consumption: developments from qualitative research methods. *Social Science and Medicine*, 215-226.
- 116 Standards of Knowledge Task Force. (2011). Standards of Knowledge for the Science of Prevention. Fairfax: Society for Prevention Research .
- 117 Wagenaar, A. C., Maldonado-Molina, M. M., & Wagenaar, B. H. (2009). Effects of Alcohol Tax Increases on Alcohol-Related Disease Mortality in Alaska: Time Series Analyses from 1976-2004. *American Journal of Public Health*, 1-8.
- 118 Underage Drinking Enforcement Training Center. (2012). Dr. Rivera honored for research on underage drinking in Alaska. Retrieved from <http://www.udetc.org/documents/judicial/201209eNews/rivera.pdf>

## Appendix C:

### Alaska Committee to Prevent Underage Drinking (ACPUD)

**Natasha Pineda**, Committee Chair  
State of Alaska  
Prevention & Early Intervention  
907-269-3781  
Natasha.pineda@alaska.gov

**Shirley Coté**  
Alcoholic Beverage Control Board  
Anchorage, Alaska 99507  
(907) 269-0350  
Shirley.cote@alaska.gov

**Lori Grassgreen**  
Alaska Network on Domestic Violence  
and Sexual Assault  
(907) 586-3650 ext. 27  
lgrassgreen@andvsa.org

**Devon Lewis**  
State of Alaska  
Prevention & Early Intervention  
(907) 465-8407  
devon.lewis@alaska.gov

**Anthony Piper**  
State of Alaska  
Alcohol Safety Action Program  
(907) 264-0735  
tony.piper@alaska.gov

**Conchita McKnight**  
State of Alaska  
Division of Juvenile Justice  
(907) 465-1389  
conchita.mcknight@alaska.gov

**Margaret L. Murphy**  
District Court Judge

**Lexi Prunella**  
State of Alaska  
Women's, Children's & Family Health  
907.269.4921  
Lexi.prunella@alaska.gov

**Patty Owen**  
State of Alaska

Department of Education & Early  
Development  
907-465-2939  
patricia.owen@alaska.gov

**Marny Rivera, Ph.D.**  
Justice Center, University of Alaska  
Anchorage  
Afmsr1@uaa.alaska.edu  
(907) 786-1126

**René Rouzan**  
Alaska Native Justice Center  
(907) 793-3550  
rrouzan@anjc.net

**Pat Sidmore**  
Alaska Board on Alcoholism & Drug Abuse  
Alaska Mental Health Board  
Research Analyst  
(907) 465-3072  
Patrick.sidmore@alaska.gov

#### Contributing Members 2011-2012:

**Patty Burley**  
**Monica Chase**  
**Leonard Devaney**  
**Bill Hogan**

#### Support Staff 2011-2013

**Wendy Sailors**, UAF BSW Practicum  
Student  
**Sherrie Wilson**, CSAP Prevention Fellow  
2010-2012



