

Alaska receives \$10.7 million for substance abuse prevention infrastructure

The Substance Abuse and Mental Health Services Administration (SAMHSA) awarded a five-year, \$10.7 million grant to DHSS, Division of Behavioral Health. The grant will focus on Alaska's ability to de-velop and promote community health and wellness by building regional and community prevention infra-structure and capacity, with a specific emphasis on prevention of substance use and abuse.

The state is required to utilize the five steps of the Strategic Prevention Framework – assessment, capacity building, planning, implementation and evaluation. The goal is to have the first three steps com-pleted by June 2010. Once the state's implementation plan has been approved by SAMHSA's Center for Substance Abuse Prevention, the state will solicit proposals from regional and/or community coalitions to develop a prevention infrastructure and capacity at the local level. These grant awards will not be for di-rect services, but for building sustainable infrastructure and capacity to prevent the consequences of alco-hol and other drug use at the community and regional level. Each sub-recipient will be required to also use the five steps of the SPF, and to develop strategies based on what the assessment data tells them—a true data driven process. Proposals will be accepted from regional/community coalitions with the ability to con-duct a thorough needs and capacity assessment; drawing on the input and commitment of the region/community at-large.

While direct program services will not be funded through these grant awards, we will encourage the utiliza-tion of environmental strategies that promote changing social and community norms, practices and policies.

We are very excited about the SPF SIG and the prevention opportunities these funds will provide to Alaska. Focusing on coalition building, community assessments, data-driven decision making, infrastruc-ture, capacity and sustainable systems change will enhance our overall prevention efforts and assist us in changing the trends of alcohol and drug use in Alaska and the devastating consequences that occur.

Working through and with coalitions is how we envision the fu-ture for community-driven prevention activities. The old way of doing business isn't getting us where we want to go—human and dollar re-sources are not abundant enough to allow individual agencies to work in isolation on a single issue. We know that social issues are intertwined, yet we continue to approach these problems as independent silos of activity.... By putting our energy and emphasis on building and sustaining community coalitions, the ability to promote healthy communities; to build strong protective factors; and to reduce risk factors will be greatly increased and the outcomes more positive and hopeful. We thank everyone who attended the training and look forward to following up with future training to continue building a strong coalition framework for

Family Risk Factors

Family history of the problem behavior - If children are raised in a family with a history of alcohol/ drug addiction, it increases the likelihood that children will also have alcohol and other drug problems. If children are raised in a family with a history of criminal activity, the risk of juvenile delinquency increases. Similarly, children who are raised by a teenage mother are more likely to become teen parents, and children of dropouts are more likely to drop out of school themselves. ^{2,4,8,11,18}

Family management problems - Poor family management practices include lack of clear expectations for behavior, failure of parents to monitor their children – knowing where they are and whom they are with, and excessively severe or inconsistent punishment.^{8,18}

Family violence and conflict - Persistent, serious conflict between primary caregivers or between caregivers and children appears to increase children's risk for all of the problem behaviors. Whether the family consists of two biological parents, a single parent, or some other primary caregiver appears to matter less than whether the children experience much conflict in their families. For example, domestic violence in a family increases the likelihood that young people will engage in delinquent behaviors and substance abuse, as well as become pregnant or drop out of school.^{8,18}

Parental attitudes favorable to substance use and other problem behavior - Parental attitudes and behaviors toward drugs, crime, and violence influence the attitudes and behaviors of their children. Parental approval of young people's moderate drinking, even under parental supervision, increases the risk that the young person will use marijuana. Similarly, children of parents who excuse them for breaking the law are more likely to develop problems with juvenile delinquency. In families where parents display violent behavior, children are at greater risk of becoming violent.^{8,18}

The Advisory Board on Alcoholism and Drug Abuse, through the Alaska Department of Health and Social Services, contracted with McDowell Group in April 2005 to update a prior study on the economic costs of alcohol and other drug abuse in Alaska.

Alcohol and other drug abuse impacts the economy in many ways. Public safety, health care, and public assistance are among the areas impacted by alcohol and other drug abuse. The extent of these impacts is evident in the level of alcohol and other drug dependency and its associated cost on the Alaska economy. According to a 1998 study, 9.7 percent of Alaska's population is dependent upon or abuses alcohol (39,596 residents), while 1.5 percent is other drug dependent (14,238 residents). The total cost of this dependence to the Alaska economy is estimated to be \$738 million during 2003. Alcohol abuse costs accounted for \$525.5 million (71 percent). Other drug abuse costs were estimated at \$212.5 million (29 percent). Costs by category include:

- \$367 million from productivity losses.
- \$154 million from criminal justice and protective services.
- \$178 million from health care.
- \$35 million from traffic crashes.
- \$4 million from public assistance.

Public Assistance and Social Services

A portion of public assistance expenditures can be attributed to alcohol and other drug abuse. Alcohol and other drug-dependent persons may qualify for public assistance because of reduced income, inability to hold a job, or disability caused by substance abuse. Costs attributed to abuse (program administration costs only) were an estimated \$4.1 million in 2003.

Press Release

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PRESS RELEASE - For Immediate Release
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SUBSTANCE ABUSE COSTS ALASKA \$614 MILLION A YEAR

New Study from McDowell Group Shows Economic Impacts

The negative economic impacts of alcohol and other drug abuse amount to about \$614 million a year in Alaska, according to a new study completed by the McDowell Group for the Governor's Advisory Board on Alcoholism and Drug Abuse (ABADA).

"This is a staggering blow to Alaska's economy, communities and families," said Advisory Board chair Eric Tomasino of Palmer. "Year after year, substance abuse and chemical dependency drain our human and economic resources."

The study looked at five basic ways in which alcohol and other drug abuse cost money: productivity losses, traffic crashes, criminal justice system and protective services, health care and public assistance. Alcohol abuse costs accounted for \$453 million per year, while other drug abuse costs were estimated at \$161 million annually.

"We have always known that alcohol and other drug abuse exacts a high human toll in Alaska," said Pam Watts, Executive Director of ABADA. "But until now, we had to rely on national studies to estimate the economic costs to our state. This report gives us strong, Alaska-specific data to use."

According to the study, lost worker productivity accounts for more than half of the annual economic impact, \$319 million per year. These losses occur when alcohol and other drug abuse results in premature death, reduced efficiency of workers through physical or mental impairment, incarceration for a criminal offenses, or inpatient treatment or hospitalization. Of the productivity losses, nearly half were due to premature death from alcohol and other drug abuse. The economic loss for 1999 for this cause alone was \$172 million, based on an annual average number of deaths related to alcohol and other drug abuse. Between 1994 and 1998, this was an average 224 deaths a year.

The Economic Costs of Alcohol and Other Drug Abuse in Alaska, Phase Two report was prepared for ABADA by McDowell Group, a research-based consulting firm in Juneau and Anchorage, with a grant from the Alaska Mental Health Trust Authority. The ABADA is appointed by the Governor to advise the Administration and Legislature on substance abuse issues.



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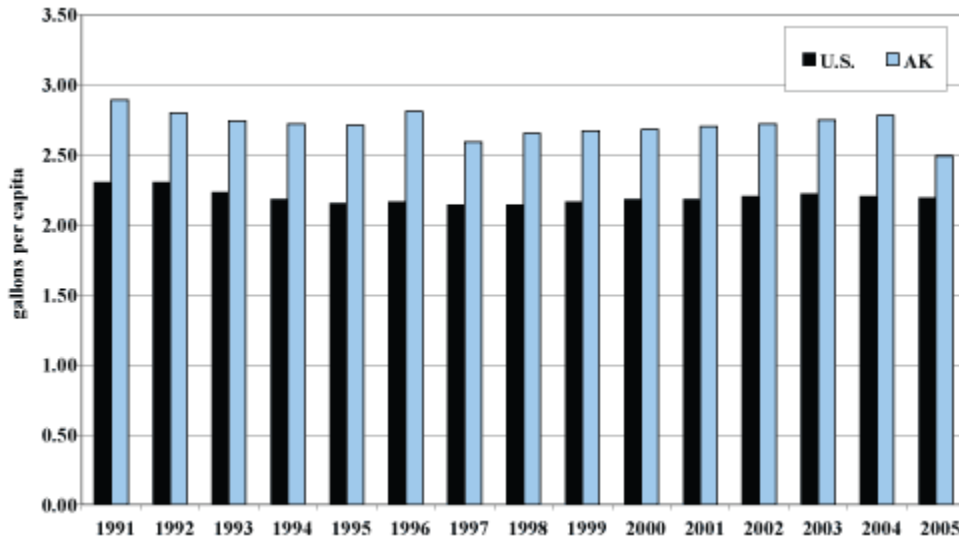
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Figure 2
U.S. and Alaska Alcohol Consumption Comparisons



Alcohol consumption rates reflect the prevalence and severity of alcohol related problems. The alcohol consumption rate in Alaska has been higher than the rate in the rest of the nation during each of the last 14 years, and is well above the [Healthy Alaskans 2010](#) goal of 2.2 gallons or less per person per year. Data from the [National Institute on Alcohol Abuse and Alcoholism \(NIAAA\)](#) indicates that Alaska remains in the highest group for alcohol consumption in the nation (per capita ethanol consumption per 10,000 people aged 14 and over). Consumption rates are calculated with in-state sales of alcoholic beverages and the state population of persons 14 years and older.

Source: Alaska Department of Revenue; Alaska DHSS Division of Behavioral Health; compiled by NCADD