

2/9/10

MAT-SU

SUBSTANCE

ABUSE

PREVEN-

TION...



**MAT-SU SUBSTANCE ABUSE PREVENTION
COALITION**

Data Project



MISSION

“Reduce substance abuse among youth and, over time, among adults by addressing the factors in a community that increase the risk of substance abuse and promoting the factors that minimize the risk of substance abuse.”

-Mat-Su Substance Abuse Coalition

Overview

1. Brief history of the coalition.
2. Description of our data project.
3. Summarize major findings and corresponding recommendations.
4. Demonstrate coalition effectiveness and describe our work.
5. Call to action.



1. BRIEF HISTORY



● 2006
Substance
Abuse
Summit

● 2007
Formation of
Mat-Su
Substance
Abuse
Prevention
Coalition

○ 2008-2009
Data Project

METHOD

Data Review

- Collection of available local data from years 2002-2007

Community Assessment

- Analysis of community data
- Development of community database
- Trends in youth substance use survey

Alaska Healthy Kids Survey



Demographic Information



Alcohol, Tobacco, and Other Drug Use



ATOD Use Correlates



Violence, Harassment, Safety & Crime



External Assets



Emotional/Physical Health

Survey Demographics

Surveys sent to 4000 youth

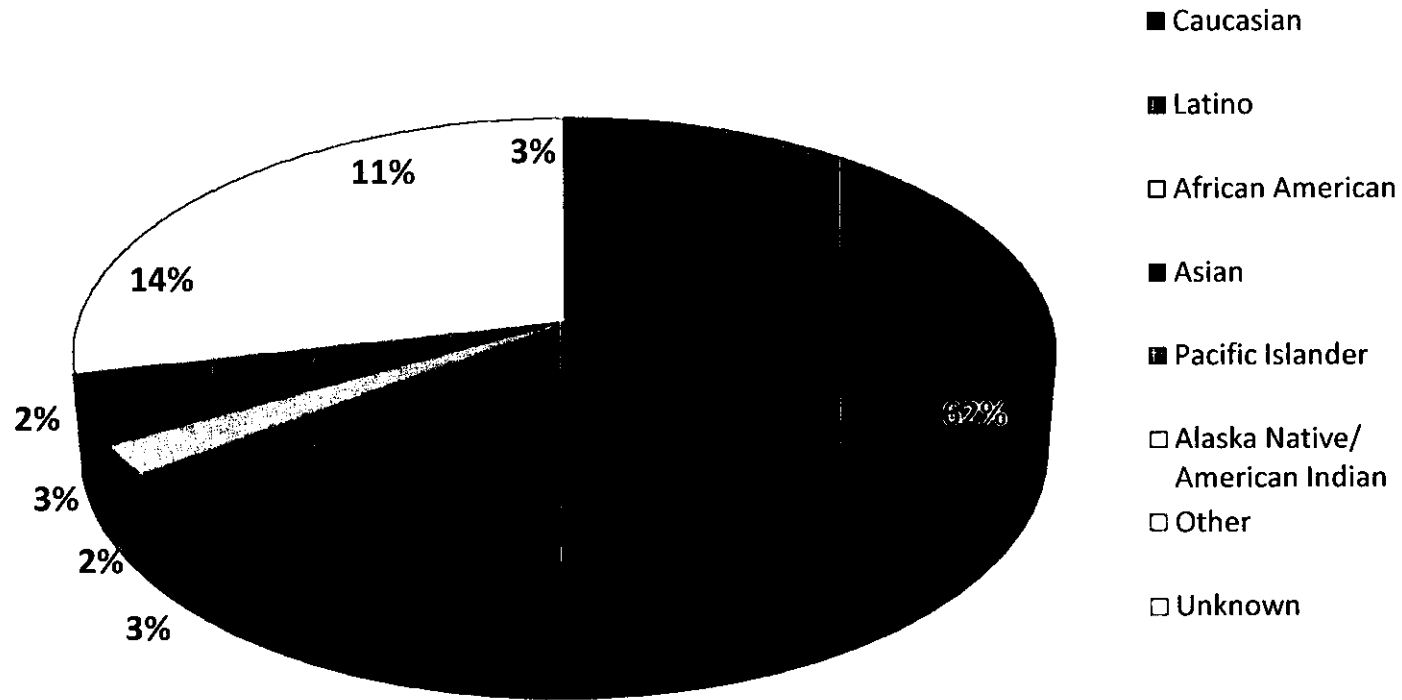
- Mat Su School District
- Christian Schools
- Non-District Home schools
- Homeless and At-Risk youth

2524 surveys received (61% response rate)

- 2435 valid responses
 - High School: n = 1650
 - Middle School: n = 800
 - Male: n= 49.7%
 - Female: n = 50.3%

Demographics

Ethnicity



Results



After receiving the 2008 Data Report which included the Alaska Healthy Kids Survey and other information about the Mat- Su Borough the Coalition decided to utilize the feedback from stakeholder groups:

1. School Groups (Students, Nurses, Principals)
2. Law Enforcement
3. Providers (Treatment)
4. Medical (Nurses/Docs)
5. Faith based Groups

(Input from over 130 community members)

Meaningful participation from adults in the community

- As defined by the following items:
 - Outside of my home and school, I am involved in music, art, literature, sports, or a hobby.
 - Outside of my home and school, I help other people.
 - Outside of my home and school, I am part of clubs, sports teams, church/temple, or other group activities.

Meaningful Participation in Community: Percentage of students by grade

Grade	Disagree/Strongly Disagree	Neutral	Agree/Strongly Agree
Middle School	24.6	55.3	20.1
High School	29.8	51.9	18.3

Meaningful participation with adults at home

- As defined by the following items:
 - At home I do fun things or go fun places with my parents or other adults.
 - At home I do things that make a difference.
 - At home I help make decisions with my family.

Meaningful Participation at Home: Percentage of students by score

Grade	Disagree/Strongly Disagree	Neutral	Agree/Strongly Agree
Middle School	24.7	50.4	25
High School	32.3	46.1	21.6

Meaningful participation with adults at school

- As defined by the following items:
 - At school I do interesting activities.
 - At school I help decide things like class activities or rules.
 - At school I do things that make a difference.

Meaningful Participation at School: Percentage of students by score

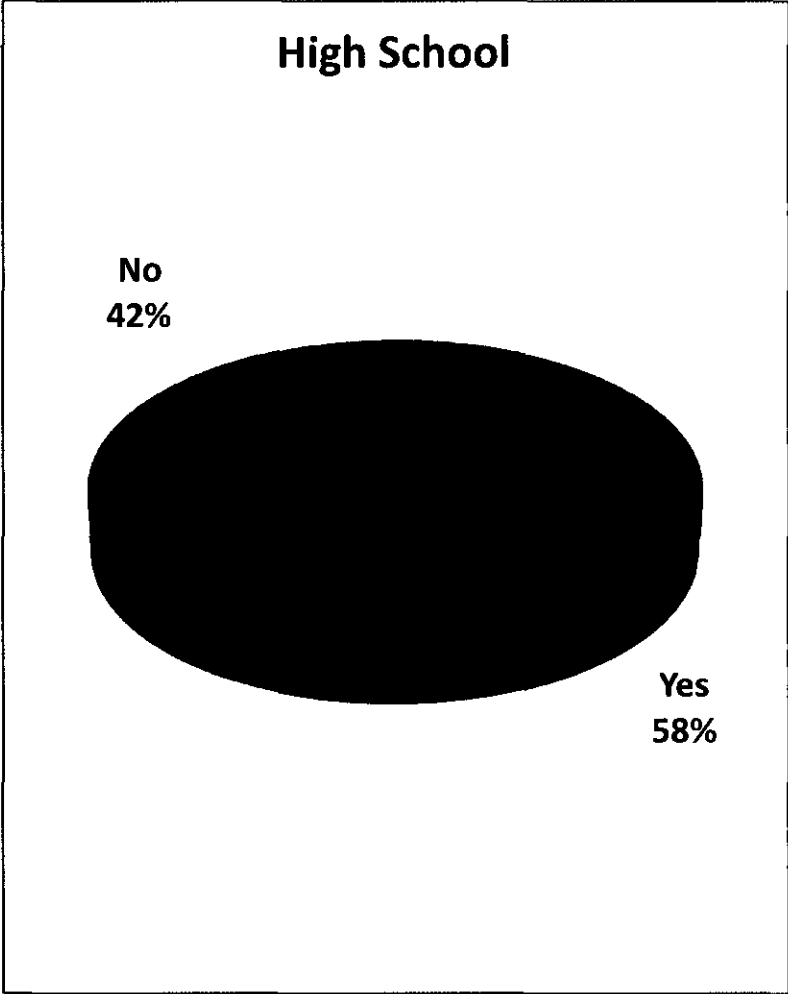
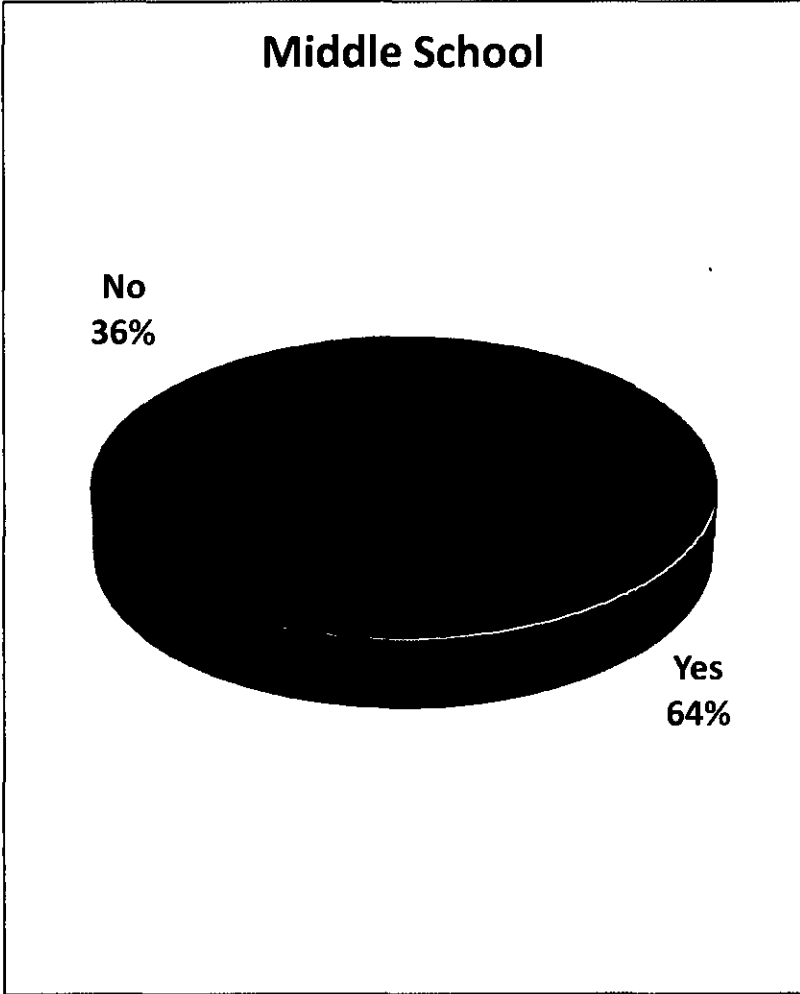
Grade	Disagree/Strongly Disagree	Neutral	Agree/Strongly Agree
Middle School	49	44.5	6.4
High School	57.0	37.5	5.5

Recommendation #1

- **Increase meaningful adult and community involvement with youth**
 - Increase the protective factors
 - Resiliency (Alaska Healthy Kids Survey, Fall 2008)



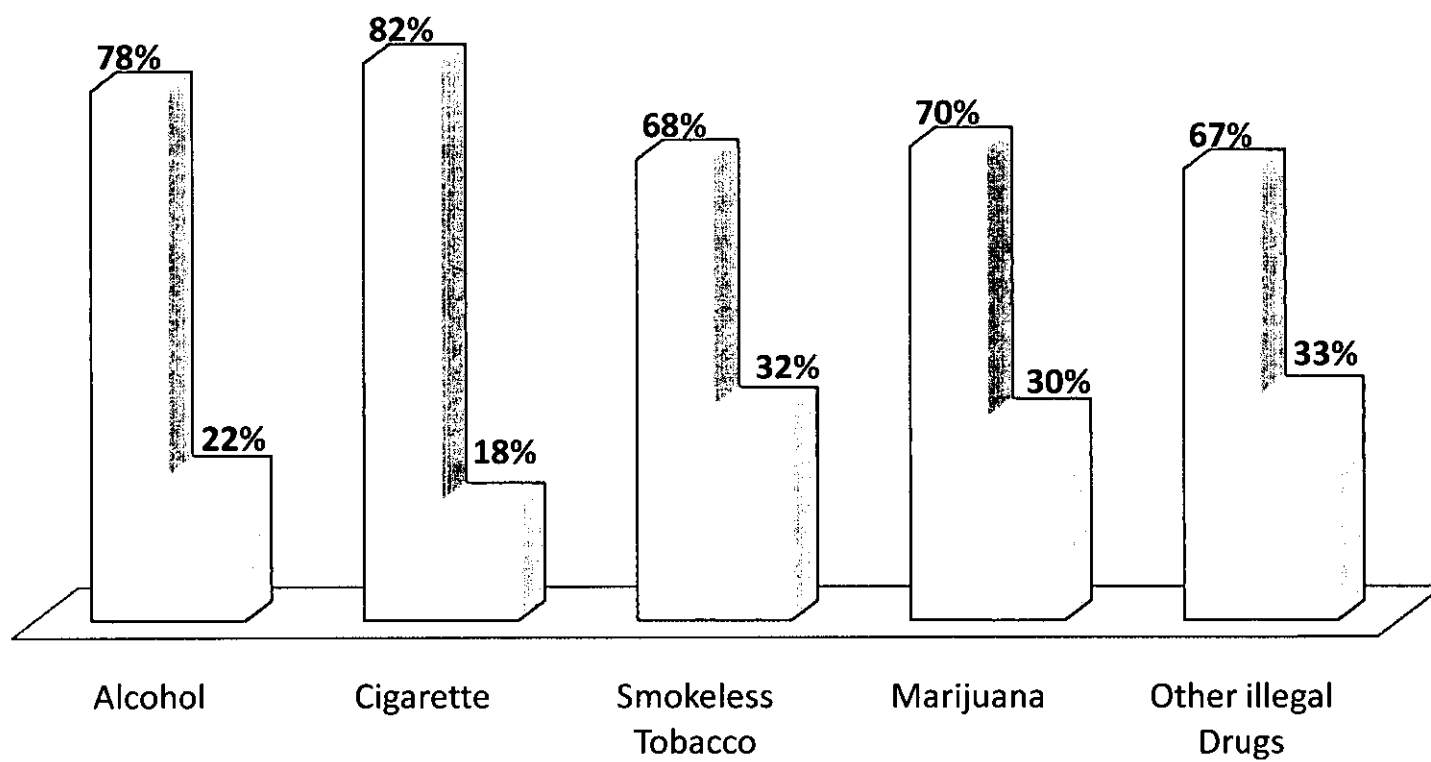
Are parents talking to their kids about substance use?



What age do our youth start using?

Age at First Use

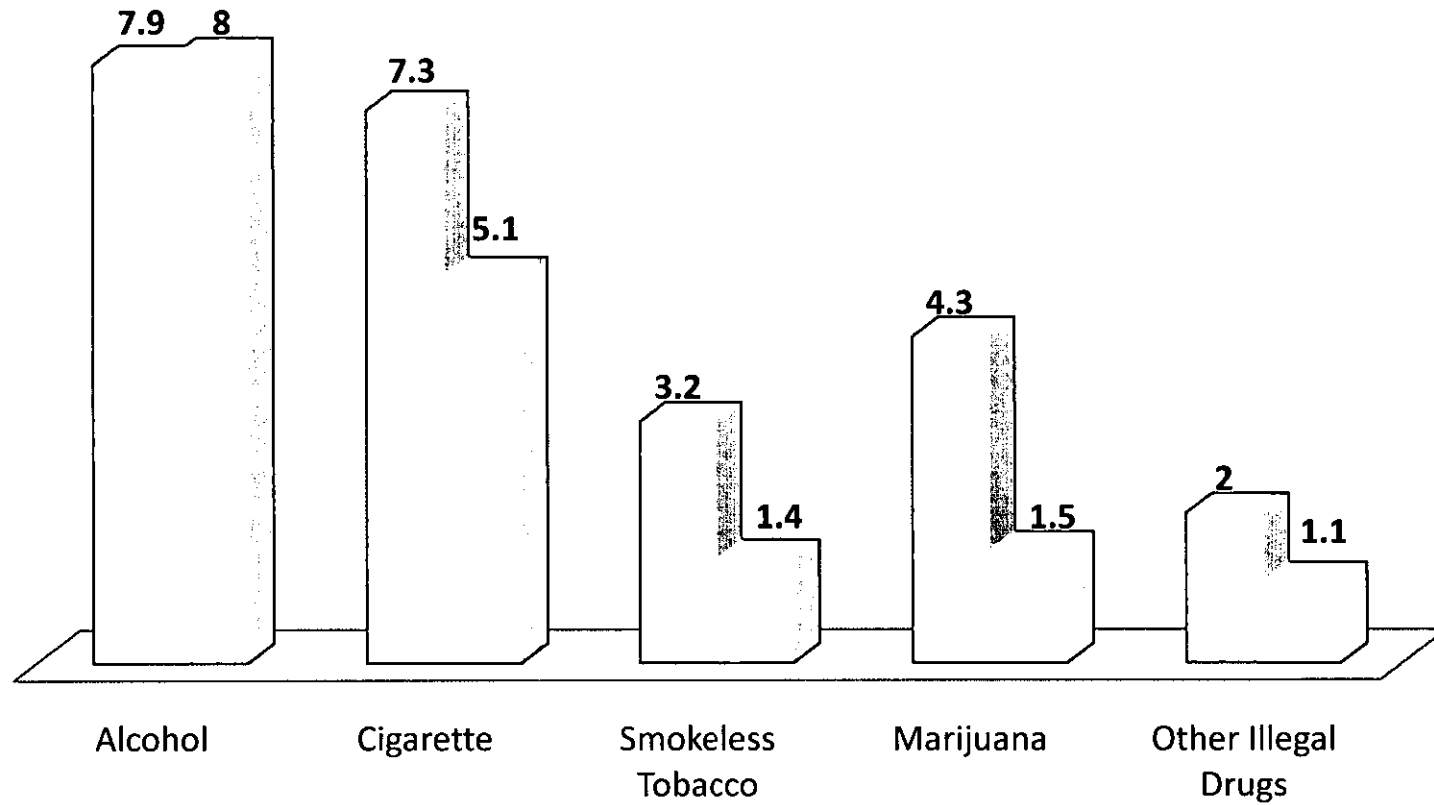
□ 14 and under □ 15-18



Age at first use

10 and Under

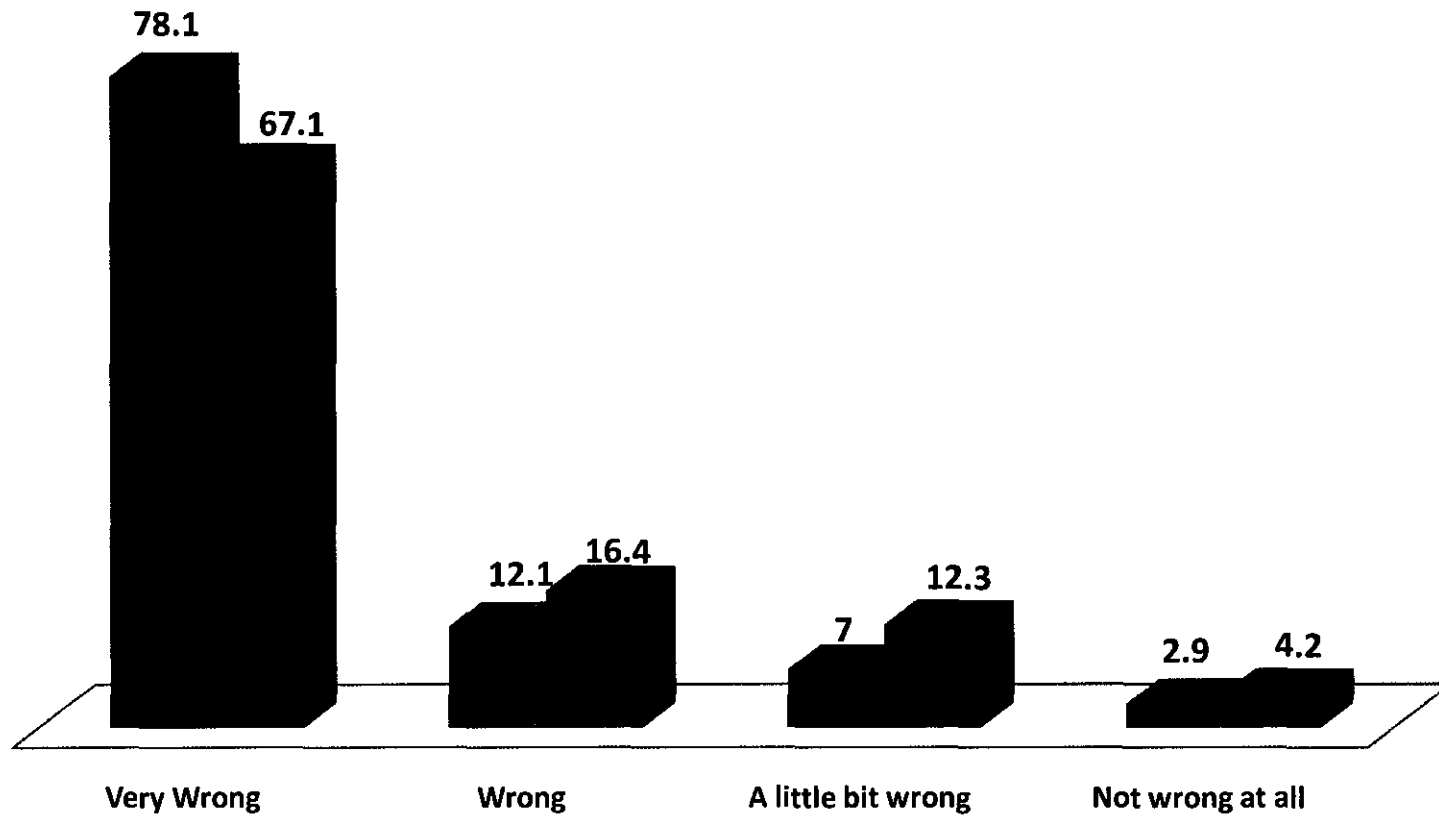
□ High School □ Middle School



Parent Perception of Use

How would your parents feel about you drinking regularly?

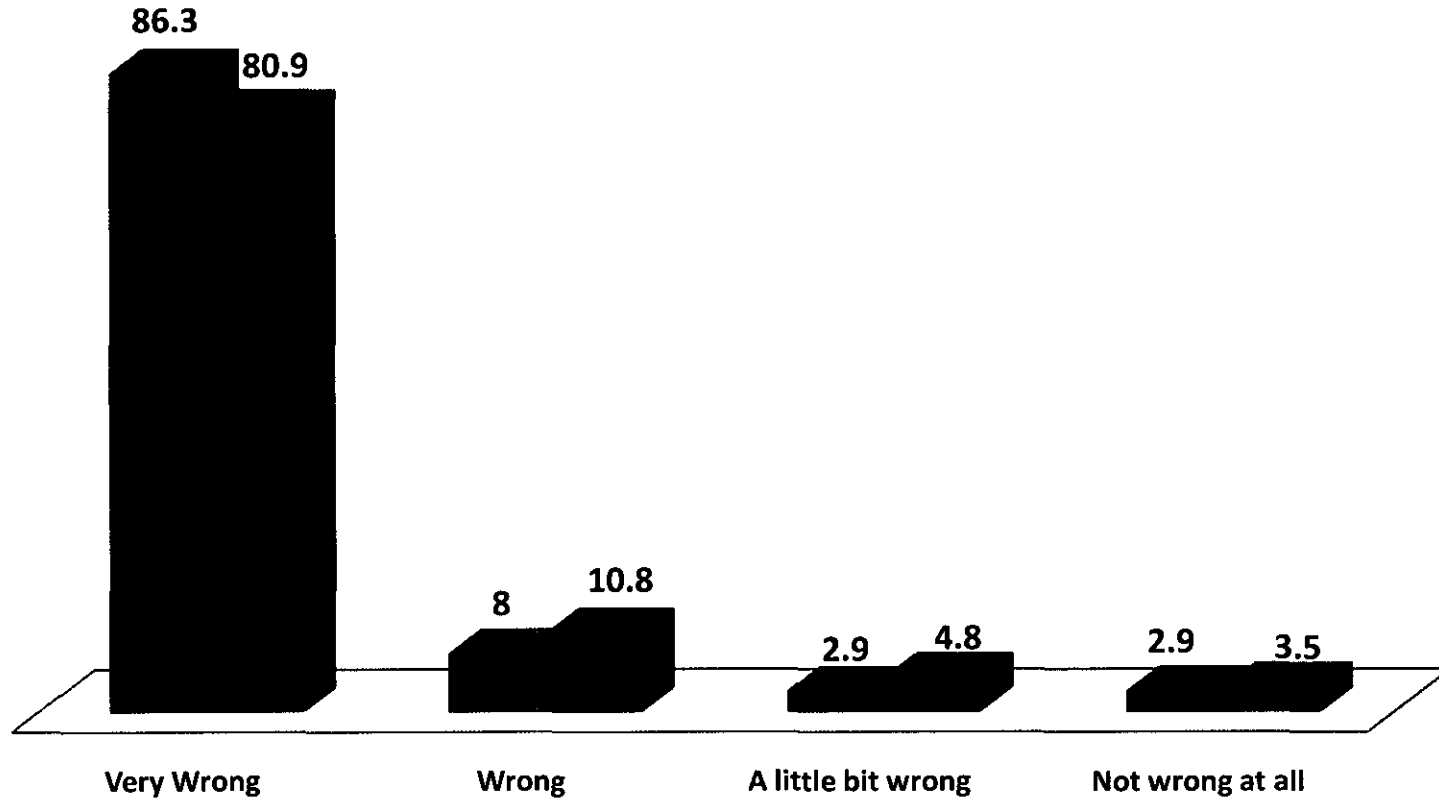
■ Middle School ■ High School



Parent Perception of Use

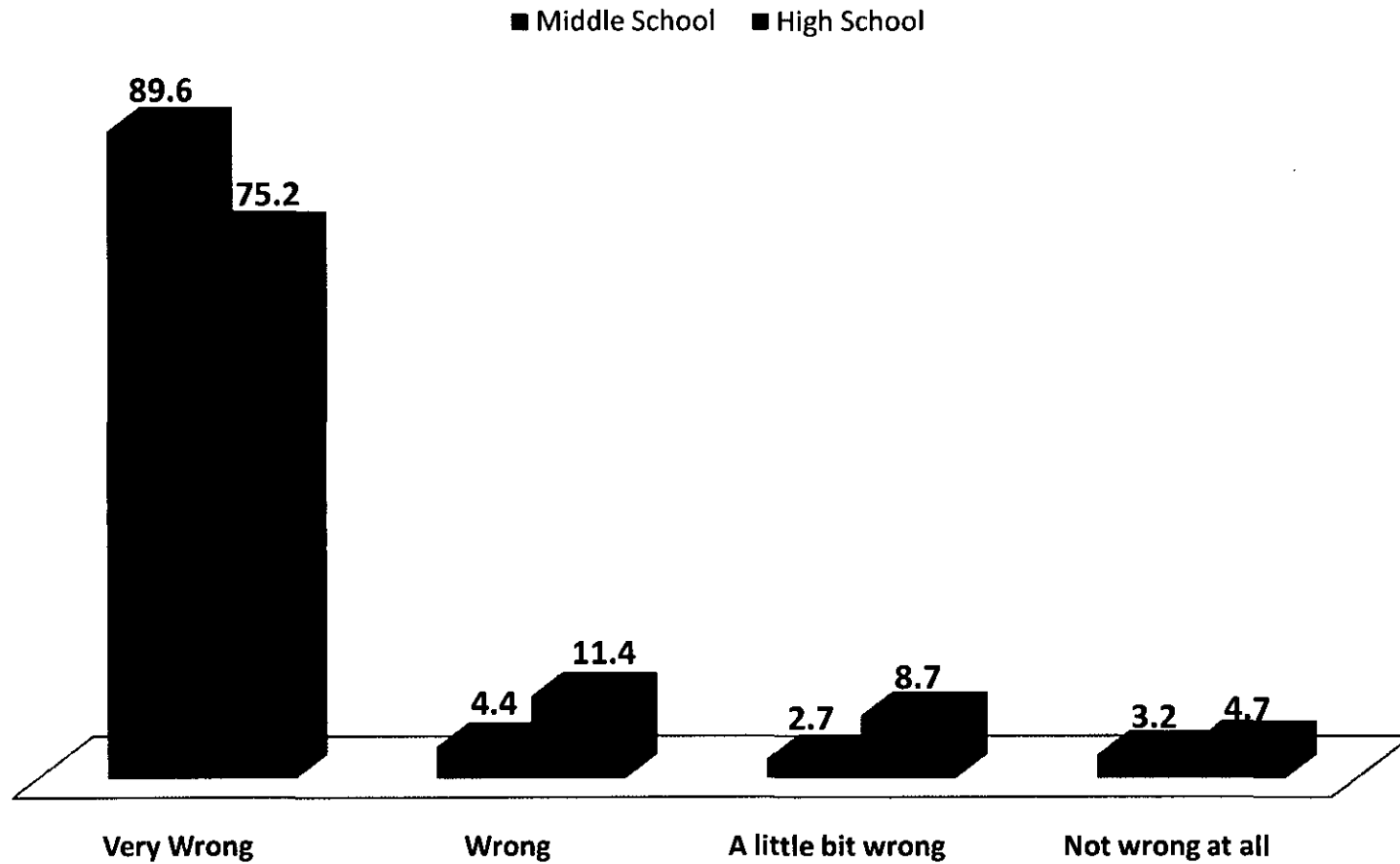
How would your parents feel about you smoking cigarettes?

■ Middle School ■ High School



Parent Perception of Use

How would your parents feel about you smoking marijuana?

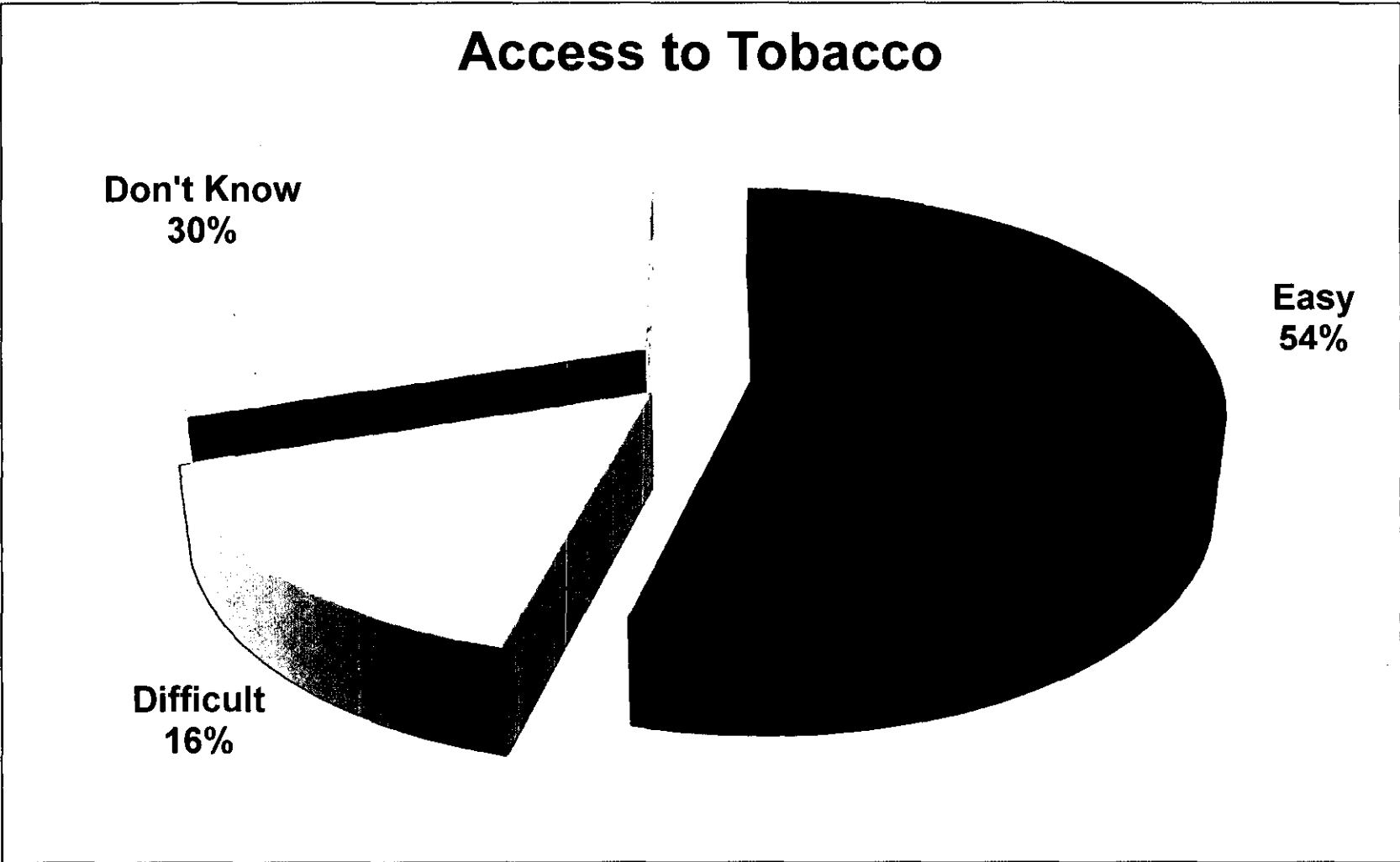


Recommendation #2



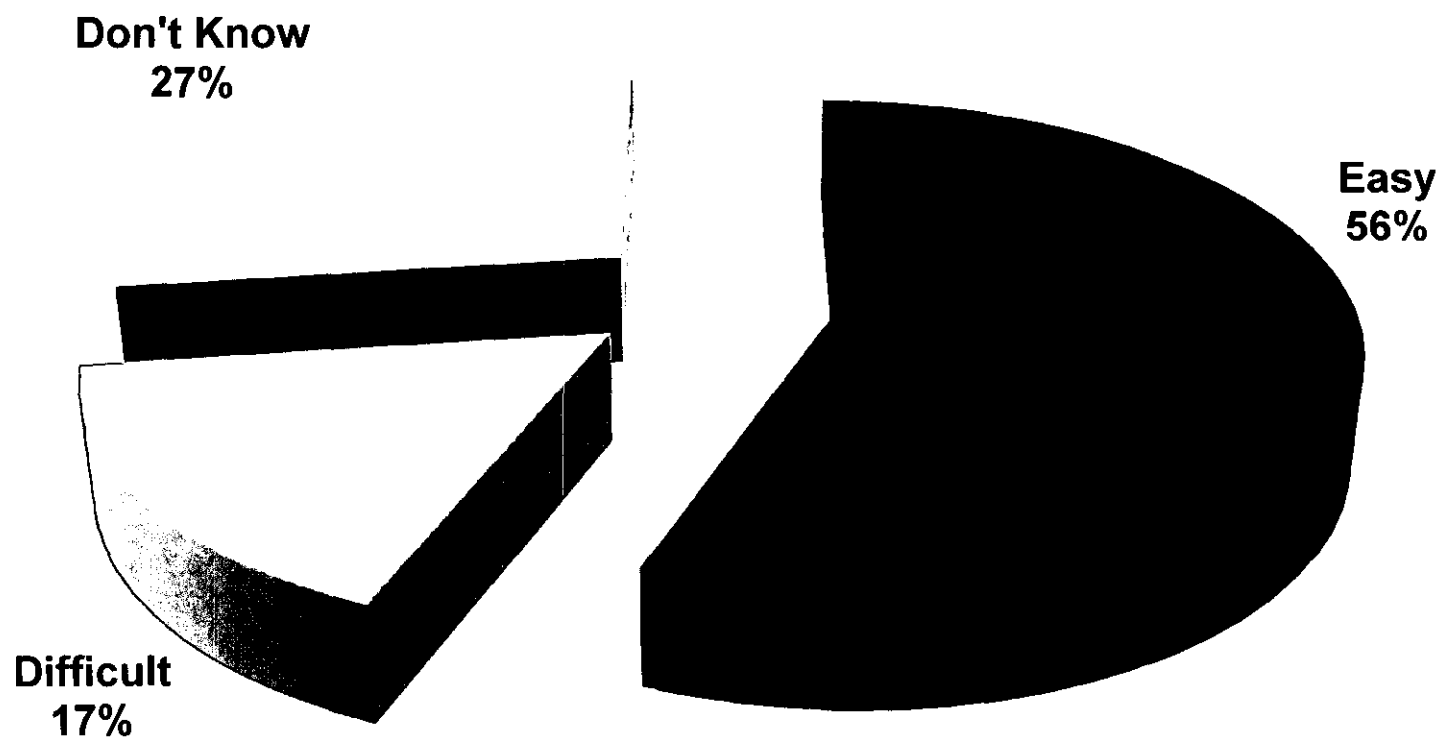
- **Increase parental involvement in prevention and early intervention measures in the Mat-Su Community**
 - Parents are an important source of information in youth decisions.
 - Having parents engaged in a more direct and meaningful way with prevention and early intervention may have a strong impact on the outcomes for our community's youth.

Are substances difficult to get?



Are substances difficult to get?

Access to Alcohol



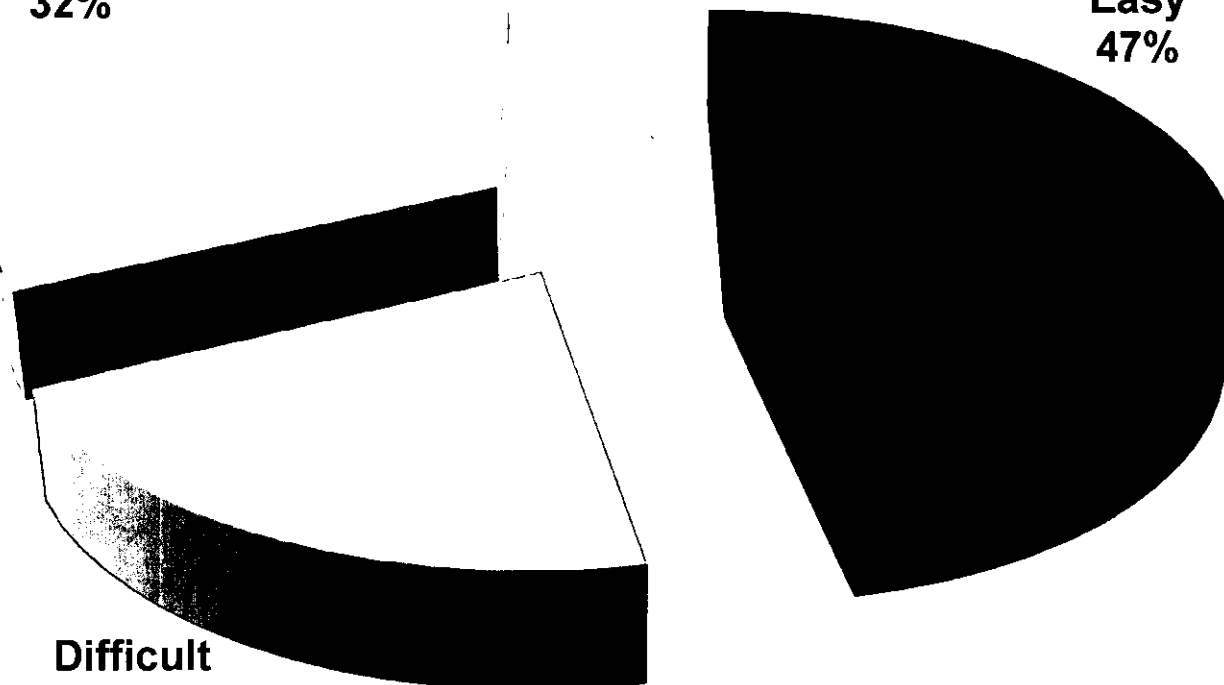
Are substances difficult to get?

Access to Marijuana

Don't Know
32%

Easy
47%

Difficult
21%



Recommendation #3

- **Reduce Access to substances**

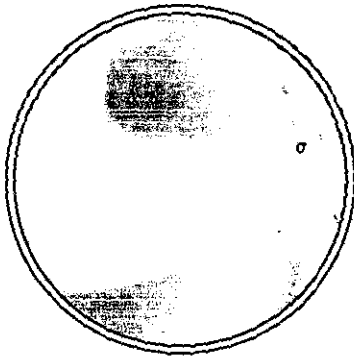
- Mat-Su youth are using a variety of substances and the reported usage is, in some cases, above state and national averages.
- The majority of students report that alcohol, tobacco and marijuana are easy to get.



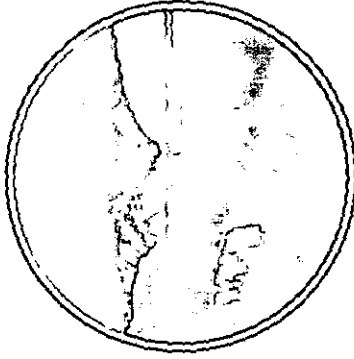
Data comparisons



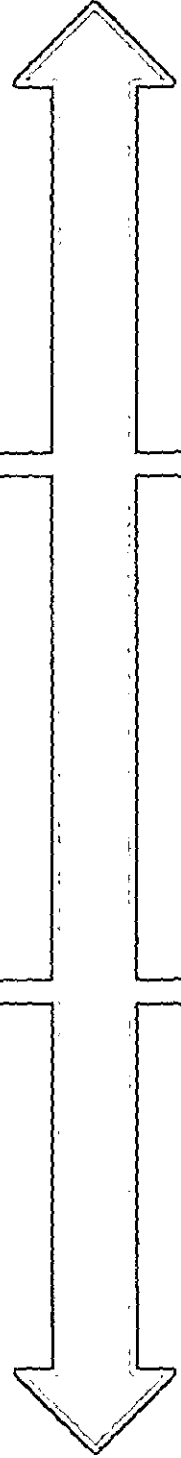
Alaska
Healthy
Kids Survey



Monitoring
the Future



Youth Risk
Behavior
Survey



Tobacco



Cancer



Cardiovascular Disease



Lung Disease



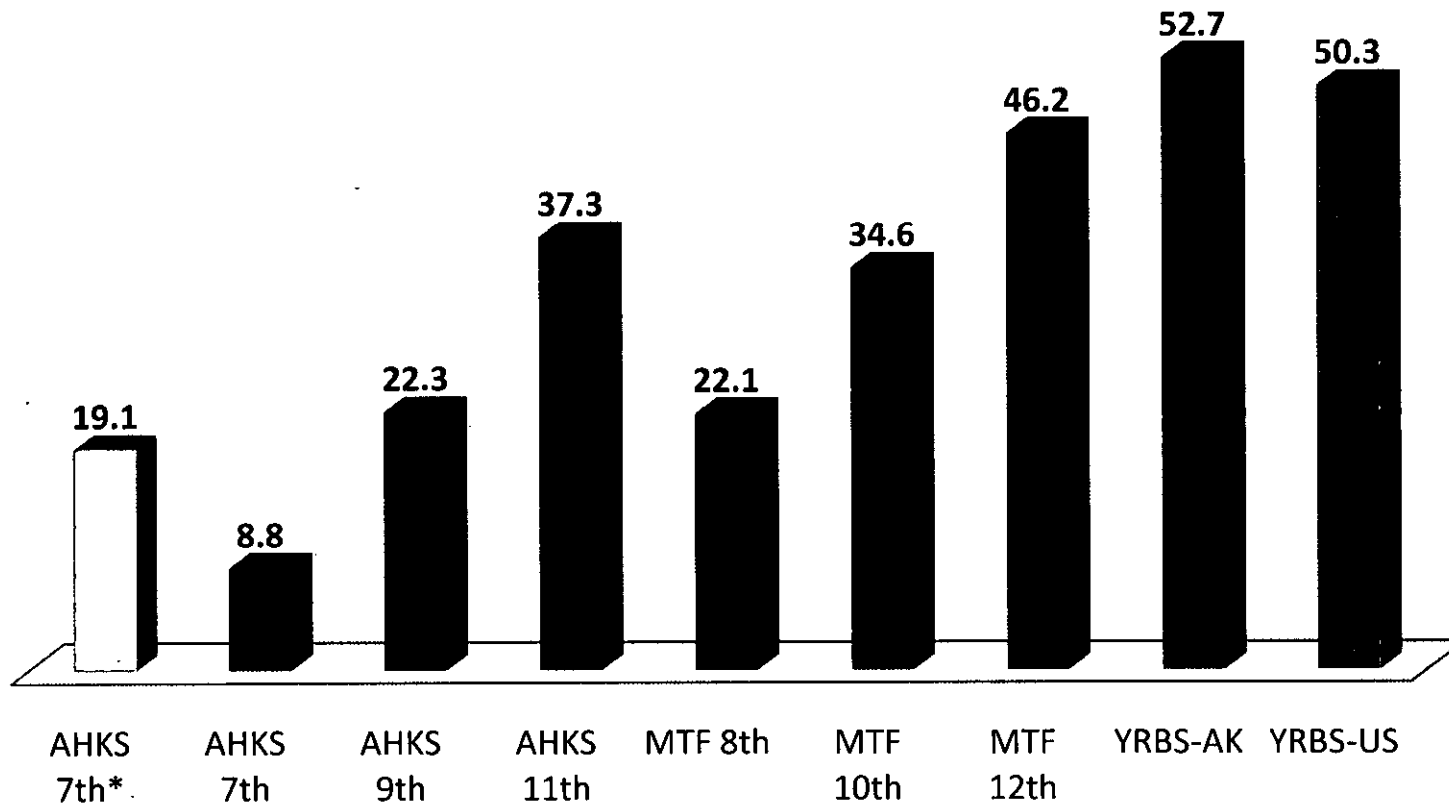
Impact on Reproductive Health



Economic Impact

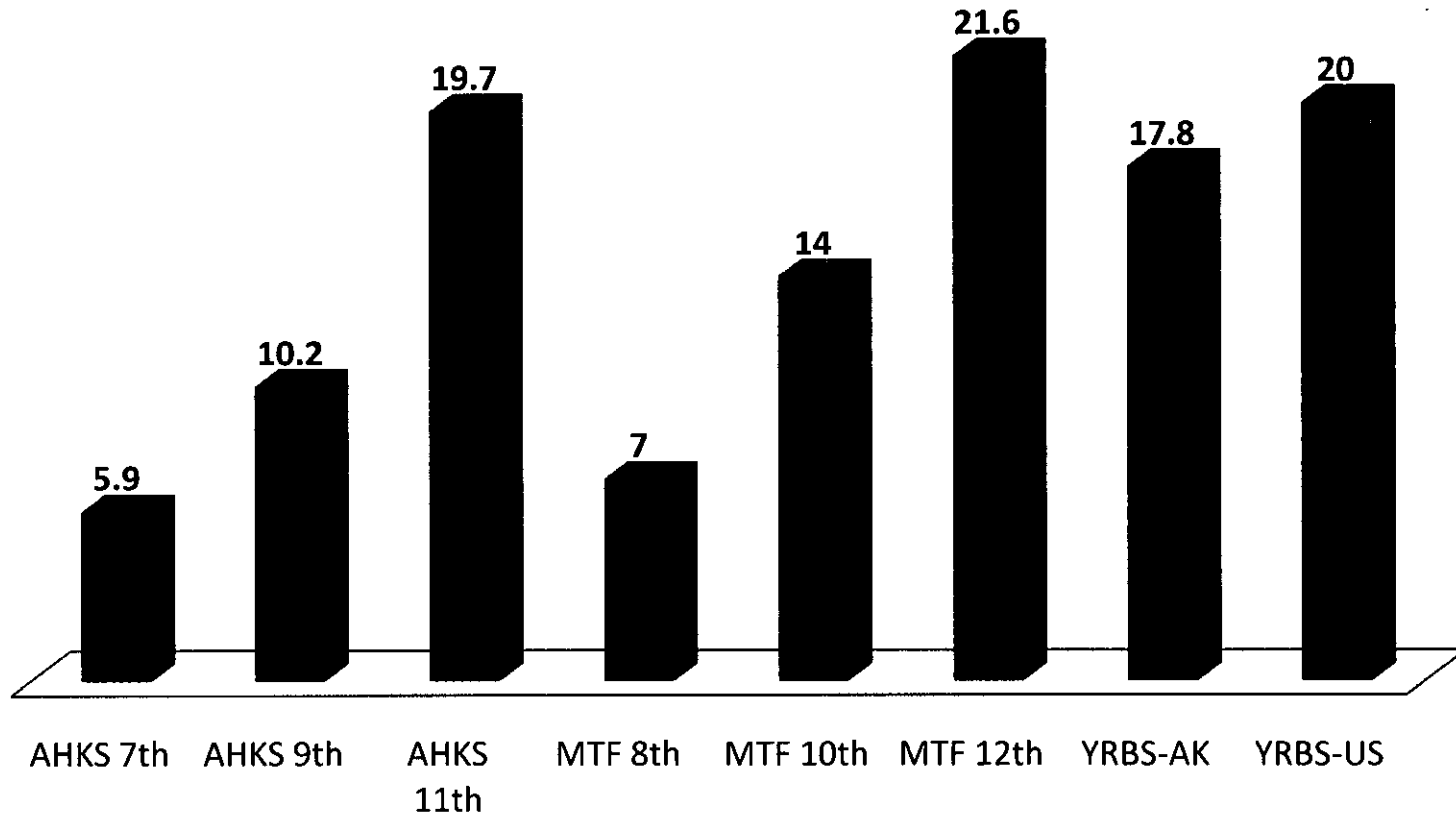
Tobacco

Lifetime Cigarette Use



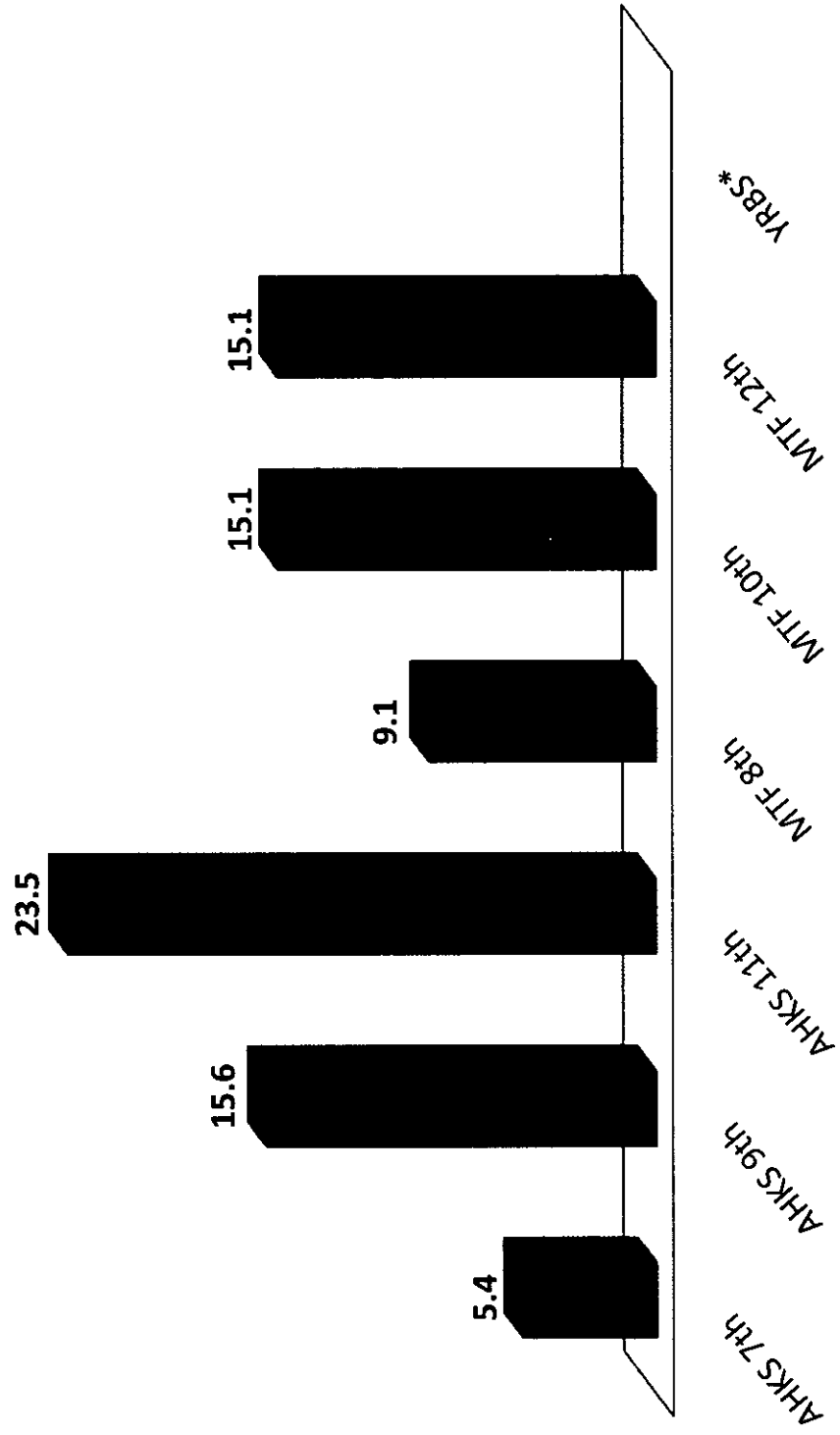
Tobacco

30 Day Cigarette Use



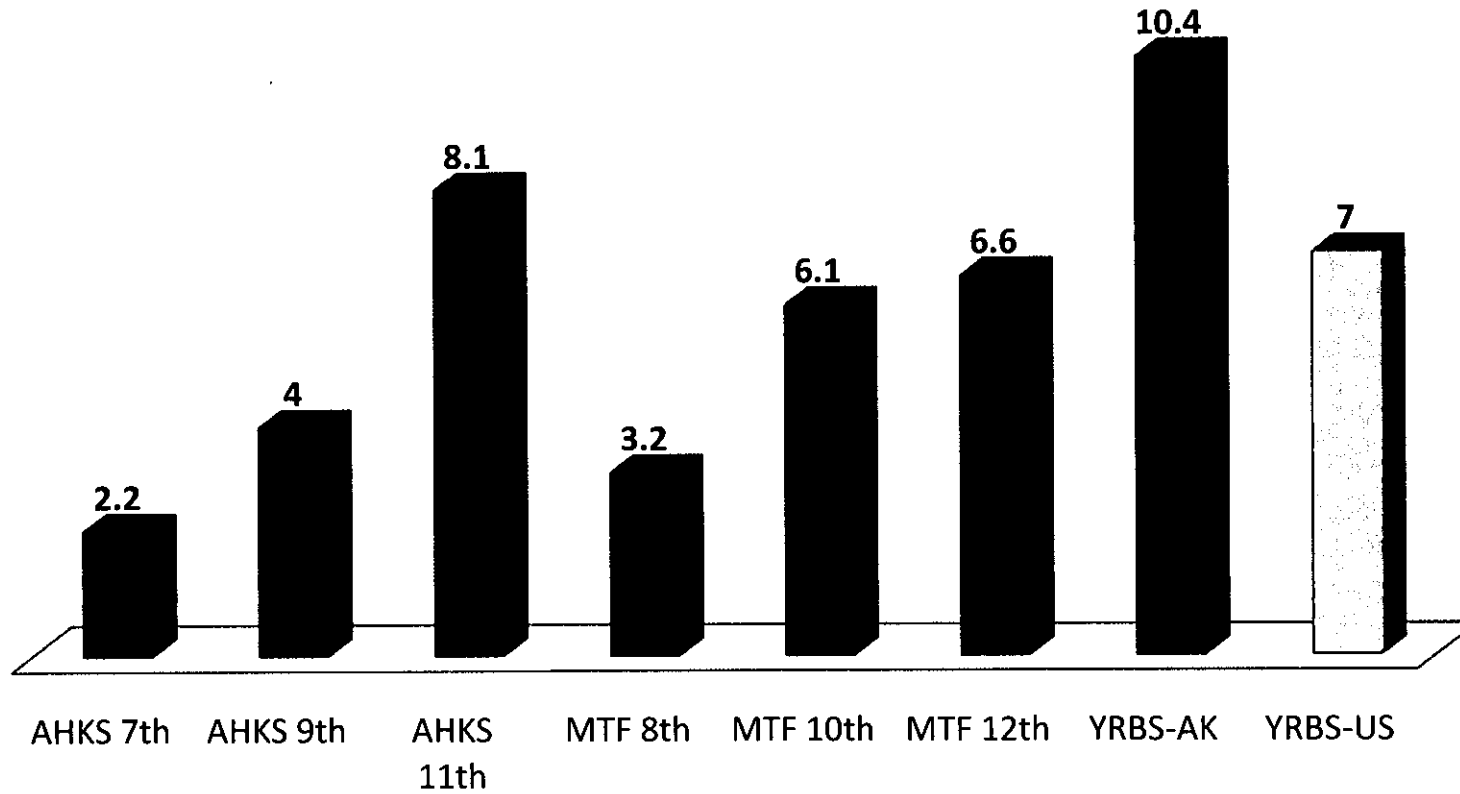
Tobacco

Lifetime Smokeless Tobacco Use

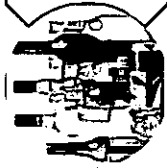


Tobacco

30 Day Smokeless Tobacco



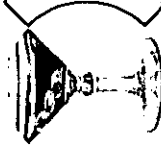
Alcohol



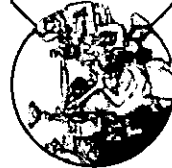
Impaired Judgment



Alcohol Induced Liver Disease



Cancer



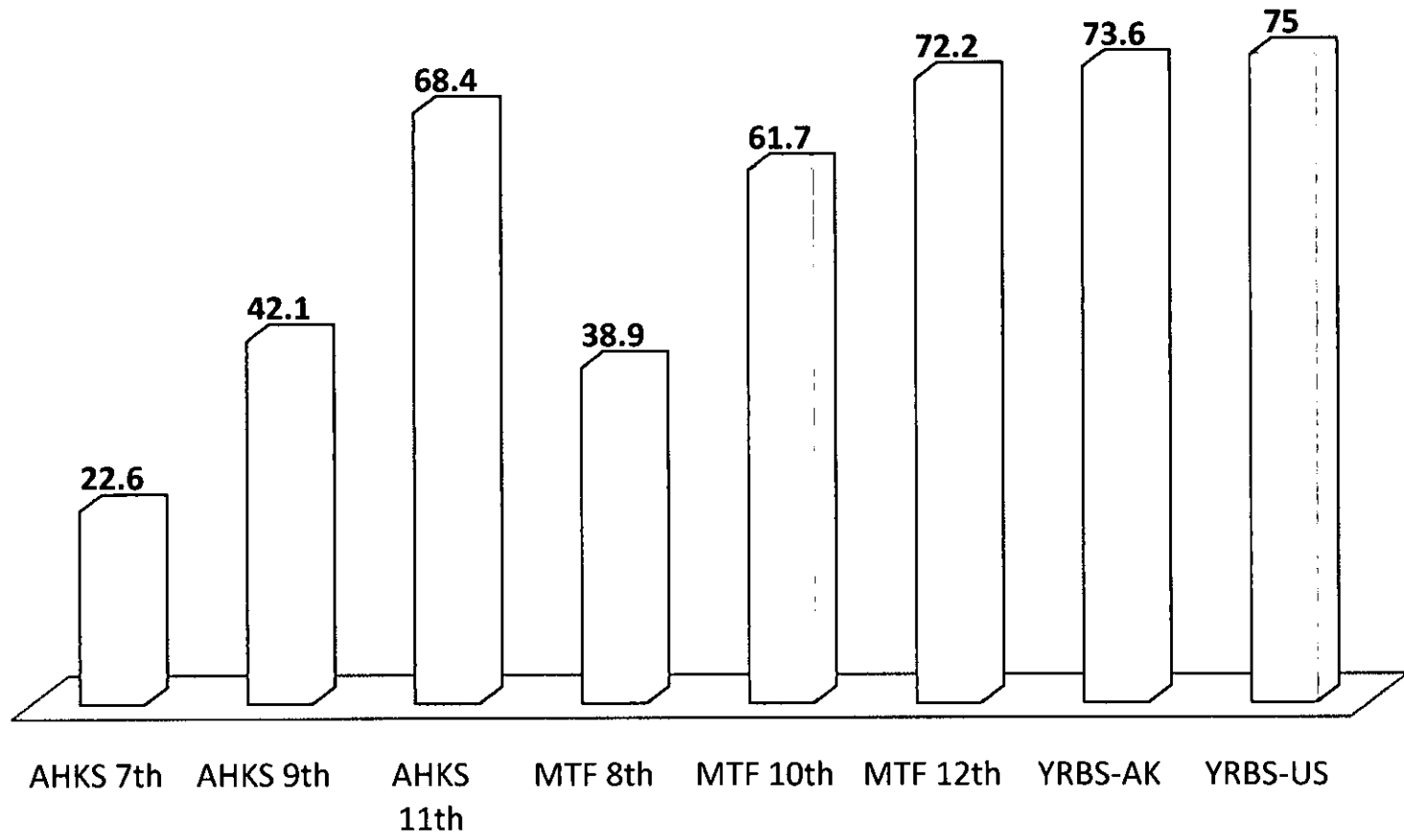
Cardiovascular Disease



Alcohol Dependence

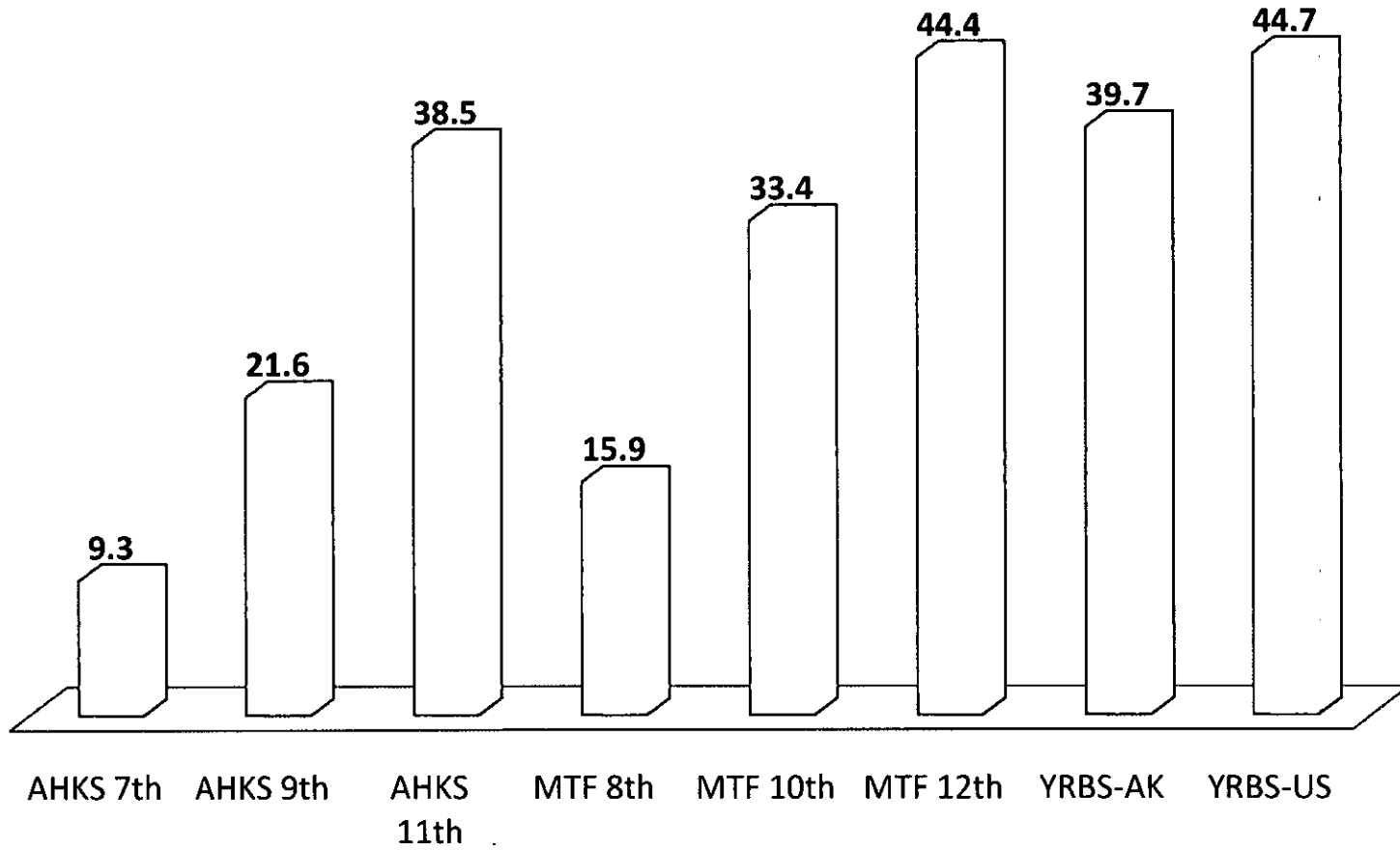
Alcohol

Lifetime Alcohol Use



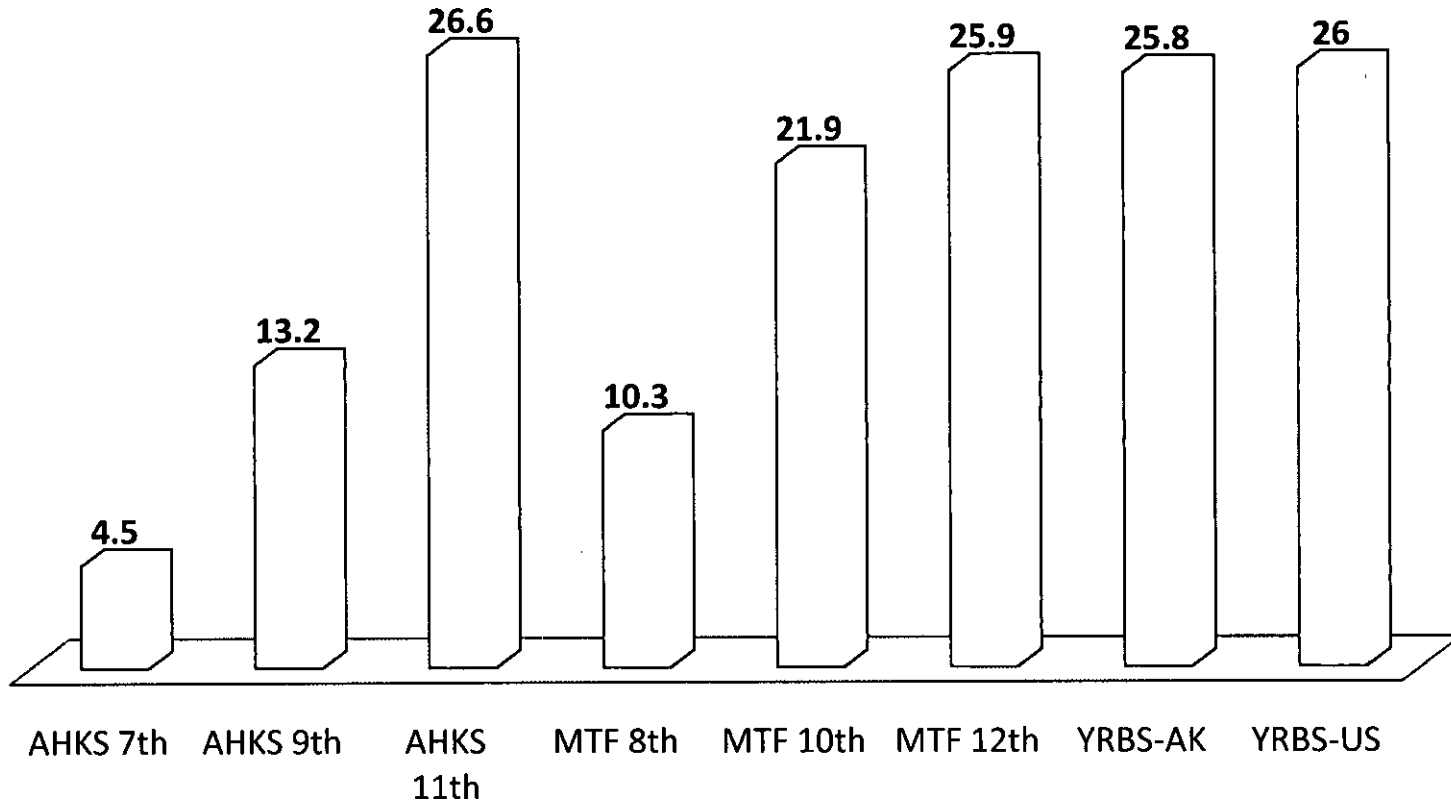
Alcohol

30 Day Alcohol Use



Alcohol

30 Day Binge Drinking



Marijuana



Impaired Judgment



Problems with Intellectual
Functioning



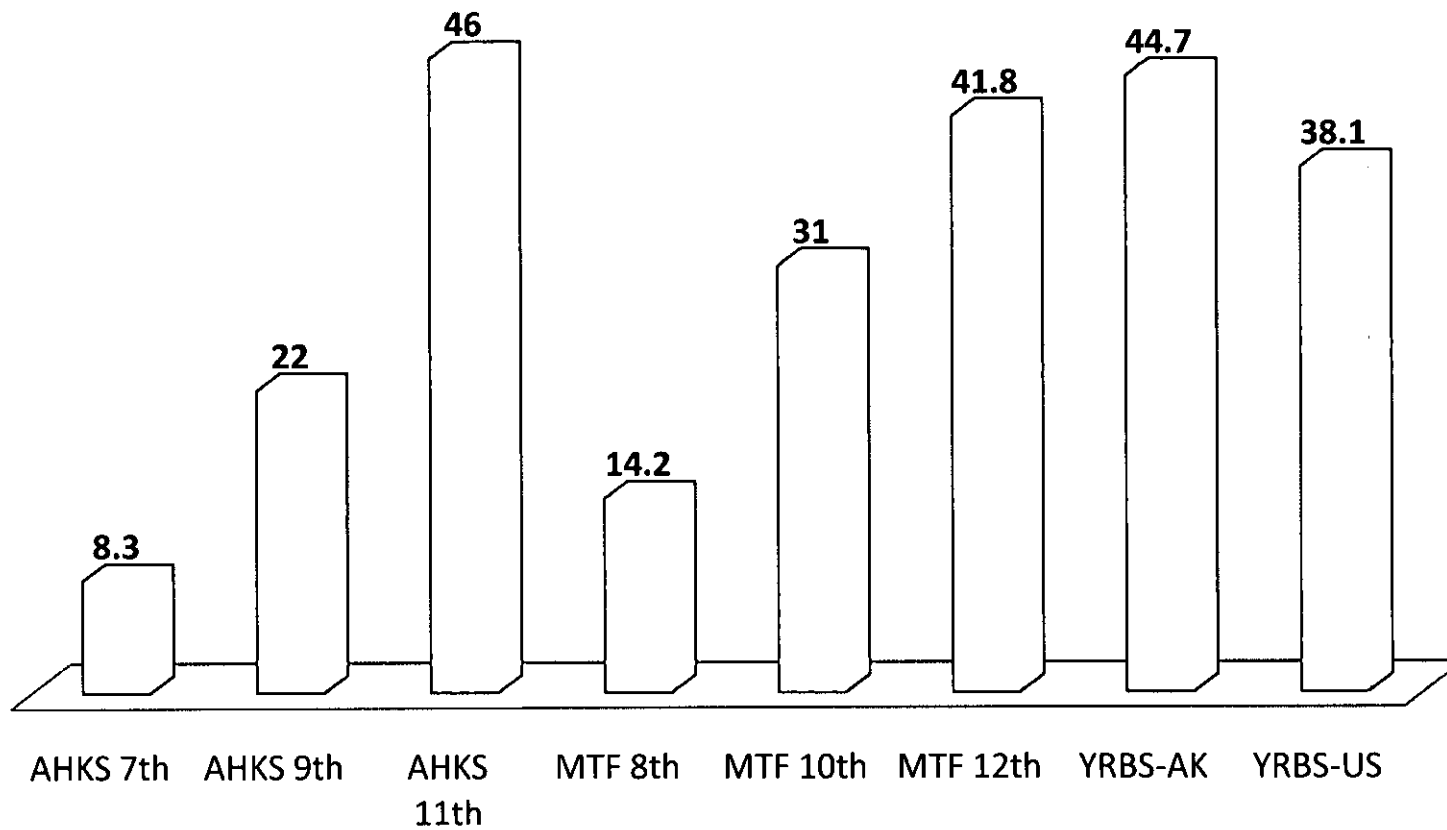
Greater Risk of Lung
Infections



Possible Cancer Link*

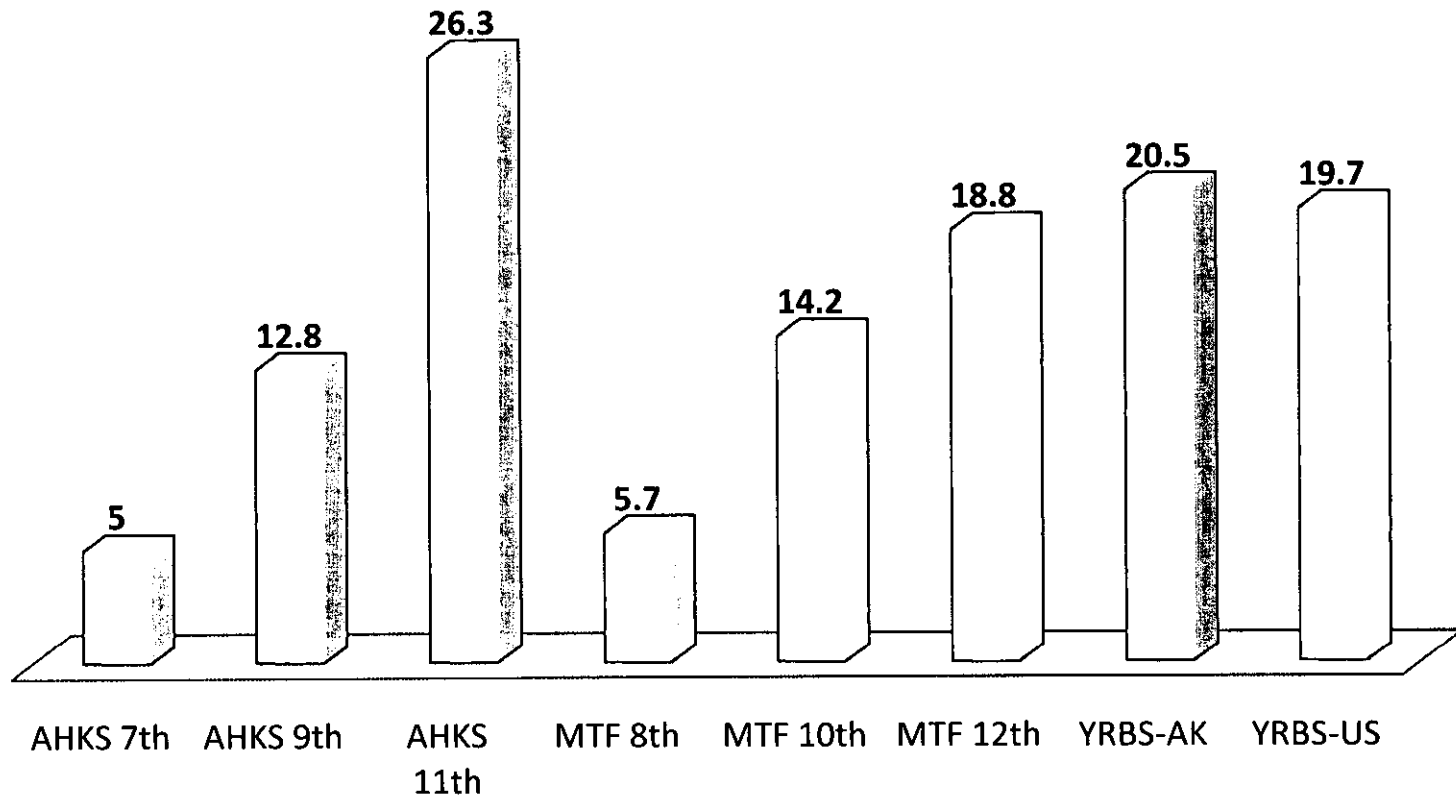
Marijuana

Lifetime Marijuana Use



Marijuana

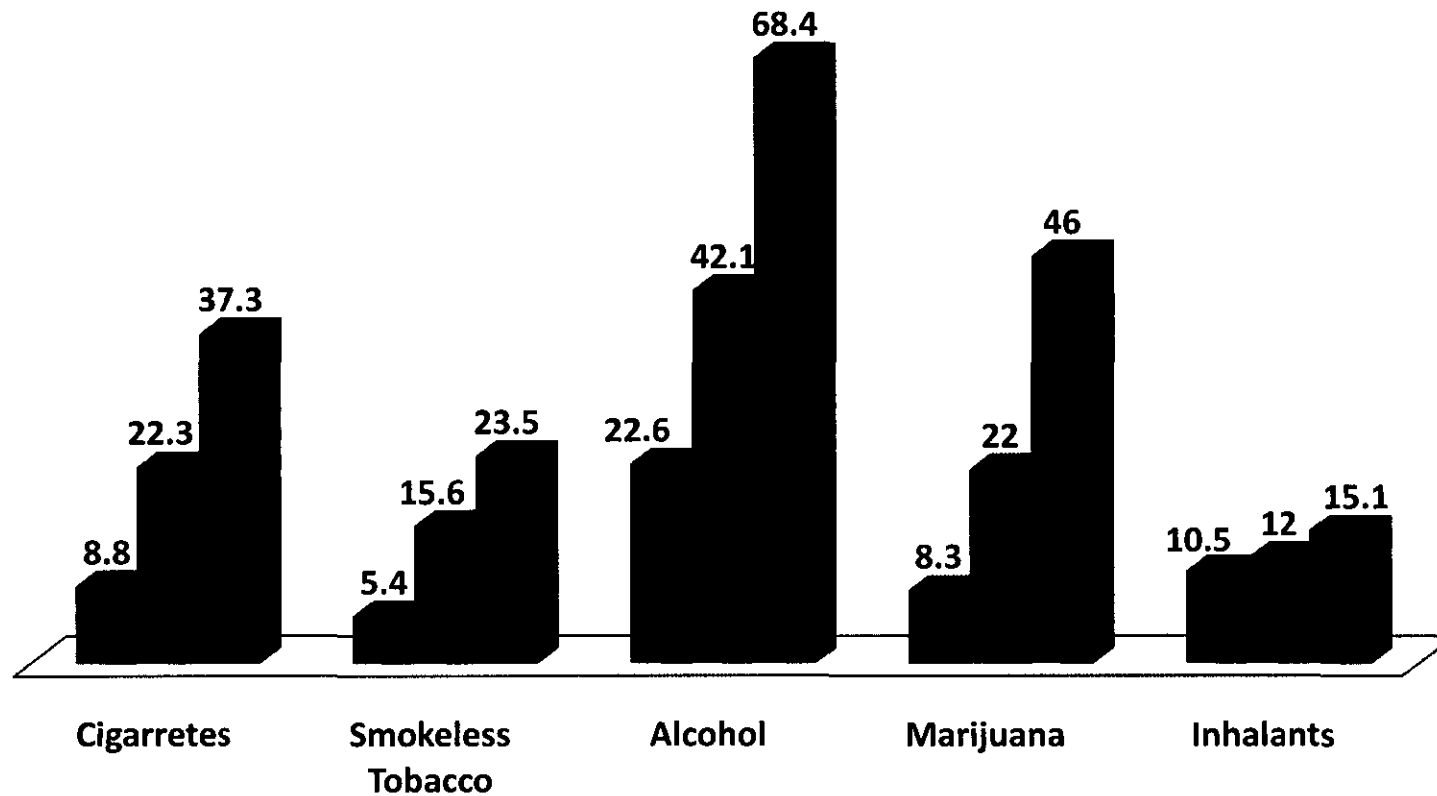
30 Day Marijuana Use



Substance Use Totals

AHKS Substance Use Summary

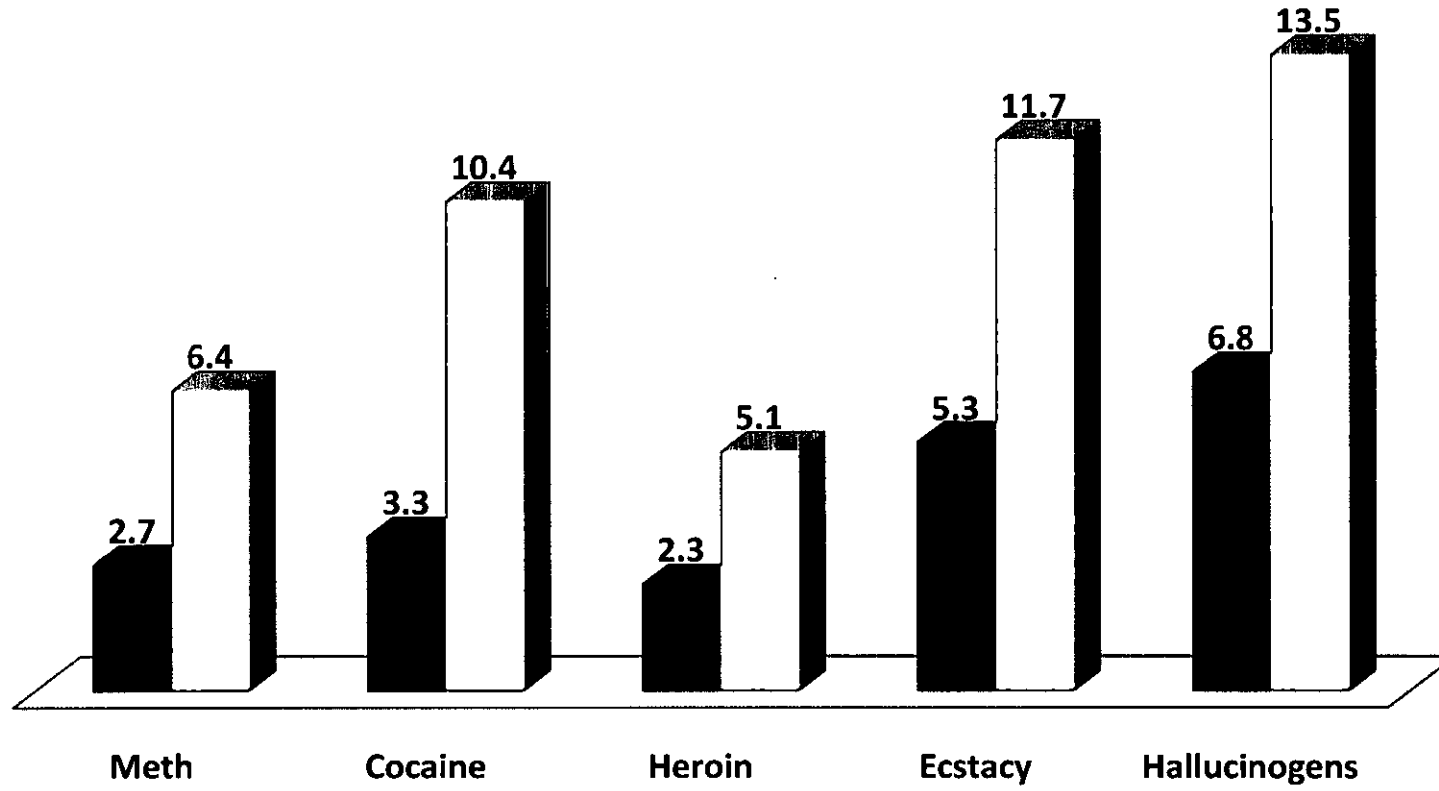
■ 7th Grade ■ 9th Grade ■ 11th Grade



Substance use Totals

AHKS Lifetime Substance Use Summary

■ 9th Grade □ 11th Grade



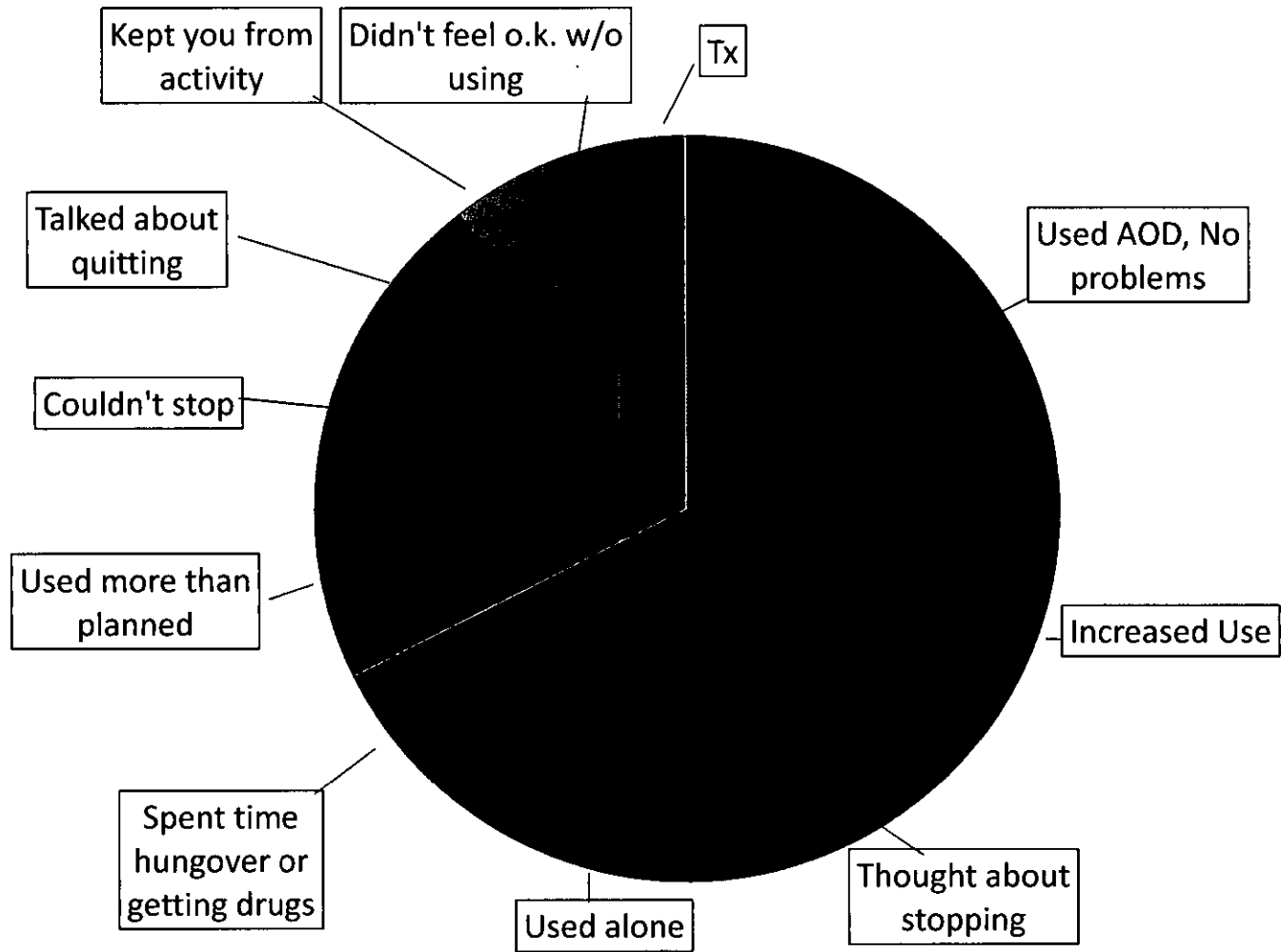
Recommendation #4

Increase community awareness of issues

- Alaska ranks in the United States:
 - #2 for illicit drug use (2007, National Survey on Drug Use and Health)
 - #6 for binge drinking among adults (2007, CDC, BFFSS).
- In many of the categories of use, the youth in the Valley reported above state and national averages.



Experiences from Alcohol and Drugs

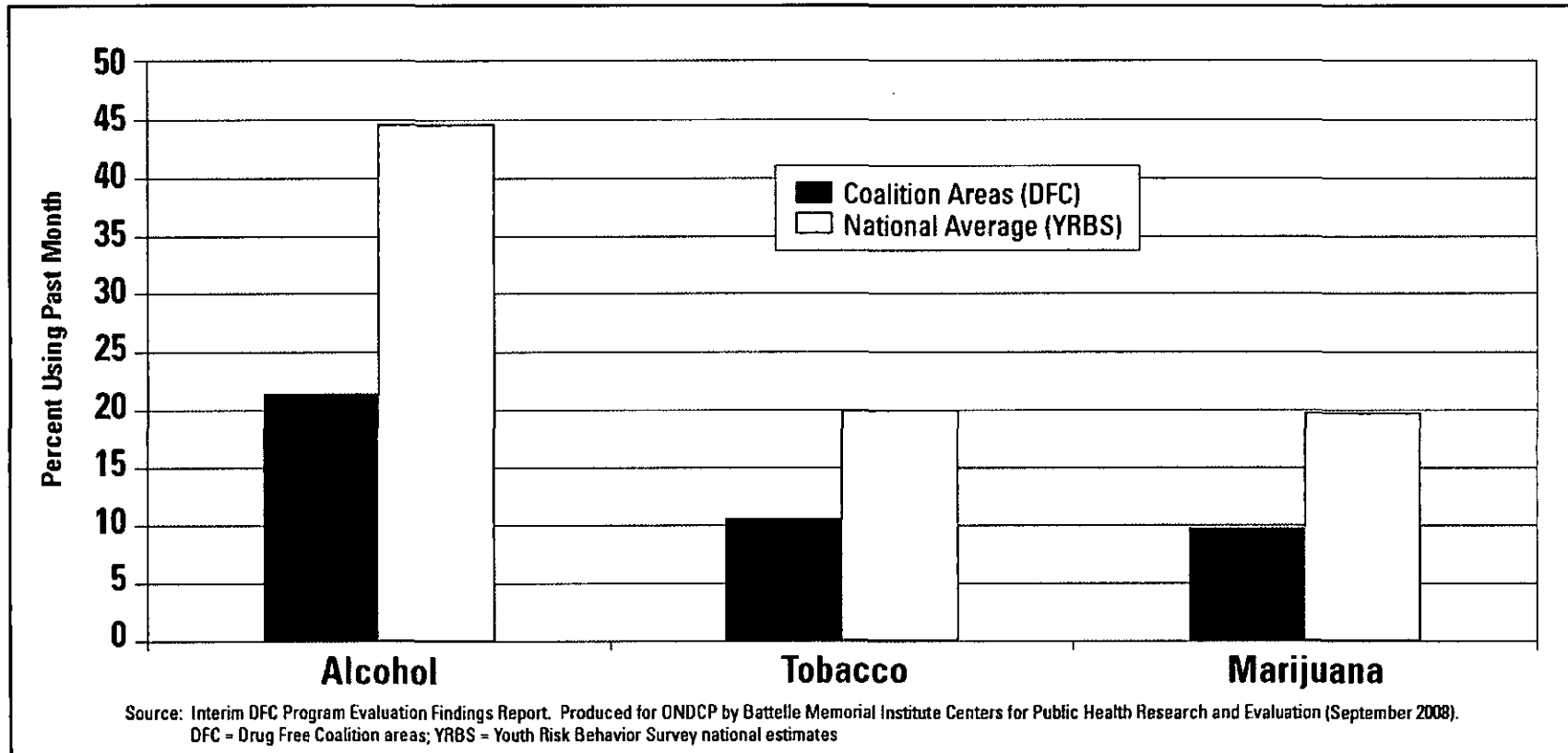


High school youth reported an average of 2 experiences

Coalitions are an effective solution

(Interim DFC Program Evaluation Findings Report, 2008)

Past Month Youth Substance Use Rates in Coalition Areas are Significantly Lower than the National Average in 2007



Our Coalition

- Includes leaders from our community
- Focuses on prevention
- Utilizes Environmental Strategies
 - Ex: advocating law and policy changes
- Coincides with the state plan to reduce underage drinking
 - Ex: youth leadership





Call to Action

- Review state statutes and regulations.
 - Laws are powerful messages that demonstrate social norms and expectations around drinking and using other substances.
- Get involved/understand your local coalition's goals and efforts.
- Support funding for further research, especially regional break-out data.
- Support funding for prevention—it works!

Thank you for your time...



20 Questions to Ask Your Legislator About Health Care Overhaul

1. Legislators in both the House of Representatives and in the Senate voted, in committee, to exempt Members of Congress from having to enroll in the public health plan they are drafting right now. This is outrageous! If this legislation is supposedly good enough for the American people – why exempt Congress from it? Will you vote to sign up you and your family for any public health care program that Congress passes for the American people?
2. There are claims that there's an unfunded liability of several trillion dollars up through 2075, and that the health bill actually reduces payments to Medicare by about several hundred billion over the next decade as a way to fund this bill. Wouldn't such a cut in Medicare then lead to rationing in the system?
3. When Congress and the President rushed to pass the \$1 trillion stimulus bill, we were told it needed to be passed fast. However, the legislation has had questionable results while paying for things like public bathrooms, sex shows in San Francisco and other examples of waste. Now we are told health care legislation must be passed right away for the same reasons. When restructuring 16 percent of our nation's economy, this rush appears more politically motivated than policy motivated. Isn't it more important to do it right?
4. Will you promise to read, understand and take full responsibility for everything that is in the final version of health care legislation?
5. Will you allow the American people sufficient time to review and publicly comment on the legislation before voting on it?
6. Many claim that abortion is covered in the health care bill, despite its not being mentioned specifically in the legislation itself. Furthermore, amendments offered in the Senate by Barbara Mikulski (D-Md.) and in the House by Lois Capps (D-Calif.) now guarantee that abortion will be a part of the health care legislation. Over seventy-one percent of Americans agree that taxpayer dollars should not fund nor subsidize abortion. When it comes to abortion exclusion, will you specify that none of the funds appropriated in the health reform bill, and no resources in any trust fund to which funds are appropriated in the bill, shall be expended for abortion? If not, why?
7. Can you guarantee me that my employer will not drop my health plan, and force me into the government run Health Information Exchange? Can you guarantee me and my family will not be one of the 100 million Americans predicted to lose their employer-provided health insurance and be forced into the Health Information Exchange?
8. I am self-employed. How can you vote for a law that says if I make a single change to my existing health plan, I will be forced into the Health Information Exchange, where my plan details are controlled by the Secretary of Health and Human Services? How can you stand there and say if you like your plan you can keep it, when I am going to be forced into the Health Information Exchange?
9. Do you know that the bill before Congress gives the Secretary of Health and Human Services uber-authority over everyone's health insurance and every single plan detail, and that the bill

grants her such authority and other authority over all aspects of health care more than 200 times in the bill?

10. Do you know that if a trillion dollars were a trillion seconds, counting backwards, a trillion seconds puts us at 30,000 years before the birth of Christ? How can a bill that costs \$1 trillion dollars and that cuts Medicare by \$400 billion be called "revenue-neutral?"
11. How can a bill that costs \$1 trillion dollars be passed without raising taxes as President Obama has promised?
12. Who decides what \$400 billion in benefits and services are cut from Medicare?
13. Congress has never cut Medicare by anywhere near \$400 billion; what makes you think Congress will make the cuts needed to pay for the uninsured's health care?
14. Why should we accept \$400 billion in Medicare cuts? Why aren't other programs being cut besides Medicare? Why is this health reform being funded on the backs of seniors?
15. Why does the bill change the definition of family by stretching it to become anything liberals want to call a family?
16. Will you agree to an iron-clad guarantee that this bill will not fund abortions, leave state abortion limits in place, and protect health care providers from being forced to perform abortions?
17. Medicaid, Medicare and Social Security are all government programs that are nearly broke. Why should the American people think the government can run an efficient or trustworthy health care program, especially when the Members of Congress vote to exempt themselves from the very program they tell the people will be so good?
18. In the House version of the health care legislation, H.R. 3200, Section 1233, titled "Advance Care Planning Consultation," the bill calls for "end-of-life" planning consultations once every five years. Who will be responsible for this "end-of-life" counseling, and why would anyone want the federal government to be involved at all in this very private matter?
19. The provision on "end-of-life" planning for seniors in the House bill comes from Rep. Earl Blumenauer, a Democratic congressman from Oregon who supports assisted suicide. The state of Oregon has sent seniors letters "consulting" them that, while the state-run plan would not pay for their cancer treatments, the state would be happy to pay for assisted suicide if they choose that option. Americans have always placed a high value on human life. Why would we be interested in such a utilitarian approach regarding these important issues?
20. President Obama himself has made several public statements indicating the federal government would be making decisions on what sort of treatments people get. In a town hall meeting on June 24, 2009 President Obama told a woman caring for her elderly mother: "(W)hat we (the federal government) can do is make sure that at least some of the waste that exists in the system that's not making anybody's mom better, that is loading up on additional tests or additional drugs that the evidence shows is (sic) not necessarily going to improve care, that at least we (the federal government) can let doctors know and your mom know that, you know what? Maybe this isn't going to help. Maybe you're better off not having the surgery, but taking the painkiller." Why would I want the federal government involved in a medical decision about surgery vs. a pain killer?

To House Bill 297

Proposed by: Representative Keller

House Education Committee

Amendment to Page 5, line 22 & 23

17 **Sec. 14.43.820. Eligibility for an academic scholarship.** (a) Subject to
18 appropriation, the commission shall award a merit-based academic scholarship to an
19 applicant who meets the eligibility criteria for the award under the program.

20 (b) The programmatic standards for eligibility for an award of a merit-based
21 academic scholarship under the program include the following:

22 (1) the four-year core academic curriculum which may include a virtual
23 curriculum that the student must have completed in high school; the core
[23] 24 academic curriculum must include

New Text Underlined [DELETED TEXT BRACKETED]

8/16-985