

SAMPLE

Mock Duck County: Alcohol, Tobacco and Other Drug Use

How to Use the Minnesota Health Profiles and Other Data for Chemical Health Promotion

Mock Duck County is a fictitious county. It has been created to be a teaching tool. When assessing the chemical health of a county or community it is important to look at demographic data, prevalence data, community norms and opinions, how the community has responded to the problem in the past, and how ready the community is to respond now.

Mock Duck County

Physical location: Just next to anywhere in Minnesota.

Population: 2000 Census - 16, 511 people

Demographics: 92.3% white, 3.8% Asian/Pacific Islander, 2.4% black/African American, 1.5% American Indian. Approximately 3.7 percent of the population identify themselves as Hispanic or Latino.

The white population is primarily Scandinavian and German though there is a relatively new influx of Eastern European immigrants. The Hispanic/Latino population is relatively new to the county. It is composed of many families who came originally as migrant workers and settled in the county. The Asian/Pacific Islander population is primarily Hmong and is also relatively new.

Overall, the adult population is older than average for the state. Thus, the Behavioral Risk Factor Surveillance System (BRFSS) synthesized alcohol and tobacco data for the county are lower than the state averages. There is a growing population of youth under the age of 18 that is approaching the state's population. This growing population of youth is expected to continue and will lead to a significant population of women of childbearing age (15-44) in the near future.

Data Available: The Minnesota Health Profiles are available for the county. They include demographics and vital statistics, morbidity and utilization data, chemical health indicators, environmental health information, maternal and child health data, and other important data.

The Chemical Health Indicators contain county-level data on alcohol-related automobile crashes, injuries, and fatalities; driving while intoxicated (DWI) violations; adult estimates of alcohol and tobacco use; and student survey data on alcohol, tobacco and other drug (ATOD) use.

See ~ **Chemical Health Indicator Package Data Analysis** for more information.

Community Norms: Community opinion about alcohol, tobacco and other drug use in the county is very much in line with that of the state and the nation. Community opinion surveys in the county indicated a major concern with illicit drug use. School programs and law enforcement were the two most frequently given responses for addressing the problem. Drinking and driving was also frequently mentioned as a problem. The most frequently mentioned solution was designated driver programs. Alcohol industry advertisements promoting designated drivers and popular designated driver campaigns in the schools have obscured other alcohol-related problems and solutions in Mock Duck County as they have in other communities.

Most community events seem to include alcohol. The beer tents are prominent and popular at most of the church festivals. A brewery sponsors the annual Sawdust Days celebration in the county's largest city. Alcohol consumption is allowed in the county and municipal parks. Most softball league games include drinking and most teams gather after the games at local bars and taverns. Bars and taverns sponsor many of the teams. Children of players and fans frequently attend the games and often accompany their parents to the bars. It is not at all unusual to see children and adolescents in the bars around the county. Snowmobiling is a big part of winter recreation as is boating in the summer. Alcohol use frequently accompanies both.

Alcohol use is considered a rite-of-passage for youth. It is almost unheard of to have a high school graduation party without alcohol. There is a tendency to not pay attention to underage youth drinking unless there is a serious crash or other alcohol-related crisis. Many parents say they are concerned about their children's alcohol use, especially if it involves drinking and driving. Yet they appear to be confused about what to do about it. Many feel they are alone and are reluctant to take a stand when it seems like all the other kids are drinking with their parents' permission or at least with their parents' knowledge.

Tobacco use is also quite prevalent. There are very few smoke-free establishments in the county. The Minnesota Clean Indoor Air law is not well enforced. There are no smoke-free restaurants in the county. Chewing tobacco is popular with many of the county's farmers, young men and adolescent males. The county has passed a tobacco ordinance to comply with the 1997 state law that requires licensing of all tobacco sellers and annual compliance checks, but enforcement is inconsistent.

There is a "frontier attitude" in the county which leads to resistance to government interventions. This makes public health initiatives about alcohol, tobacco, nutrition, seatbelt use, etc., hard to implement. Most residents believe it is up to the schools and law enforcement to prevent youth ATOD problems.

Recent Community Events and Occurrences: Two years ago, three county teenagers died in a single-car crash. The teenage driver had a blood alcohol content (BAC) of 0.19, nearly twice the legal limit for adults. Beer cans and bottles were strewn throughout the wreckage. None of the three were wearing seatbelts. This tragedy had a short-term impact on the community. A group of parents began meeting together to address the problem of youth drinking and driving. They pledged to never let something like that happen again. Within six months, it was all but forgotten about by most of the county's residents and the parent group began to lose interest. The group quit meeting 13 months after the crash.

Late last year both alcohol and tobacco compliance checks were conducted throughout the county. Underage buyers were able to purchase alcohol in 46 percent of their attempts and purchase tobacco in 57 percent of their attempts. These rates are consistent with Minnesota Student Survey results about sources of alcohol and tobacco. County twelfth grade students reported buying from stores was their third most common source of alcohol. They also reported buying from gas stations and convenience stores was their most common source of tobacco and buying it from grocery, discount, or drug stores was their third most common source.

The compliance checks caused quite a stir in the county. Some of the alcohol and tobacco merchants whose employees sold to the underage buyers claimed entrapment. They also complained that they were being unfairly singled out. Almost all of them claimed that they never sell to underage buyers, that the buyers were made to look older, that they often came in with adults, and that the buyers used false identification. They also complained that the sales were made by employees who they could not control adding how hard it is to find reliable employees these days.

The County Sheriff who conducted the compliance checks said that protocols were followed to reduce claims of entrapment. All the underage buyers went through an age assessment panel to assure that they did not look older than their actual ages. In addition photos were taken of each buyer just prior to the purchases and the photos were kept in Sheriff's Department files. None of the underage buyers had false identification when they made their purchase attempts. The sheriff also stated that compliance checks are conducted on all license holders. None of the license holders were singled out based on previous records.

Most of the complaints went directly to county commissioners and elected city officials. As a result of the merchants' complaints, county public health staff and the sheriff received a lot of pressure from various officials to stay out of alcohol and tobacco control efforts. One local official owns an outlet that sold to the underage buyers. She has been vigorously fighting the penalties imposed for the sale.

Chemical Health Promotion in Mock Duck County

Aside from the three school districts' prevention programs, there have not been many organized chemical health promotion efforts in the county. Two of the districts have D.A.R.E. (Drug Abuse Resistance Education) classes for fifth grade students. The third district has a drug abuse prevention program in grades 2,4, and 6. All three high schools have S.A.D.D. (Students Against Dangerous Driving) Chapters. There are no chemical dependency treatment programs in the county. There is a treatment program at the state hospital in a neighboring county.

An Alcohol, Tobacco and other Drug (ATOD) coalition was originally formed in the county in the early 1980s to combat drug use. Interest has ebbed and flowed throughout its history. Mostly it has conducted awareness raising and education efforts, bringing in speakers, purchasing materials and occasionally sponsoring a campaign. The leadership has changed frequently along with the membership. Traditionally it has been made up of parents of pre-adolescents. They often drop out by the time their children enter high school.

Chemical Health Promotion Challenges

People 15-24 Years: Mock Duck County has large population of 15-24 year-olds. According to the Behavioral Risk Factor Surveillance System (BRFSS), the prevalence of acute or binge drinking (having five or more alcoholic beverages on one occasion at least once in the past month) is highest for 18-24 year-olds (the youngest group surveyed in BRFSS). The percent of chronic drinkers in this age group (an average consumption of 60 or more alcoholic beverages in a month) is approximately double that of any other age group. This age group also has the highest prevalence of drinking and driving (having driven after having too much to drink one or more times in the month prior to interviewing).

In addition, 15-24 year-olds, along with 10-14 year-olds, are at most risk for smoking and are vulnerable to tobacco and alcohol advertising.

Females 15-44 Years: Mock Duck County's population of females in the 15-44 age group is growing. This group is important because it is the childbearing population. Alcohol and tobacco use by pregnant women are both serious problems. In addition to the risk to themselves, they could expose their unborn children to the effects of tobacco and alcohol.

People Over 65 Years: The older adult population, over age 65 is a concern in Mock Duck County as it is elsewhere. Older adults may have problems with medications (prescription and over-the-counter drugs) and/or alcohol. These problems often go undetected and sometimes even appear to be the symptoms of another illness, which may increase the chance that additional medications are prescribed and used, only adding to the problem.

Community Readiness: Based on the responses to the recently conducted alcohol and tobacco compliance checks, the apparent norms around alcohol and tobacco use, and the prevalence data available the community does not appear ready to aggressively address chemical health problems in the county. The Alcohol, Tobacco and other Drug Coalition had proposed conducting a community readiness survey in the county after the fatal crash two years ago. But there was not enough support and it was not conducted.

Chemical Health Indicator Package Data Analysis

Alcohol and Driving: Since the county is relatively small the numbers of alcohol-related crashes, fatalities, and injuries are small. Therefore it is important to look at the ten-year averages and at trends. Over ten years (1990-1999) the county rate of alcohol-related crashes and injuries has been higher than the state rate. Fortunately, the rate for alcohol-related fatalities has been lower than the state rate. However, the number of fatalities is so small (averaging 1 per year over the ten years) that one or two more deaths could have raised the rate above the state's rate. Interestingly the county rate for Driving While Impaired (DWI) violations issued within in the county is much lower than the state rate. Yet, Driving While Impaired violations for county residents (issued anywhere in the state) are above the state rate. This could mean a shortage of enforcement capabilities, or it could mean a reluctance to enforce the DWI laws in the county. Similarly, the county rate for Not-A-Drop violations (a person under age 21 driving with any level of alcohol concentration) is also lower than the state rate.

These data could indicate a community norm that tolerates drinking and driving. A comparison of county and state 1998 Student Survey data seem to support this norm. A significantly higher percentage of 12th grade students reported driving after drinking or using other drugs than the state average (males: 50% county to 40% state, females: 39% to 30%). Even more troubling are the differences between the 9th and 12th grade students who reported riding with a friend who had been drinking or using other drugs (9th grade: males - 37% to 31%, females - 41% to 29%, 12th grade: males-63% to 51%, females 57% to 42%).

In spite of the S.A.D.D. Chapters in the schools and the concerns about drinking and driving, the data indicate that drinking and driving is a tolerated, if not acceptable behavior. The Student Survey data seem to show that the county's youth are behaving according to the perceived norms in the community.

Adult Chemical Use Estimates: The county figures are estimates that indicate the percentage of people at risk for engaging in a behavior given the county's age and gender demographics. The county estimates do not tell the percentage of persons who actually engage in a behavior in the county. Any difference between the state and the county estimates reflect demographic differences, not actual differences in behavior. Since the average age of the county is older than the state average and since there is a slightly higher number of females than males, the estimates are lower than the state data.

There are two points to consider when looking at this data. One is the growing population of young people in the county. Though the county was, on average, older in 2000, it may not be for long. The growing younger population is at-risk for problems with alcohol and tobacco.

The second point is that though the county's alcohol use rate is lower than the state's, the state has higher alcohol consumption rates than the national averages. Minnesota consistently ranks higher than almost every other state in measures of adult alcohol use. In a 1996 National Household Survey 60.5 percent of Minnesotans reported being current drinkers (at least once in the past 30 days) compared to 54.8 percent nationally. Although it appears that the county is doing well compared to the state, the facts may not be so good compared to the rest of the country.

Minnesota Student Survey Data: The Student Survey data for Alcohol, Tobacco and other Drugs seem to support the community norms information. Alcohol use by 9th grade students is just above the level of 9th grades students across the state, but county 12th grades students' use is ten percentage points above the state average for 12th grade students.

Weekly cigarette use among county students is also just above the state average for 9th grade as well as 12th grade students. In addition, 9th and 12th grade boys are using chewing tobacco weekly at a higher rate than the state average.

Monthly marijuana use is below the state levels for 9th and 12th grade students. Marijuana use increased significantly in the state between 1992 and 1998. Mock Duck County's data may reflect a lag in increased use, or alcohol and tobacco may be much more available and the drugs of choice among county youth.

The use of other illicit drugs by the county's youth was very minimal. It appears that alcohol and tobacco are clearly the drugs of choice with marijuana a distant third.

The data about county youth drinking and driving and riding with friends who have used are very troubling. For more information, see Alcohol and Driving.

Female 9th grade students reported having a family member with an alcohol problem at a higher rate than the state average. Male 9th grade students and male and female 12th grade students report having a family member with an alcohol or other drug problem at the same or lower rate than the state average. According to the survey, over one in five ninth grade females (in 1998) reported having a family alcohol problem. According to research, these children may be at higher risk for abuse or for their own ATOD problems now or later in life.

Results of how students obtain alcohol and tobacco indicate how easy it is for them to purchase these substances. For more information, see [Recent Community Events and Occurrences](#).

Students in both 9th and 12th grades who do not use alcohol, tobacco and other drugs gave the same primary reason for not using - no desire to use. Interestingly, 9th grade students' second most frequently given reason was parental objection which did not appear in the 12th grade student's top five reasons. Two other reasons appeared on the 9th grade top five list which did not appear on the 12th grade list - use is illegal and fear of getting caught. It appears that the very things that would impact community norms to not use disappear by 12th grade, even for the students who choose not to use. Parental objection, fear of getting caught, and reluctance to behave illegally are some of the crucial issues addressed by a policy-based approach to chemical health promotion. Clearly, the importance of community standards and norms on ATOD use or nonuse is affirmed by the students' responses.