Mental Health - Addendum 1
May 2016

Goal 3: A resilient community

Objective 4: By 2019, Outagamie County will work to decrease acceptability of underage alcohol use.

Performance Measures

- Increase the number of municipalities in Outagamie County with a social host ordinance* from 0 to 2.
- Decrease underage alcohol use (for all grades) by 10%, from 27.8% (2013/2014 YRBS) to 25.0%.
- Decrease underage binge drinking (for all grades) by 10%, from 15.8% (2013/2014 YRBS) to 14.2%.
- Increase students' perception of parental disapproval (students' report their parents feel regular use of alcohol is wrong or very wrong), especially among 12th grade students.

Source: 2013/2014 Youth Risk Behavior Survey (YRBS)

<table>
<thead>
<tr>
<th>Grade 9</th>
<th>Grade 10</th>
<th>Grade 11</th>
<th>Grade 12</th>
</tr>
</thead>
<tbody>
<tr>
<td>18%</td>
<td>11%</td>
<td>19%</td>
<td>36%</td>
</tr>
<tr>
<td>13%</td>
<td>24%</td>
<td>33%</td>
<td></td>
</tr>
<tr>
<td>92%</td>
<td>89%</td>
<td>89%</td>
<td>81%</td>
</tr>
</tbody>
</table>

Average age of first drink of alcohol other than a few sips

Where are students getting alcohol?
The majority report that someone GAVE it to them.

53% Drank alcohol 1 or more times in the past 30 days

81% Report their parents feel regular use of alcohol is wrong or very wrong

Source: 2013/2014 Youth Risk Behavior Survey (YRBS)
Strategies

- Participate in the Wisconsin Association of Local Health Departments and Boards' Community Health Improvement in Action (CHIA) project (2015-2016)
- Support school and community participation in the *Parents Who Host Lose the Most* campaign
- Support Outagamie County Pre-Action Network (school-based prevention efforts)
- Participate in the Fox Valley Substance Abuse Coalition's Prevention Pillar
- Encourage a broader substance abuse focus, including alcohol, to all of the Fox Valley Substance Abuse Coalition pillars
- Complete *The Community Alcohol Personality Survey*
- Utilize existing parent networks within school districts to educate parents on underage alcohol use and benefits of social host ordinances, and share tips regarding what parents can do to support healthy youth

*Social host ordinances complement state and local alcohol age compliance checks by efficiently denying youth locations for underage drinking. As an important part of a comprehensive plan to prevent and reduce alcohol misuse, a social host ordinance holds responsible those who provide the location for underage drinking, even if the organizer or host is not present at the party. More information can be found at [https://law.wisc.edu/wapp/comparisonsocial_host62612.pdf](https://law.wisc.edu/wapp/comparisonsocial_host62612.pdf).*
What can state, tribal, local and territorial governments do?

- Maintain and enforce the age 21 minimum legal drinking age (e.g., increasing the frequency of retailer compliance checks), limit alcohol outlet density, and prohibit the sale of alcohol to intoxicated persons.
- Require installation of ignition interlocks in the vehicles of those convicted of alcohol impaired driving.
- Implement or strengthen prescription drug monitoring programs.
- Facilitate controlled drug disposal programs, including policies allowing pharmacies to accept unwanted drugs.
- Implement strategies to prevent transmission of HIV, hepatitis and other infectious diseases associated with drug use.

What can businesses and employers do?

- Implement policies that facilitate the provision of SBIRT or offer alcohol and substance abuse counseling through employee assistance programs.
- Include substance use disorder benefits in health coverage and encourage employees to use these services as needed.
- Implement training programs for owners, managers, and staff that build knowledge and skills related to responsible beverage service.

What can health care systems, insurers, and clinicians do?

- Identify and screen patients for excessive drinking using SBIRT, implement provider reminder systems for SBIRT (e.g., electronic medical record clinical reminders) and evaluate the effectiveness of alternative methods for providing SBIRT (e.g., by phone or via the internet).
- Identify, track, and prevent inappropriate patterns of prescribing and use of prescription drugs and integrate prescription drug monitoring into electronic health record systems.
- Develop and adopt evidence-based guidelines for prescribing opioids in emergency departments, including restrictions on the use of long-acting or extended-release opioids for acute pain.
- Train prescribers on safe opioid prescription practices and institute accountability mechanisms to ensure compliance. For example, the use of long-acting opioids for acute pain or in opioid-naïve patients could be minimized.

What can early learning centers, schools, colleges, and universities do?

- Adopt policies and programs to decrease the use of alcohol or other drugs on campuses.
- Implement programs for reducing drug abuse and excessive alcohol use (e.g., student assistance programs, parent networking, or peer-to-peer support groups).

What can community, non-profit, and faith-based organizations do?

- Support implementation and enforcement of alcohol and drug control policies.
- Educate youth and adults about the risks of drug abuse (including prescription misuse) and excessive drinking.
- Work with media outlets and retailers to reduce alcohol marketing to youth.
- Increase awareness on the proper storage and disposal of prescription medications.

What can individuals and families do?

- Avoid binge drinking, use of illicit drugs, or the misuse of prescription medications and, as needed, seek help from their clinician for substance abuse disorders.
- Safely store and properly dispose of prescription medications and not share prescription drugs with others.
- Avoid driving if drinking alcohol or after taking any drug (illicit, prescription, or over-the-counter) that can alter their ability to operate a motor vehicle.
- Refrain from supplying underage youth with alcohol and ensure that youth cannot access alcohol in their home.