

Prevention Partners News

This is the fourth issue of the Prevention Partners News, a quarterly publication from the Prevention Unit of the Department of Human Services, Addictions & Mental Health Division. We continue to encourage your input and submissions for future issues. Enjoy!

Jeff Ruscoe, Editor.

AMH Hires Kerryann Woomer!

The Addictions and Mental Health Division's Prevention Unit is proud to introduce Kerryann Woomer as our new Prevention Specialist and Strategic Prevention Framework – State Incentive Grant Project Director. Kerryann comes to the office after spending 12 years as the Prevention Coordinator for Grant County.

After fourteen years in Frontier Rural weather, she returns to the Valley with extremely fashionable rain boots. She brings with her Emerson, her seven-year-old daughter and they are both happy to be closer to family.

Please welcome Kerryann to her new position at AMH. You can reach Kerryann at (503) 945-6998, or by email at kerryann.woomer@state.or.us



Welcome, Kerryann!

Upcoming Events & Trainings

- January 28 – Keeping the Faith in Drug Prevention (see announcement on page 3).
- February 9-11 – Changing Communities for the Better (see flyer on page 6).
- February 18 – Using Social Marketing to Reduce Underage Drinking (see announcement on page 3).
- March 10-13 – SFP 10-14 Training, Roseburg. 8:30 – 4:30, Location TBA, \$40 per person.
- May 25-27 – AMH Conference (Hope, Resilience & Recovery), Red Lion Inn, Salem.
- June 9-12 – National Problem Gambling Conference, Portland
- September 15-17 – Oregon Prevention Conference, University of Oregon, Eugene.

Meth Use is Down! WAY Down!

The 2007-2008 combined Oregon Healthy Teens Survey gave us methamphetamine use data in 33 counties. How did we do on meth use in the past 30 days? Remarkably well!

- In 10 counties, not one 8th grader used meth
- In 11 counties, not one 11th grader used meth

Take time to celebrate your successes!

Percent of youth that used methamphetamine one or more times in the past 30 days – 2007-08

County	8 th Grade	11 th Grade
Baker	1.1%	0.0%
Benton	0.4%	1.0%
Clackamas	0.5%	1.0%
Clatsop	0.8%	0.0%
Columbia	1.8%	0.0%
Coos	1.0%	0.3%
Crook	0.6%	0.0%
Curry	0.0%	1.0%
Deschutes	1.0%	0.5%
Douglas	0.4%	0.0%
Gilliam	0.0%	0.0%
Grant	0.0%	0.0%
Harney	0.0%	0.0%
Hood River	0.0%	1.4%
Jackson	0.5%	0.3%
Jefferson	0.6%	1.5%
Klamath	0.0%	0.6%
Lake	2.0%	0.0%
Lane	0.8%	0.6%
Lincoln	0.0%	1.4%
Linn	0.5%	2.0%
Malheur	0.5%	1.2%
Marion	1.0%	1.6%
Morrow	0.0%	1.1%
Multnomah	0.6%	0.5%
Polk	0.6%	0.8%
Tillamook	0.0%	0.9%
Umatilla	0.6%	1.6%
Union	0.5%	0.6%
Wasco	0.6%	0.0%
Washington	0.5%	0.4%
Wheeler	0.0%	0.0%
Yamhill	1.0%	0.8%

Source: Oregon Healthy Teens Surveys, 2007 and 2008

Question of the Quarter

We received no responses to last quarter's question, which was: "How do you coordinate your prevention efforts with local Drug Free Community Coalitions or other prevention organizations in your Tribe or County?"

This column is an opportunity for you to ask your fellow prevention colleagues a question and see what responses you get.

This quarter's question is: **What best practice programs do you use that have measurable outcomes that you can understand and share with other community folks?** (Submitted by Maija Yasui)

Please email your responses, or a new question, to jeff.rusco@state.or.us. All responses will be included in the next Prevention Partner's News!

Prevention Trivia

1. What is the rate of current (past month) illicit drug use for the 50-59 year old age group?
 - A. 0.6%
 - B. 1.1%
 - C. 4.6%
 - D. 7.1%
2. Among the 50-54 year old age group, 50.9% report being current drinkers. Of those, what percentage report heavy alcohol use?
 - A. 6.4%
 - B. 9.1%
 - C. 12.8%
 - D. 15.5%
3. What percentage of persons aged 50-54 reported driving under the influence in the last year?
 - A. 5.9%
 - B. 11.4%
 - C. 14.2%
 - D. 15.6%

Source: 2009 National Survey on Drug Use & Health
Answers on Page 3

Spotlight on Events:

Problem Gambling Prevention

Problem Gambling Prevention will be a featured track at the 2010 National Problem Gambling Conference, to be hosted by Oregon this year and held on June 9-12, 2010 at the Portland Hilton.

It's a great chance for us to highlight the advances being made in Oregon regarding integration of problem gambling into existing (typically alcohol and drug) prevention efforts. Please consider submitting a proposal on your own integration efforts. The call for presenters can be found at:

<http://www.ncpgambling.org/i4a/pages/index.cfm?pageid=3824>.

If you'd like help, feel free to contact Wendy Hausotter (wendy.hausotter@state.or.us). Believe it or not, Oregon is in the lead nationally with integration efforts so don't think that what you've done is not significant enough to present...it is!!

Did you Know...?

There is a *Working to Prevent Underage Drinking Toolkit* available to arm community leaders with the tools to take action at the State and local levels? This resource is designed to encourage the adoption of drug-free workplace programs that incorporate underage drinking prevention education for parents and guardians. Developed by a team of Federal and private individuals, it can be found at: <http://www.alcoholfreechildren.org/node/277>.

Prevention Trivia Answers from page 2:

1. C 2. A 3. B

Keeping the Faith in Drug Prevention

Airs: January 28, 2010

Sometimes the most difficult part of drug prevention is getting the message to the people who need it the most. The faith community can help. Faith brings people together and that's what anti-drug coalitions need, another way to reach people where they are. Involvement in religious activities is a protective factor for substance use.

Research from the National Survey on Drug Use and Health has shown youth who are highly involved in religious activities are less likely to use cigarettes, alcohol, or other drugs. The numbers are similar for adults.

During this hour-long CADCA-TV broadcast called *Keeping the Faith in Drug Prevention*, you'll see how the faith community and coalitions can work together to reduce substance abuse. Hear about ideas that are working and how you can adapt them to meet your needs. We'll see how one organization is taking a unique approach to helping faith communities.

Key Concepts:

- Learn how coalitions and faith organizations can work together
- Find out how to avoid common pitfalls
- Hear how smaller congregations can play a very large role in coalition efforts.

Presenters:

Gregory A. Puckett, *Executive Director, Community Connections, Mercer County, WV*
Rev. Cheryl Mitchell Gaines, *Senior Faith Based Technical Specialist with McFarland & Associates for CSAP's National Faith and Community Based Support Initiative*
Carlton Hall, *Senior Manager of Training and Technical Assistance for CADCA's National Coalition Institute*

For more information, please visit:

http://www.mctft.com/telecasts/view_course.aspx?telecastID=2010-01-28-1

APIS: New Resource on State Underage Drinking Policies

The Alcohol Policy Information System (APIS), a project of the National Institute on Alcohol Abuse and Alcoholism, announces its latest update of state-by-state alcohol policies. This year's update includes a new posting on "underage internal possession" laws. These laws prohibit an underage person from having alcohol in his or her system. They typically require evidence of alcohol in the minor's body, but do not require any specific evidence of possession or consumption. Such laws are useful to law enforcement when breaking up underage drinking parties because they allow officers to bring charges against underage persons who are not holding alcoholic beverages and who have not been observed drinking alcoholic beverages by the officers. As of January 1, 2009, eight states have internal possession laws. In addition to adding underage internal possession laws, this update reports on 22 changes in State alcohol policy statutes and regulations that occurred in the year ending January 1, 2009. APIS policy topics are now posted and can be found at: www.alcoholpolicy.niaaa.hih.gov.

2011-2013 Biennial County Implementation Plans

In order to streamline the implementation plan process and reduce the amount of paperwork, AMH has moved to an electronic implementation plan survey. Two tutorial webinars were held to introduce county CMHP Directors, Prevention Coordinators and Tribes to the new process.

Please direct any questions specific to the Prevention portion of the survey to Rick.F.Cady@state.or.us, any technical questions to C.J.Reid@state.or.us or Claudia.E.Grimm@state.or.us.

Remember that the signature pages need to be signed and hard copies mailed to DHS by March 15, 2010. Detailed instructions are contained in the survey tool.

Using Social Marketing to Reduce Underage Drinking

February 18, 2010 – 12:00 pm – 1:15 pm PST

Social Marketing" has become a hot topic. The term encompasses the strategy of using marketing techniques to influence attitudes and behaviors for the social good. Consistent messaging with longevity over time can have a significant impact on community norms. This call will focus on two underage drinking prevention social marketing campaigns aimed at adults and which include an enforcement component. Participants will learn how to apply social marketing strategies, how to craft effective messages and gain knowledge of evaluation results documenting campaign effectiveness.

Register for this electronic seminar and see a schedule of upcoming electronic seminars at <http://www.udetc.org>, National Electronic Seminars

U.S. 15 year-olds Drink Less than Peers World-Wide

A new report from the Organization for Economic Cooperation and Development (OECD) showed that one in five U.S. 15-year-olds reported having been drunk at least twice in their lives, proving to be one of the lowest rates in the developed world. In contrast, the highest rate was found in Denmark, where more than half of the 15-year-olds reported having been drunk at least twice in their lives. Canada fell in the middle, with more than one in three 15-year-olds reporting drunkenness at least twice in their lives.

The New York Times most recently reported these findings. The full report can be found here: http://www.oecdilibrary.org/oecd/sites/health_glance-2009-en/02/01/index.html;jsessionid=2d3ouxt13c0y5.delta?contentType=&itemId=/content/serial/19991312.

FDA to Evaluate Safety and Legality of Alcoholic Beverages Containing Caffeine

“The increasing popularity of consumption of caffeinated alcoholic beverages by college students and reports of potential health and safety issues necessitates that we look seriously at the scientific evidence as soon as possible.”
--Dr. Joshua Sharfstein, Principal Deputy Commissioner of Food and Drugs, FDA

What are caffeinated alcoholic beverages? Caffeinated alcoholic beverages are alcoholic beverages to which the manufacturer has intentionally added caffeine and/or other stimulants that are metabolized as caffeine (e.g., guarana). An increasing number of companies are producing these beverages, with young people as the apparent marketing target. The reported prevalence of combined caffeine and alcohol use among U.S. college students is high as 28%.

What are the potential health concerns with caffeinated alcoholic beverages? Studies have shown that people who drink caffeinated alcoholic beverages drink larger quantities of alcohol. Caffeine can mask the negative effects of alcohol intoxication, increasing the chance that users will engage in potentially risky behaviors, such as drinking and driving, because they don't feel that they are intoxicated. Users of caffeinated alcoholic beverages are also more likely to experience alcohol-related consequences, such as being taken advantage of or taking advantage of someone else sexually. Consuming these beverages may also be associated with adverse effects on heart rhythm, most likely in individuals with pre-existing cardiovascular conditions.

Is caffeine approved by the FDA for use in alcoholic beverages? A food additive is presumed by the FDA to be unsafe unless its particular use has been approved by federal regulation or is Generally Recognized As Safe (GRAS) under the conditions of its intended use. The FDA has approved caffeine as GRAS for use only in non-alcoholic cola-type beverages at concentrations of no greater 0.02 percent. The FDA has not approved caffeine for use at any level in alcoholic beverages.

What is the FDA doing about this? On November 13, 2009, the FDA issued a mandate to nearly 30 manufacturers* of caffeinated alcoholic beverages to produce within 30 days their rationale and supporting data concluding that their use of caffeine in an alcoholic beverage is either GRAS or prior sanctioned.** To be GRAS, the burden is on the manufacturers to show that 1) the use of caffeine is safe for use in alcoholic beverages based on publicly available scientific evidence and 2) there is a consensus among qualified experts regarding the safety of caffeine for this use. In their letter to manufacturers of caffeinated alcoholic beverages, the FDA states that, “If FDA determines that the use of caffeine in your alcoholic beverage is not GRAS or subject to a prior sanction, FDA will take appropriate action to ensure that this product is removed from the marketplace.”

*In the past year, Anheuser-Busch and Miller agreed to discontinue their caffeinated alcoholic beverages and agreed to not produce any caffeinated alcoholic beverages in the future.

**A substance is considered prior-sanctioned if its specific use in food was authorized by the FDA or the Department of Agriculture prior to September 6, 1958.

SOURCES: Adapted by CESAR from the following documents available on the FDA website at <http://www.fda.gov/Food/FoodIngredientsPackaging/ucm190366.htm>: “FDA to Look Into Safety of Caffeinated Alcoholic Beverages; Agency Sends Letters to Nearly 30 Manufacturers,” *FDA Press Release*, 11/13/09; FDA, *Questions & Answers on Caffeine in Alcoholic Beverages*, 2009; *CAB Letter to FDA from Attorneys General*, 9/25/09; *CAB Letter to FDA from Scientists*, 9/21/09.

Marijuana Use On the Rise; Prescription Drug Abuse Continues Upward Trend

While there were slight decreases in the use of cocaine and methamphetamine among youth, teen marijuana use showed no signs of slowing down. In fact, according to the [2009 Monitoring the Future Survey](#), marijuana use among adolescents has increased gradually over the past two years after years of declining use; and past year rates of Vicodin and OxyContin abuse increased during the last 5 years among 10th graders and remained unchanged among 8th and 12th graders. The MTF Survey, which surveys youth in 8th, 10th and 12th graders, was released Monday by the National Institute on Drug Abuse (NIDA) and the University of Michigan.

Several drugs showed signs of increasing with attitudes softening for drugs such as marijuana, ecstasy, inhalants and LSD. For example, the percentage of 8th graders who view occasional marijuana use as potentially harmful dropped to 44 percent, compared to 48 percent last year. In addition, the perception of “great risk” associated with marijuana use declined among 8th and 10th graders.

“So far, we have not seen any dramatic rise in marijuana use, but the upward trending of the past two or three years stands in stark contrast to the steady decline that preceded it for nearly a decade,” said University of Michigan researcher Lloyd Johnston, the lead investigator on the MTF survey.

The survey also showed no declines in the abuse of prescription and over-the-counter drugs, with nearly 1 in 10 high school seniors reported using Vicodin non-medically; 1 in 20 reported abusing OxyContin.

Gil Kerlikowske, Director of the Office of National Drug Control Policy, cautioned that while there were no big jumps in drug use, that shouldn't be cause for celebration. “We are containing drug use, but is containment really what we're after? I would say certainly not,” he told the audience during a press conference in Washington, D.C. “If we're not making progress, we're probably losing ground.”

Another drug showing no signs of letting up was over-the-counter cough and cold medicines containing dextromethorphan (DXM), with annual prevalence rates remaining unchanged since 2006, when use of these drugs was first measured. Researchers are also concerned about the abuse of prescription stimulants to treat attention deficit hyperactivity disorder (ADHD). While the annual prevalence rate of Ritalin abuse fell from 5 to 2 percent among 12th graders, more than 5 percent of 10th and 12th graders reported abusing Adderall, which is also used to treat ADHD and was included in the survey for the first time.

Other areas of concern from the survey were:

- From 2008 to 2009, lifetime, past month, and daily use of smokeless tobacco increased among 10th graders.
- The decline in alcohol use, including binge drinking, has leveled off among 10th and 12th graders, with only 8th graders showing a continued decline.
- Fewer 10th graders viewed weekend binge drinking as harmful, and fewer high school seniors disapproved of having one or two drinks every day. On the other hand, researchers noted that the perceived availability of alcohol among 8th graders decreased. “It would appear that state and local efforts to crack down on sales to underage buyers, perhaps along with greater parental vigilance, have had an effect,” Johnston noted.
- The perceived risk associated with using inhalants, ecstasy and LSD continued to decline.

CADCA has developed a [Media Outreach Toolkit](#) to help you obtain local media coverage of the Monitoring the Future findings. Help us educate the public about substance abuse by taking advantage of these tools! Visit www.monitoringthefuture.org for more information on the 2009 Monitoring the Future survey.

Save the Date:
February 9-11, 2010
PORTLAND, OREGON



Changing Communities for the Better

Building Sustainable Community and Faith Based Organizations and Neighborhood Partnerships

- **Learn how to:**
 - Build a Strong and Sustainable Organization through Board Development
 - Employ Effective Marketing Strategies to Gain Funders Interest
 - Prepare Your Organization for Long Term Sustainability through Strategic Planning
 - Fundraise, Develop Relationships with Donors, and Develop a Fund Development Strategy
 - Establish Essential Business Practices
 - Use Program Outcomes and Evaluations to Attract Funders

THIS TRAINING IS FREE

Space is LIMITED! Sign up NOW! First come is first served!

Priority given to community, grassroots & faith-based organizations in Oregon Counties

For additional training information, contact: Ernestine Coghill-Howard at ecoghill@aol.com

To complete and submit the registration visit:

<http://events.SignUp4.com/SAMHSAOREG2910>

Meeting Location: Crowne Plaza Portland Convention Center, 1441 NE 2nd, Portland, Oregon

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