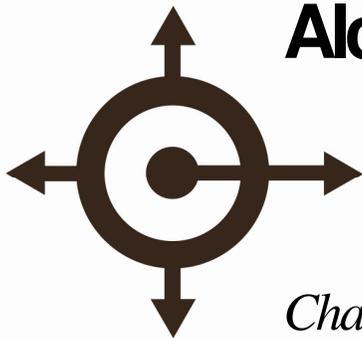


PO Box 1660
Green Bay, WI 54305
www.bayareacommunitycouncil.org

Fall 2010 THIRD EDITION

A study and recommendations by
Bay Area Community Council



Alcohol Abuse in Brown County

Changing Our Community Culture of Acceptance

Purpose and History of the Bay Area Community Council

In 1989, The Green Bay Area Chamber of Commerce adopted a strategic plan in which it expressed a desire to promote the general prosperity and quality of life of the greater Green Bay area. As part of the implementation of that plan, a task force recommended the establishment of a community strategic planning council. This recommendation resulted in creation of the Bay Area Community Council (BACC). Established in 1990, BACC is a Brown County citizens' think tank made up of volunteers representing business, education, community, and government.

Mission Statement

With awareness of current issues, BACC provides Brown County with insight into future issues of our community through:

- Examination of anticipated community concerns that affect the growth and health of Brown County.
- Analysis of those issues through rigorous discussion and discovery.
- Effective communication of those issues to the community.
- Engaging the community in the issues.

Objectives

To ensure that the identified issues become part of the total vision of community efforts, BACC will endeavor to:

- Articulate the vision.
- Measure critical indicators.
- Coordinate strategies with broad-based community interest groups.
- Coordinate strategies with public sector planning and regulatory groups.
- Identify a process for stakeholder participation in planning and implementation.

Foreword

Our charge as BACC directors is to make ourselves aware of community issues, analyze them and engage the community in providing solutions to long-range problems by making specific, measurable recommendations for action.

BACC has done studies on sustainability, social capital and tax base sharing. In May 2007 we probed poverty and made recommendations stressing the urgent need to make those in poverty more self sufficient. In September we re-focused constructive attention on immigration.

We have found chilling similarities between poverty and alcohol abuse. Both can stem from lessons ignored early in life and a lack of positive adult role models for children. Both can infect generations.

We assembled a task force combining the community view of BACC members with the specialized knowledge of those who deal with abuse and those building coalitions to combat it.

The task force (names on Page 21) began by considering both alcohol and drug abuse. But trying to deal with both made our process unwieldy. Drug abuse is widespread and destructive. But we see alcohol abuse as the bigger problem, affecting more people and having more costly consequences. In addition, alcohol often is a gateway to use of illicit drugs.

We are not advocating prohibition. Responsible use of alcohol is an acceptable part of life. Alcohol is legally sold and taxed. Better use of that framework can help control abuse.

After discussion among our 24 directors, research, scores of interviews and a forum in August 2009, (see appendix) we believe that nothing short of cultural change will alleviate abuse.

This draft is a starting point for that process of change. We hope that discussion of the recommendations that follow will both broaden the scope of this paper and narrow community goals for action.

UPDATE – AUGUST 2010

If we had only known!

For decades, we have been warned of the dangers of excessive drinking and alcohol abuse, especially as they relate to the social costs attributed to such use. Unfortunately, the organizations issuing these warnings have been drowned out by the louder, better-financed group of alcohol advertisers, distributors, brewers and distillers. We can no longer afford to ignore the warnings. We WILL continue to wreak havoc on our society, and our bodies, if we fail to heed the advice – and scientific research – that clearly shows the damaging impact early alcohol use has on developing bodies.

Alcohol is a legal substance and is used, and frequently abused, as standard practice by the vast majority of Brown County citizens at social functions, gatherings, and during and after recreational activities.

This study was an educational journey by the Task Force as many members intuitively knew alcohol abuse was harmful to individuals, their families, and friends and places of employment. However, we did not realize to what extent generalized adult use and abuse plays in modeling and thus forming adolescent behavior. Nor did we fully understand the discoveries medical science has made proving how alcohol causes significant brain damage in adolescents and how much that impairs

mental, physical, and emotional development when they binge (4-5 drinks) as few as one or two times per month.

We did not understand how cultural expectation of easy access (every corner gas station) and tolerance for use (most social gatherings) impacts the behavioral acceptance by our youth. While it is true that not every adult misuses alcohol or that every youth succumbs to the peer pressures or to the lure of alcohol experimentation, use, and abuse, all too many do, and the carnage and cost are far higher than our community realizes or can tolerate.

We ultimately came to the conclusion that “We have met the enemy, and he is us!” This is a problem of recognition, law changes, and behavioral change that ultimately will yield cultural change. Such change does not occur by offering a white paper and talking about it for a few months. Our recommendations are a studied plan to make real impact on Brown County’s alcohol culture over decades and help responsible adults become positive role models for youth.

Executive Summary

To accomplish the long range goals outlined in this study, the BACC urges these **immediate, measurable actions** which are treated in more detail later.

In Brown County within the next twelve months...

1. The BACC along with the Partners in Education Drug Alliance (PIEDA) will work with the Brown County United Way to convene a **Community Summit** of all groups concerned with alcohol abuse in Brown County. The charge of this summit is to develop strategies which will foster an attitudinal change about alcohol use and abuse in Brown County. This effort must be motivated by **the need for individuals** to take responsibility for this change in attitude and behaviors.
2. The BACC will **challenge county and municipal leaders** to support and update ordinances that result in uniform codes of conduct regarding use of alcohol in their communities.
3. The BACC will **urge county and municipal leaders** to update local control of alcohol advertising and licensing procedures to match the 2006 code from the Washington, D.C.-based Beer Institute.
4. The BACC will support and challenge all the **law enforcement agencies** in Brown County to aggressively prioritize and report "zero tolerance enforcement" for alcohol-use laws in their jurisdictions.
5. The PIEDA will continue to target **parent networks** to reinforce their efforts to understand the consequences of underage drinking and help develop strategies to reduce underage drinking of alcohol.
6. BACC will call on **area health departments and health care networks** to identify and reinforce messages on the health consequences of drinking, especially of children.
7. The PIEDA will work with the prevention specialists in the **CESA 7** school systems to identify the various alcohol prevention and intervention programs, to support efforts to implement prevention programs at each grade level and to share best practices.
8. The BACC will develop a strategy asking human service advocates and providers to help **Brown County leaders** to understand the need to maintain programs for prevention and treatment and to add funding as economic conditions allow.
9. BACC and PIEDA will push Brown County leaders to establish an alcohol court based on the same principles of the new Drug Court and the Waukesha County model.
10. The BACC will challenge its sponsoring organization, the Chamber of Commerce, to work with the business community to understand the economic impact of alcohol abuse on efficiency and profitability and to develop strategies for reduction of alcohol abuse by its members and access to treatment for those abusing alcohol.

The BACC Alcohol Task Force will monitor progress on these recommendations and make periodic reports on the developments.

On the state level, in the next five years, the BACC urges citizen's groups to lobby the **Legislature to...**

1. Increase the excise tax on alcohol from 6.5 cents per gallon to 17.5 cents per gallon – average tax of surrounding states.
2. Use the taxes collected to help pay for the costs of alcohol abuse in Wisconsin including prevention efforts, treatment options and costs of courts and incarceration.
3. Stiffen the drunk driving laws to make the first OWI offense a misdemeanor and the second offense a felony.

The State Council on Alcohol and Other Drug Abuse released a report in 2010 identifying additional recommendations established by the Alcohol, Culture and Environment Workgroup (ACE). We support the findings in the report and will work to educate the community on its importance. The report includes recommendations for: Legislative or State Action, Municipal Action, Educators or Educational Institutions, Community Groups and Organizations, and Employers. The ACE report offered a broad vision for a healthy, vibrant Wisconsin with a balanced alcohol environment. Vision statements include:

1. All Wisconsin residents have the right to family, community and working life protected from injury, harm and other negative consequences of alcohol misuse.
2. All of Wisconsin's children have the right to grow up in an environment protected from the negative consequences of alcohol use, including overexposure to alcohol advertising.
3. Wisconsin's residents have the right to complete, accurate and impartial information on the effects and consequences of alcohol use and misuse beginning at a very early age.
4. Wisconsin residents who chose not to consume alcohol, for any reason, have the right to have their decision supported without judgment or pressure to consume alcohol.
5. All Wisconsin residents experiencing the effects of dangerous drinking or alcohol abuse should have access to treatment and care.

Vision statements taken from the ACE report (page 4); the full report can be found at:
<http://www.scaoda.state.wi.us/docs/ace/ace040110.pdf>

Brown County Has a Drinking Problem

Brown County has a drinking problem.

If steps are not taken to solve it, more lives will be lost or ruined, more tax dollars will be spent, more children will be harmed, economic vitality will be sapped and future generations will have to grapple with a bigger abuse problem.

Changing the sodden status quo will require more responsibility on the part of adults, better use of community coalitions and a fresh sense of urgency. Those goals can be reached by taking steps detailed below.

The starkest evidence of abuse is in highway carnage. From January 2006 through June 5, 2010, a total of 93 people died in crashes in Brown County. Fifty-two deaths were alcohol related with an average BAC of .208 – more than 2 ½ times the legal limit of .08. That's more than one a month for nearly five years.

But highway deaths are just the most visible and dramatic sign of abuse. Other evidence is found in data on crime, domestic violence, health-care costs from pre-natal to geriatric care made more complex and costly by abuse and economic loss due to the diminished productivity and dependability of heavy drinkers.

Relevant numbers:

A study of statewide data from 2006 by UW Health shows “at least 1,678 deaths, 5,654 injuries and 88,000 arrests as a direct result of alcohol use and misuse, as well as 239 deaths from alcohol-related liver cirrhosis.” UW Health put statewide costs in 2007 for alcohol-related accidents and health conditions at \$935 million.

Sadly, such information is often greeted with a civic shrug. “After all,” we say, “tipsy is part of our tradition. Drunk is in our DNA. We descend from European stock – Germans, Poles and Irish – who drink.” We say that to rationalize our behavior, but ignore the fact that most European nations have stronger anti-drinking policies, stricter drinking laws and tax alcoholic beverages more heavily than we do.

“It's part of our history,” we say. *Voyageur Magazine* reported in its Winter/Spring 2010 issue on a visit to Green Bay by former president Ulysses Grant in June 1880:

“Walking around the East River bridge, Grant commented on the ‘conveniences designed to satisfy bilious desires’ with one succinct observation: ‘Green Bay is the most convenient place in the world to get a drink of beer.’ He apparently concluded this after he noticed that ‘about every other building held out the enticing proffer of ‘two glasses of beer for five cents.’”

“This is Wisconsin,” people say. We love our beer and brandy, we need a bar in most social situations and government policies – state and local – keep the party going by making sure alcohol is widely available and cheaply sold.

According to the Milwaukee Journal Sentinel, there is one tavern for every 372 residents in Wisconsin, while the national average is one for every 1,400 residents.

That attitude supports a culture of alcohol abuse. Because the community can not afford to lose more lives and dollars, the Bay Area Community Council (BACC), Partners in Education Drug Alliance (PIEDA) and others are seeking a fresh start to reshape a deadly culture.

To that end, these long-range goals are vital:

Rankings

Wisconsin leads the nation in:

- Drinking among adults.
- Drinking among high-school students.
- Underage drinking.
- Binge drinking.
- Chronic heavy drinking among adults.

Source: AWARE, The Impact of Alcohol and Illicit Drug use in Wisconsin, 2007.

- **Adults must assume more responsibility for the messages they send minors. No adult should help a minor obtain alcohol. Minors abuse alcohol because adults allow them to drink.**
- **The organizations now doing good work to control abuse must work together more closely to coordinate their efforts and to provide a more forceful voice in discussions of public policies regarding alcohol.**
- **The community must realize that abuse kills, wastes millions of tax dollars and damages young drinkers.**
- **Most important, the community must develop a sense of urgency about the problem.**

Seventy percent (70%) of people do NOT have a problem with abuse of alcohol. If this population were to get energized, the behavior of the thirty percent (30%) who DO have a problem could be motivated to change or at least limit their consumption!

What We Say About Our Drinking

Since 1995, those responding to Brown County Quality of Life surveys have been asked about drinking. Figures have fluctuated. The percentage of those drinking in the last month has been as high as 74% in 2000 and as low as 38% in 2007. In general, younger respondents were more likely to drink than older respondents. When asked about having had five or more drinks at one time, an average of 36% said they had binge.

Analyzing data from 2007, St. Norbert College Professor Wendy Scattergood said that while the incidence of alcohol intake is down, binge drinking may be increasing. Binge drinking was highest among those with technical degrees or some college. The youngest age groups had the highest rates.

Independent of age, the longer one has lived in the county the more likely they are to binge drink. Income is also a factor. The highest incidence of bingeing is among those with \$70,000 to \$100,000 family income at 42% followed by 30% of those in the \$50,000 to \$75,000 category. Other income groups had rates in the 20% range.

Men are more likely to binge drink than women. Among women, 46% said they had not had any alcohol in the past month compared to 27% of men. 38% of men said they had at least five drinks in a single setting compared to 17% of women.

Charting progress toward the goals means answering three questions:

- Are fewer people being killed in alcohol-related traffic crashes?
- Do surveys show that the age at which young people first use alcohol is rising?
- Do studies of community benchmarks show decreases in the numbers of binge drinkers?

Many steps might be taken to meet the goals. The BACC believes the following will be the most productive:

- Collaborative efforts within Brown County.
- Statewide initiatives in which county residents have a voice.
- Individual actions to make them happen.

Brown County residents can:

1. Convene a community summit of groups now involved in decreasing abuse

The BACC along with the Partners in Education Drug Alliance (PIEDA) will work with the Brown County United Way to convene a Community Summit of all groups concerned with alcohol abuse. The goal is to develop strategies which will foster an attitudinal change about alcohol use and abuse. This effort must be motivated by the need for individuals to take responsibility for this change.

PIEDA, school systems, churches, health-care providers, law-enforcement agencies and others now work hard to hold the line on alcohol problems. They will benefit from coming together to make sure their efforts cover the many aspects of abuse and that those efforts are not duplicative.

There are resources available to help:

First is the All-Wisconsin Alcohol Risk Education (AWARE) program of UW Health. Its goals are to reduce drunk driving, decrease underage drinking and prohibit insurance companies from denying claims for accident victims who test positive for alcohol and other drugs. AWARE has a database and strategies that can help local groups.

Second is the Wisconsin Initiative to Promote Healthy Lifestyles. It provides cost effective, evidence-based services at 20 clinics where patients 18 and older are screened for alcohol and drug abuse. The initiative uses federal funds administered by the state Department of Health and Family Services. Given the evidence of abuse in Brown County, efforts must be made to offer those services at local hospitals and clinics.

Third, PIEDA has for several years used state and federal grants and other funds to develop strategies to combat alcohol abuse. Those include leadership training (especially for teens) and attending national summits and conferences to evaluate what is done elsewhere. PIEDA has granted a minimum of \$20,000 a year for programs including graduation-night alcohol-free parties and parent-involvement rallies. Annual campaigns include Parents Who Host Lose the Most.

In 2009, PIEDA was awarded a Strategic Prevention Framework – State Incentive Grant as one of 20 community-based coalitions in Wisconsin addressing substance abuse. The grant criteria call for an approach that cuts across existing programs and systems and is part of a comprehensive community prevention plan. PIEDA's priority is to reduce drinking by 12-20 year olds.

Grants, which helped sponsor the August 2009 forum, will allow PIEDA to expand partnerships with businesses, education, health care, law enforcement and others. The emphasis is on using evidence-based strategies to protect young people and to reduce the cultural acceptance and risks tied to alcohol abuse.

Community groups do not have to start from scratch. There are organizations working statewide. They have data, strategies and funds to help local coalitions.

2. Update local ordinances regarding use of alcohol.

The BACC will challenge county and municipal leaders to update ordinances so there are uniform codes of conduct regarding abuse of alcohol in their communities.

Licensing alcohol is a municipal responsibility with significant economic and social consequences. How your municipality licenses alcohol to be sold and served is a significant factor in the local alcohol

environment. Local governments control the number and placement of bars and restaurants, liquor and convenience stores, permits for events and other alcohol outlets.

The goal is to make sure that such ordinances are applied and enforced consistently. As with zero-tolerance law enforcement policies, success will depend on the support of elected officials. They must understand the price the community pays for alcohol abuse and make that clear as they deal with licensing and advertising.

Progress can be measured by measuring existing ordinances and by making sure local governments follow at least the minimum standards endorsed by the alcohol industry.

Examples of local control

- Limit alcohol advertising to prevent youth overexposure
- Mandate on-going comprehensive alcohol age compliance checks
- Regulate alcohol tasting in Class A establishments
- Adopt ordinances establishing significant forfeitures for adults who provide a safe haven for underage drinking, pour or provide alcohol for three or more non-related youth on their property
- Establish beer keg registration procedures

Suggestions based upon the Alcohol, Culture and Environment Workgroup Recommendations for Municipalities; April 2010 SCAODA

3. Make sure there is consistent local control of alcohol advertising and licensing.

The BACC will urge county and municipal leaders to update local control of alcohol advertising and licensing to match the 2006 code from the Washington, D.C.-based Beer Institute.

The community can do little to control the barrage of media advertising, especially on television and frequently on the Internet that shows drinking as an attractive, consequence-free, activity. But communities can control billboards, window displays and other signage.

Ordinances endorsed by the alcohol industry, such as the 2006 guidelines from the Beer Institute, prohibit advertising of beer and other products within 500 feet of elementary and secondary schools, places of worship or public playgrounds. The code also says that beer should not be advertised or marketed at any event where most of the audience is expected to be minors. Municipalities can also influence alcohol displays in supermarkets and convenience stores. School officials and governmental officials could meet to develop policies limiting alcohol advertisements within 500 feet of schools and parks based on industry codes; to ask moving beer trucks with side bar adds to stay away from streets and parks where children are involved; and to inform parents and advocate for removal of alcohol sponsored games at schools, on Internet, at tournaments.

These guidelines would represent the minimum level of control applied to all alcohol-beverage advertising in Brown County.

4. Insist on uniform, zero-tolerance law enforcement.

The BACC will support and challenge all law enforcement agencies in Brown County to aggressively and uniformly enforce “zero tolerance laws” for alcohol abuse.

At the 2000 forum, Hartland Police Chief Robert Rosch described his community’s anti-abuse efforts. By using Hartland as an example, we do not disparage law enforcement in Brown County. But the Hartland program can serve as a checklist for police efforts here. In particular, success here must include full support from local elected officials and must hold parents responsible for the alcohol-related behavior of their children.

Hartland is a community of 8,500 in northern Waukesha County about half an hour from Milwaukee. Rosch describes it as affluent. Hartland's approach, Rosch says, is to apply consistent effort to hold offenders, parents of young drinkers and police accountable. Such policies must have the support of elected officials, he says.

The goal is to fight alcohol abuse from "every possible angle." Weapons include \$429 fines for adults who provide alcohol to minors, bans on open intoxicants in public, nuisance property citations and compliance checks to make sure alcohol is not sold to minors. Parents can be cited for failure to supervise their children when minors drink.

School involvement includes staging a prom-night accident in which students are chosen at random and told they have been killed in an alcohol-related crash, mandatory notification when there is a police contact with a student and mandatory drug testing. Officers must make arrests for underage drinking and OWI offenses, Rosch says.

We urge police officials in Brown County, who now meet regularly, to look at the Hartland example to make sure that local efforts at least match its intent and scope. Police officials could develop recommendations for community standards based on the Hartland police standards that address at-home parties for underage drinkers, limited "happy hour" pricing, keg registration and other issues.

A key part of effectiveness of the laws will be the "fear of enforcement". This "fear" has to be expanded to not only include police departments, but also prosecutors and judges who will consistently adjudicate those cases. Furthermore, the community needs to support these efforts by asking – even demanding – that law enforcement officers, judges, and prosecutors apply the full measure of the law to the cases. Law enforcement also must utilize all the tools at their disposal to help reduce underage drinking, including increasing alcohol age compliance checks and party patrols, especially during peak times (i.e. prom, graduation, summer, etc.).

5. Spread the word on the health effects of alcohol abuse.

The Partners in Education Drug Alliance will continue to target parent networks to reinforce their efforts to understand the consequences of underage drinking and help develop strategies to reduce underage drinking of alcohol.

BACC will call on area health departments and health care networks to identify and reinforce messages on the health consequences of underage drinking.

Most of us understand that alcohol abuse has serious health consequences. They range from the devastating effects of fetal-alcohol syndrome to adult lives shortened and made miserable by diseases such as cirrhosis. But there is an urgent message to be broadcast about research showing specific risks for young drinkers.

Here are examples:

The American Medical Association says research shows that the brain is still developing at ages 12 to 20 and "damage from alcohol at this time can be long-term and irreversible. Even short-term and moderate drinking impairs learning and memory far more in youth than adults."

The alcohol industry targets young women for sale of "alcopops." Those are "fruit-flavored, malt-based drinks that come in colorful

Definitions

A standard **drink** contains about 14 grams of pure alcohol (about 0.6 fluid ounces or 1.2 tablespoons). This is the amount usually found in a 12-ounce beer, a 4-5-ounce glass of wine, or a 1.5 ounce shot of 80 proof liquor. The alcohol content of mixed drinks and some wines and beers may be higher.

Bingeing is a pattern of drinking that brings blood alcohol concentration (BAC) to a .08 gram percent or above. For the typical adult, this corresponds to five or more drinks for a man or four or more drinks for a woman in about two hours.

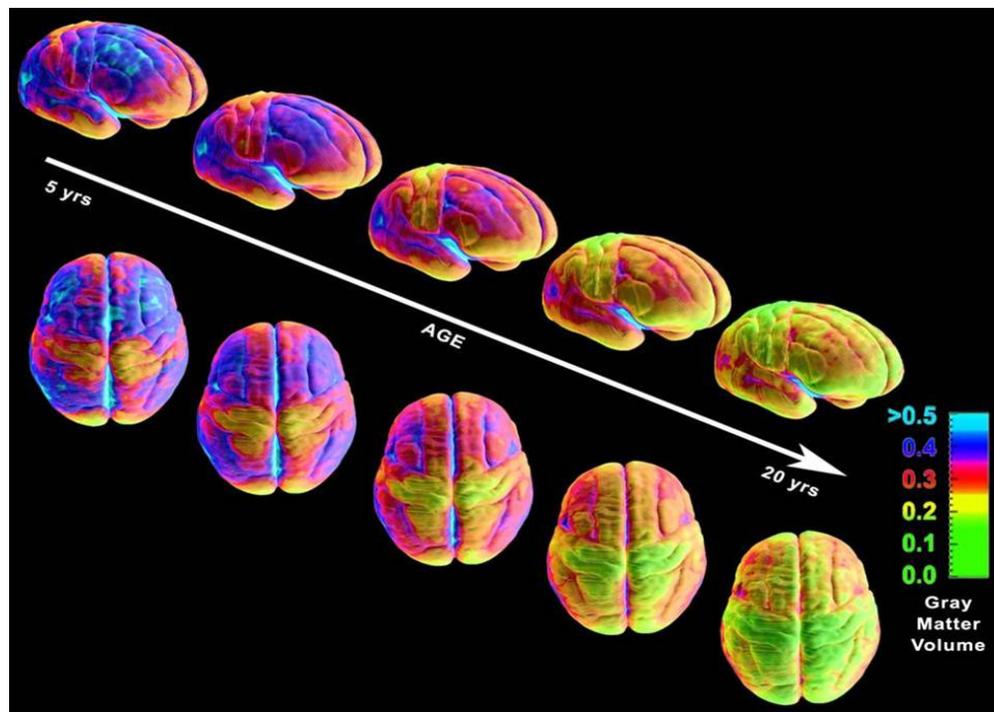
OWI (Operating While Intoxicated) is the operation of a motor vehicle with a BAC of .08 or above.

Sources: AWARE, National Institute on Alcohol and Alcoholism, Wisconsin statutes.

child-oriented packaging. The sweetness and flavoring hide the taste of alcohol,” the AMA says. Such drinks put young women at risk of becoming teen mothers (up to 63% of girls who binge are likely to become pregnant). Heavy alcohol use by girls increases the risk of osteoporosis, the likelihood of suicide and the risk of menstrual disorders and infertility.

Research shows that drinking to intoxication can negate as much as 14 days of training by young athletes. Reaction time can be affected 12 hours after alcohol is consumed. Athletes who drink are more likely to be injured and have slower recovery times than non drinkers.

As science becomes more sophisticated and technology provides a clearer picture of the inner workings of the body, especially the brain, so does the need for a better understanding of the profound negative effect alcohol has, especially on youth. Some of the most compelling data comes from numerous brain studies conducted showing the deterioration of the brain after heavy alcohol use. Previous studies indicated that most brain development occurs between the ages of birth to 3. However, findings from the UCLA Brain Development Study, shows a significant increase in brain development occurring with hormonal onset – approximately age 12 and continues into the early to mid-20's.



Orange and yellow indicates developing areas of the young brain and illustrate the timeframe at which these events occur. The brain regions are associated with reasoning, moral reasoning and decision making. Alcohol use during this pivotal time frame takes a heavy toll on the brain's ability to properly develop and become fully functional. The unfortunate outcome of youth alcohol use is that if these critical events are affected during this developmental phase then damage, deficits, or reduced capacities may be lifelong.

Source: Images taken from a UCLA Brain Development Study as cited by the American Athletic Institute.

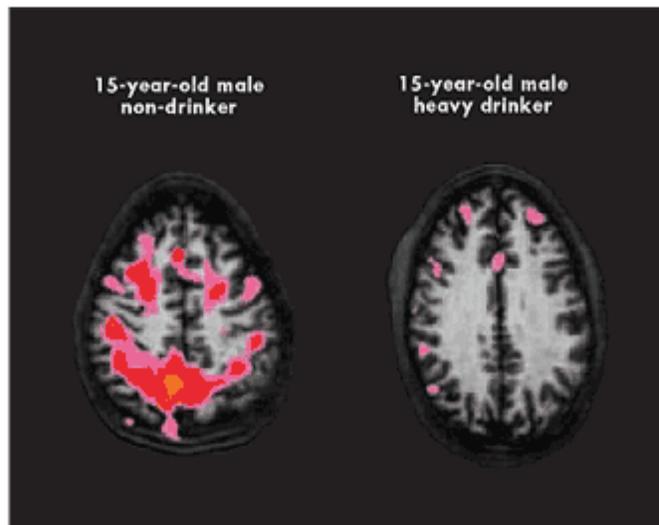


Image from Susan Tapert, PhD, University of California, San Diego.

The brain images at left show how alcohol may harm teen mental function. Compared with a young non-drinker, a 15-year-old with an alcohol problem showed poor brain activity during a memory task. This finding is noted by the lack of pink and red coloring.

6. Work with area health departments and health care networks

We urge health-care providers to use their print and electronic advertising, newsletters, magazines, outlets such as Facebook, waiting-room material, website videos, public-service announcements, personal contacts and other means to warn their patients and the community about risks. Health care providers can include SBIRT questions into initial screenings, annual check ups and other interactions. Furthermore, we strongly encourage pediatricians to include information for parents at well-child check ups. As the average age of alcohol use in Wisconsin gets younger, it is even more imperative for parents and doctors to work together to inform youth and parents of the dangers of early and excessive drinking, provide plans of action for interventions and be a source of support for families in need.

Effectiveness of this recommendation can be measured by the amount of such information disseminated by providers.

7. Support and strengthen work done by schools, especially efforts providing positive adult role models to the youngest students and innovations enlisting high-school students and their parents.

PIEDA will work with the prevention specialists in the CESA 7 school systems to identify alcohol prevention and intervention programs, to support efforts to implement prevention programs at each grade level and to share best practices.

Public and private schools have long provided comprehensive programs to both educate students and to protect them from abuse.

What is SBIRT?

Screening: quickly assesses the severity of substance abuse use; identify the appropriate level of treatment.

Brief intervention: increase insight and awareness of substance abuse; provide motivation for behavioral change.

Referral to Treatment: provide access to specialty care for those needing more extensive treatment.

Source: <http://sbirt.samhsa.gov>

As an example, the Green Bay Area Public Schools offer information and programs early in elementary school and running through high school. About a dozen social workers are involved along with the teachers who provide classroom information.

Specific efforts include prevention and intervention services by Alcohol and Other Drug Abuse (AODA) specialists, working with the Drug Abuse Resistance Education program, supporting an anti-gang effort, involvement in Parents Who Host Lose the Most, working with community and educational groups and conducting a youth risk behavior survey. Results are used to focus programs and efforts and must be used to track community progress against abuse.

An example of innovation is found at De Pere High School which in May 2007 adopted a co-curricular code of conduct. Students taking part in any co-curricular activity – not just sports – must agree to participate in “random suspicionless drug testing” at school events. Parental consent is required for minors.

Unfortunately, the work schools do often is undercut by parental and community attitudes. As Janelle Peotter, Green Bay district social worker, told us, “children who have poor attendance and achievement in elementary school often have parents with underlying AODA issues. Use the night before may prevent them from getting out of bed in the morning to get their children off to school.” Parental alcohol abuse “sets up an environment that makes school attendance and homework follow-through as less than a priority. These issues transform into truant students at the middle and high school levels.”

Young people are aware of abuse, “but they are not aware of the seriousness of the issues,” Peotter said. “Use and abuse in the form of bingeing is so normal that the perception is ‘everybody is doing it so it must be okay’ . . . There is a disconnect between the lessons they are taught about the use of alcohol and other drugs and the behavior they see modeled around them on a daily basis.”

Another caution comes from Julia Sherman, keynoter at the UWGB alcohol forum and Coordinator of the Wisconsin Alcohol Policy Project. She cites research questioning the positive effects of school-based information programs. Given data from an annual survey of youth risk behavior showing that about half of state students begin drinking at 14 or younger, Sherman says “it is clear earlier programs are needed.”

We urge schools to heed that concern. Parents must offer teachers and abuse specialists more support both by being good role models and by making concerns about alcohol abuse part of the agenda of parent network groups.

That help is necessary because too many of society’s ills are dumped on schools that must deal with children in poverty, who are homeless, who live amid domestic violence, parental addiction and other problems.

We also urge De Pere and other schools using a code-of-conduct approach to measure data on abuse, especially its effect on academic performance, to share that information and to tweak programs as they learn what works best.

Risky behavior

According to Youth Risk Behavior Surveys done between 2007 and 2009 in Brown County schools, alcohol use (one or more drinks in the past 30 days) by high school students ranged from 47% to 60%. Approximately 15% of eighth graders drank in the last 30 days and about 37% of seniors said they had driven after drinking in the last 12 months.

State students reported the highest rate of current alcohol use (49%) among all reporting states in 2007. The average age of on-set of alcohol use in Wisconsin is 14 or earlier.

8. Stress the fact that early assessment of abuse and effective treatment can prevent or alleviate costly long-run problems.

The BACC will develop a strategy asking human service advocates and providers to lobby Brown County leaders to understand the need to maintain programs for prevention and treatment and to add funding as economic conditions allow. In fiscal 2005, about \$52 million was spent statewide on prevention. That same year, nearly \$2 billion was spent on adult and juvenile corrections, much of it tied to substance abuse.

Many health and social services groups provide programs to treat alcohol and other addictions. While costly, such treatment often is effective, especially when it is available early. But treatment draws only a small part of the tax funds spent on substance abuse.

One tool that is not used as often as it could be is the Screening, Brief Intervention, and Referral to Treatment (SBIRT). According to the Substance Abuse and Mental Health Services Administration, SBIRT is a comprehensive, integrated public health approach to the delivery of early intervention and treatment services for people with substance use disorders, as well as those who are at risk of developing these disorders.

In addition, reimbursement for screening and brief intervention is available through commercial insurance, Medicare, and Medicaid. Regular use of SBIRT could help medical professionals identify early warning signs in their patients and help them deal with issues early rather than waiting until the evidence includes destructive personal, family, work and societal behaviors.

Another promising tool is the drug court which steers abusers into treatment. Brown County's Drug Court is too new to have produced much measurable data. But there is information from other parts of Wisconsin.

For example, judges from Monroe, Trempealeau, Jackson, Pierce and Eau Claire counties told Senator Kathleen Vinehout that "lengthy jail or prison sentences are not an effective way to treat alcoholism... It's more cost effective to treat people in the community . . ."

The annual cost per participant in a drug court for testing, treatment and services for felony offenders is \$7,535 compared to \$28,000 for a year in prison. Annual county jail costs are about \$14,000 and the cost of probation and supervision is about \$9,000 annually", Vinehout said.

A greater share of what is being spent on abuse can be aimed at prevention and treatment. Community coalitions that form around substance abuse must make that clear.

9. BACC and PIEDA will push for Brown County leaders to establish an alcohol court based on the same principles of the new drug court and models in other counties, including Winnebago and Waukesha.

According to Brown County Circuit Court Judge Donald Zuildmulder, who coordinates the Drug Court and advocates for an Alcohol Court, there are many variables that go into working with individual alcohol lawbreakers, including current situation, past history, who they are, etc. The objective is to remediate ongoing abusive behavior as inexpensively and effectively as possible, which requires a case-by-case analysis.

Alcohol courts, such as the one in Waukesha County, offer services to repeat intoxicated drivers by teaching them skills to help them live a pro-social life and improve their chances of sobriety. The goal is to reduce the number of OWI repeat offenders by allowing them to participate in AODA treatment programs with intensive monitoring.

10. Work with the businesses community to understand the economic impact of alcohol abuse (Recommendations as reported from the ACE Final Report)

Alcohol use can be influenced by employers' expectations as well as the community alcohol environment. Furthermore, alcohol related problems can have multiple impacts in the workplace - decreased production, increased health care and workman's compensation costs. Employers must educate their employees on the multiple issues associated with excessive alcohol use. This issue is further complicated by the significant and complex legal issues and health implications surrounding alcohol use.

Private costs

Alcohol abuse costs employers hundreds of millions of dollars a year in Wisconsin.

The state estimates that expenses and losses related to substance abuse average about 25% of the salary of each worker affected. In Brown County, the private cost has been estimated at \$129,000,000 a year. Added to the public costs, that raises the substance abuse total to about \$234,00,000 a year, or roughly \$1,000 per county resident.

Heavy alcohol users have workplace accident rates two to three times higher than normal, are five times more likely to file a worker's compensation claim and 2.5 times more likely to have absences of eight days or more.

Source: Drug Abuse in the Workplace: An employer's guide for prevention. EAP Digest.

As a starting point, we encourage employers to:

- Evaluate their workplace alcohol environment/expectations.
- Ask supervisors to model appropriate alcohol use.
- Adopt a policy requiring absolute sobriety for employees during business hours.
- Include SBIRT as part of the employee health package.
- Provide follow-up services as part of the employee assistance program for alcohol abuse to reduce the likelihood of relapse.

Furthermore, we support ACE's recommendation to convene a diverse workgroup to review policies and practices that impact the workplace alcohol environment. The group should include representatives from: manufacturing, service sector employers, organized labor, workplace safety experts, labor lawyers and industrial health care professionals.

County residents must be heard on state issues

On the state level, the BACC urges citizens groups to lobby the Legislature in the next five years on a variety of related issues...

I. Rethinking the excise tax on alcohol

Wisconsin should increase the excise tax on alcohol from 6.5 cents per gallon to 17.5 cents per gallon – the average tax of states surrounding Wisconsin.

Discussion of Wisconsin's beer tax generally focuses on two points. First, that the tax of 3.65 cents a six-pack is the nation's third lowest and has not been changed since 1969. Second, that any efforts to raise the tax – even to use the revenue for abuse prevention and treatment – are likely to be futile given the opposition from the Tavern League of Wisconsin and others.

(We don't mean to demonize the League. It is a trade association that works to serve its 5,000 members. Taverns and others in the League are an important part of the state economy and its social fabric. The League is on record in desiring to protect "against the effects of alcohol abuse." But its focus on keeping alcohol taxes low and OWI penalties lenient contributes to Wisconsin's drinking problems.)

There is another way to approach the situation. That is to use the clear argument that taxpayers spend hundreds of millions of dollars a year subsidizing abuse.

There are various estimates of the cost. The Wisconsin Initiative to Promote Healthy Lifestyles says alcohol and drug abuse result in a "toll of \$5 billion each year paid for by our health care, social services, and criminal justice systems – and, ultimately, by our taxpayers." UW Health estimated costs in 2007 for alcohol-related accidents and health conditions at \$935 million. AWARE also notes that in 2005, state spending on substance abuse (a category that includes drugs and tobacco) was \$2.437 billion.

Taxing matters

The Wisconsin beer tax was created in 1933 and set then at \$1 a barrel. In 1969 – 36 years later – it was raised to \$2 a barrel. It has stayed the same for 40 years. If indexed for inflation, the tax created in 1933 would now be \$16.12 a barrel.

Wisconsin has the third lowest beer tax in the nation at 6.5 cents a gallon.

Per-gallon beer tax rates in surrounding states are 15 cents in Minnesota, 18.5 cents in Illinois, 19 cents in Iowa and 20 cents in Michigan.

Source: Federation of Tax Administrators, 2008

2. Making proper use of the excise tax

Wisconsin should use the taxes collected to help pay for the costs of alcohol abuse in the state, including prevention efforts, treatment options and costs of courts and incarceration.

Current taxes on alcohol come nowhere near paying for abuse treatment and prevention. In fiscal 2007-08, alcohol excise taxes produced \$54,789,233. Using AWARE's data, there is a nearly \$900 million gap between what the state collects in alcohol taxes and what it spends to repair and prevent damage caused by alcohol. AWARE estimates the per capita cost of substance abuse treatment at nearly \$439 in 2005.

Let's rephrase the issue: It is not a matter of raising a tax. It is a matter of closing the gap between the cost of alcohol abuse and the tax money collected to deal with abuse.

A vivid example of the current situation was a bill in the last Legislature that would raise the beer tax to \$10 a barrel from \$2 a barrel – its rate for 41 years. That such a bill got a hearing is a sign of progress. The alcohol lobby was opposed, arguing that a higher tax will hurt businesses. The increase would raise an additional \$9.4 million annually. Given the gap between what taxes raise and what abuse costs, that is small change.

However, stressing the burden abusers put on both those who drink sensibly and those who do not drink can change policy discussions. That is especially true if community coalitions unite in support of closing the abuser loophole.

3. Strengthening drunken driving laws

Wisconsin should stiffen the drunk driving laws to make the first OWI offense a misdemeanor and the second offense a felony.

Wisconsin is far too lenient with drunken drivers. It is the only state that does not treat first-offense drunken driving as a crime. Look-the-other-way laws allow drunks to stay on the road.

A law was recently passed mandating the use of ignition interlocks for OWI offenses in which the driver's blood-alcohol content is at least twice the .08 minimum and making drunken driving a felony starting with the fourth OWI offense.

A better approach would make a first offense a misdemeanor and add felony penalties beginning with the second offense. That would send the message that drunken driving is a crime. Passing laws tough enough to deter alcohol abuse will require more public support. But many legislators will do the right thing if they are shown the damage and costs of alcohol abuse. Broad support for meaningful change from community coalitions and from individuals will help make a difference.

Public support

A survey done in March 2009 shows strong public support both for increasing the beer tax and for strengthening enforcement of drunk-driving laws. 57% of residents favor increasing the beer tax with part of the revenue dedicated to treatment and prevention and law enforcement. 62% believe it is important to both strengthen enforcement of laws and fund programs to treat and prevent abuse.

Source: The Mellman Group Inc. for UW Health

A role for individuals and families

Alcohol abuse is a societal and cultural problem. But it begins with individuals and families and their use of alcohol. Changing the culture requires change from individuals, especially parents, who should:

- Seek a medical assessment about the risk their current drinking habits carry and project those risks into the future.
- Keep alcohol away from minors. Parents have an obvious duty to protect their children, even if that means locking up the alcohol supply. But all adults share in the responsibility.
- Join with others to strengthen existing coalitions working to alleviate abuse.
- Support the work being done by school systems.
- Support local law enforcement efforts to control crime tied to alcohol abuse especially OWI and domestic abuse.
- Support officials who will work to control abuse. On the state level that means those who understand the need for stricter OWI laws and those open minded about how alcohol tax dollars are raised. On the local level that means those who will use their licensing and enforcement authority intelligently.
- Understand that alleviating abuse may mean spending money, but that allowing the status quo will only inflict deeper and more costly damage.
- Work in their businesses, social and civic organizations to make sure that alcohol is used responsibly in those settings.

Some other good ideas

Public service announcements sponsored and paid for by businesses (like Tavern League members and alcohol distributors) on TV, radio and Web and coordinated by PIEDA, could focus on the need for responsible use of alcohol. Such a five year program could be incremental in scope and intensity.

A coalition among area churches could be formed to address parent education regarding addictions and child development issues and alcohol/drugs; responsible drinking of church members; sponsorship of AA groups and others addressing treatment options; responsible limitation of alcohol sales at church functions

Area medical institutions could develop recommendations for their hospitals, clinics, and practitioners to educate patients regarding responsible use of alcohol and reduction of use by everyone. Literature could be handed to patients regarding alcohol use; patients could be questioned at exams about potential alcohol danger signs; families could be told about the impact of alcohol use on the young and their brain development; and parents could be reminded about their role in modeling and teaching responsible alcohol use.

To sum up, we make two points

First, despite today's grim statistics and heavy costs tied to abuse, some progress has been made to change community attitudes.

Many businesses are more aware of alcohol abuse and wisely limit its use at company functions. The liquor-raffle and beer tent have disappeared from many church picnics and similar events. The Green Bay Packers have taken steps to limit drinking at Lambeau Field. Local news coverage and editorial comments show that the Press-Gazette, radio and TV stations are aware of the dangers of abuse.

More people are aware of the need to stay healthy and limit alcohol intake as a result. Despite heavy peer pressure, many young people do take to heart the lessons they have learned in school about the dangers.

Those are all signs that cultural change is possible, that the community does not have to shrug its shoulders and accept wide-spread alcohol abuse.

Second, we note a participant in the 2009 August forum who said that “at some point it is up to parents” to control alcohol abuse by minors. Let’s expand that to say it is up to adults to change the attitudes that support a culture far too tolerant of alcohol abuse.

Adults produce, sell and buy alcohol. They elect the people who enact and enforce laws and ordinances that control the availability and cost of alcohol. Adults supply the alcohol that damages children and often sets them on a path to non-productive lives.

Far too many adults do not set good examples. They abuse alcohol and children follow their example. Unless that changes, the costs of alcohol abuse – in early deaths, in ruined lives, in higher tax and health-care costs – will continue to weaken the community.

The recommendations made here can provide measurable steps toward the goals of having adults assume more responsibility, of bringing together more effectively those working to control abuse and of helping the community realize the need for urgent action.

We cannot afford NOT to act! We hope you will agree.

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Dr. Regan A.R. Gurung, president 2010; *professor of psychology and human development, UW-Green Bay*
Dennis Rader, president-elect 2011, *retired attorney*
Rose Smits, president 2009; *retired executive director of Encompass Early Education and Care*
Nan Nelson, secretary-treasurer; *Green Bay Area Chamber of Commerce executive vice president*
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ALCOHOL USE TASK FORCE

Rev. Paul Demuth, BACC, co-chairman
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Patricia Finder-Stone RN, BACC
Dr. Regan A.R. Gurung, BACC
Judy Nagel, BACC
Mary Miceli-Wink, AODA counselor Brown County Human Services
Patrick Ryan, Libertas Treatment Center, Partners in Education Drug Alliance president
Nancy Schopf, Partners in Education, Green Bay Area Chamber of Commerce
Bob Woessner, BACC

Appendix

The following contributed to this report by providing information in interviews, being part of the 2009 community forum program or attending that event and participating in discussion groups:

Jim Arts, Green Bay police chief
Jeanne Agneessens, Leadership Green Bay
Ashley Arbour, Green Bay West High School
Rachel Bartels, Green Bay West High School
John Benberg, executive director, Boys and Girls Club of Green Bay
Derek Biederwieden, De Pere police chief
Tammie Blaney, Department of Public Instruction
Amie Bomber, Ashwaubenon High School
Annette Brace, DePere High School principal;
Mary Charles, Girl Scouts
Rob Cowles, Wisconsin state senator
Terri Delaruelle, Family Services
Dave Hansen, Wisconsin state senator
Amy Henningus, St. Vincent Hospital
Steve Herro, St. Norbert Abbey
Tom Hinz, Brown County executive
Sarah, Inman, Brown County United Way
Jany Kong, Green Bay East High School
Kris Kovacic, Brown County Tobacco-Free Coalition
Susan Kowalczyk, St. Vincent Hospital
Vern Krawczyk, NWTC Responsible Beverage Server Instructor
Dawn Kreuser, Village of Bellevue
Dan Larson, Com-Video
Dr. Mel Lightner, Pulaski School District superintendent
Eileen Littig, NEWIST/CESA 7
Tom Locy, Community Volunteer
Joyce McCollum, League of Women Voters-Greater Green Bay
Ruth Meyers, Bellin Psychiatric Hospital
Rick Miceli, Brown County AST-CFSU
Phil Montgomery, Wisconsin state assemblyman
Tom Nelson, Wisconsin state assemblyman

Christy Niemuth, University of Wisconsin Population Health Services
Dr. Mary Oling-Sisay, St. Norbert College dean of students
Mark Olkowski, UW-GB Counseling & Health Center
Janelle Peotter, Green Bay Public School District AODA coordinator
Kayla Pluger, Green Bay West High School
Melinda Pollen, Partners in Education
Larry Rand, Brown County Tavern League
John Ravizza, Notre Dame Academy principal
Marlene Regan, UWGB substance abuse specialist
Pam Robinson, Village of Howard
Sue Robinson, Brown County Tavern League
Robert Rosch, Hartland Police chief
Lisa Schmelzer, Partners in Education
Leslie Schmidtke, Bayport High School
Jason Schraufnagel, Boys & Girls Club
Julia Sherman, Coordinator, Wisconsin Alcohol Policy Center
Annie Short, NEW AHEC
Jim Soletski, Wisconsin state assemblyman
Andy St. Aubin, St. Mary's Hospital
Brandon Stevens, Oneida Tribe of Indians of Wisconsin
Charles Teege, Village of Denmark
Kathy Thomas, WI Division of Mental Health & Substance Abuse Services
Melissa Tyson, St. Norbert College Circle K service club
Rich Van Boxtel, Oneida Tribe of Indians of Wisconsin police chief
Ben Villaruel, DePere schools superintendent
Elaine Wagner, Green Bay YWCA
Henry Wallace, Military Officers Association of America;
Chris Wardlow, Wisconsin Prevention Network
Brent Weycker, Tiletown Brewing Co.



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