MONTANA'S ALCOHOL CLIMATE

2015 ALCOHOL PERCEPTION SURVEY —a summary of results— September 2016

> Report produced for the Chemical Dependency Bureau Montana Department of Public Health & Human Services by Montana KIDS COUNT

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EXECUTIVE SUMMARY

Background

Montanans have higher prevalence rates of alcohol consumption and substance abuse than residents of most other states, a behavioral pattern that has been manifest practically since

the Old West. With a shift in public health focus from treatment of individuals to prevention within populations, the Montana Department of Public Health and Human Services (DPHHS) is working to establish effective prevention practices across the state, aided in part by federal grant funding from the Substance Abuse and Mental Health Services Administration (SAMHSA).

One such grant, the Strategic Prevention Framework-Partnership For Success (SPF-PFS), was awarded to DPHHS's Chemical Dependency Bureau for the period 2013-2017 to prevent underage drinking and to prevent the misuse and abuse of prescription drugs among Montanans ages 12 to 25. Under the SPF-PFS, a variety of strategies are being implemented across the state, including alcohol compliance check programs in all 56 counties, and community-based interventions in 22 high-need, low-resource counties.

One anticipated outcome of this work is a change in some of the attitudes Montanans hold toward alcohol and prescription drug use in their communities. This report summarizes the results of a survey examining how Montanans perceive alcohol consumption in their communities, which was conducted to provide a baseline measure of attitudes as part of the federally-required grant evaluation. A second iteration of this survey is scheduled for 2017, to assess any differences in attitudes that may have occurred during the life of the PFS grant

Survey Methodology

In the fall of 2014, Montana KIDS COUNT—in its capacity as the SPF-PFS evaluator—commissioned a telephone survey to assess the perceptions and attitudes Montana residents ages 18 and older have regarding various types of alcohol use in their local communities. The survey, a Computer-Assisted Telephone Interview (CATI) survey, was implemented in the winter of 2014 and early spring of 2015 by the Survey Research Lab at the Bureau of Business and Economic Research at the University of Montana. It is referred to as "the Alcohol Perception Survey", or just APS.

Residential and mobile telephone numbers were sampled, with one individual ages 18 and older randomly selected from the household represented by each number. Interviews were carried out until a sample of 800 usable responses was achieved, together representing a cross-section of Montana residents.



Results

The survey results have been organized by topic: Underage drinking; Drinking and driving; Binge drinking; Alcohol advertising and promotion; and Support for prevention efforts.



Underage Drinking

The largest percentage of respondents (45%) think youth drinking is a somewhat severe or very severe problem, and while a similar portion (42%) think youth drinking is a rite of passage or "just a part of growing up", the majority does not (52%). Most respondents (65%) believe it is somewhat easy or very easy for youth to obtain alcohol in their community, and although only 4% of respondents think it is mostly right or always right for parents to supply alcohol to parties with underage youth, more than three times as many (15%) are of the opinion that parents usually should be able to or always should be able to buy alcohol for their underage children.

Finally, when it comes to the enforcement of various alcohol-related laws, over half of respondents (55%) think laws prohibiting the <u>sale</u> of alcohol to underage youth are somewhat adequately or very adequately enforced, while just over one-third think laws penalizing adults who <u>give</u> alcohol to underage youth are somewhat or very adequately enforced (36%).

Drinking and Driving

More respondents consider adult drinking and driving to be a somewhat severe or very severe problem (56%) than youth drinking and driving (41%). Additionally, 57% of respondents perceive enforcement of drinking and driving laws to be somewhat or very adequately enforced.

Binge Drinking

Youth binge drinking is recognized by most respondents to be somewhat dangerous or very dangerous (94%). However, only 75% of respondents believe binge drinking by adults is somewhat dangerous or very dangerous. When considering the severity of the problem of binge drinking, 42% of respondents think it is somewhat severe or very severe among youth, 65% of respondents think it is somewhat severe or very severe among college students, and 39% of respondents consider it somewhat severe or very severe among adults.

Alcohol Promotion

Less than half (46%) of respondents think there are somewhat too many or far too many signs and banners advertising alcohol in stores and gas stations, and approximately three-fourths (74%) think drink promotions somewhat encourage or strongly encourage drinking too much alcohol.

Support for Statewide Alcohol Abuse Control Measures and Prevention Efforts

The majority respondents indicated support for all measures and efforts proposed in the Alcohol Perceptions Survey. There is the least amount of support for increasing enforcement of existing alcohol-related laws (77%), and enacting new laws aimed at the problem of alcohol abuse (63%), while 95% indicated they strongly support or somewhat support educating people about the consequences of alcohol abuse, and 90% either strongly support or somewhat support making their community aware of the problems and costs associated with alcohol abuse.

Recommendations

1. Prevention efforts should reflect demographic variations in attitudes.

Analysis of the survey data revealed significant differences in responses based on age, gender, race, parental status, and urban/rural residence. Gender accounts for the greatest variation between sub-groups, indicating that females hold stricter attitudes towards underage drinking and alcohol abuse than males. More females than males also supported prevention efforts and control measures. Among race-based sub-groups, white respondents have a more permissive attitude towards underage drinking and risky behaviors than do American Indian respondents. Additionally, white respondents are less supportive of enacting new laws for alcohol control measures.

In addition to gender and race, the respondents' ages are also indicative of differences in attitudes, with younger respondents in the 18 to 34 age group having more permissive attitudes regarding alcohol use and abuse. Parental status and geographic location accounted for less variation among respondents.

Prevention efforts should note these variations between demographic sub-groups for a number of reasons. First, these results demonstrate the need for targeting prevention approaches to each population group. Strategies should not take a one-size-fits-all approach but instead should consider cultural differences particularly by gender, race, and age.

Second, efforts to change perceptions and attitudes should be targeted to those groups holding more lenient and permissive attitudes (e.g., males), while prevention efforts seeking supporters and champions to participate in community-based approaches may have more success recruiting individuals from those populations known to support prevention efforts (e.g., females).

2. Prevention efforts focusing on families should address parents' perceptions and attitudes

At this time, prevention workers should examine their county Prevention Needs Assessment (PNA) profile to determine family risk and protective factors that should be addressed at the local level.



However, it is strongly recommended that additional research on the perceptions of parents in Montana should be conducted, allowing for in-depth understanding of their exact nature and of their potential impact on Montana's youth. There are a number of community-based participatory research methods that can be helpful for this purpose, but the evaluation team strongly recommends using the Photovoice approach, which can be used both as a research method and as a local intervention method.

3. Community level prevention efforts should rely on evidence-based programs that are supported by community data.

Community-based efforts using strategy teams are proven to be effective at preventing and reducing underage drinking and alcohol abuse, as well as in changing public policy. School-based strategies have also been effective at curbing alcohol use among youth. Changing community attitudes around underage drinking can lead to increased community support for control measures and prevention efforts.

Additionally, research also supports changing adult attitudes towards their own alcohol abuse and related risk behavior. Each of these approaches are evidence-based: they have been widely employed and their effectiveness is well documented.

Not only is it important to know what works; it is also necessary to avoid approaches that have been shown to be ineffective. The evaluation team recommends that any strategies implemented to change attitudes and perceptions, as well as to reduce and prevent alcohol misuse and abuse, be evidence-based programming and research, and that approaches that have been proven to be ineffective are avoided, regardless of media attention.

Conclusion

Overall, youth drinking appears to be less of a concern among Montanans than drinking by adults and college students, despite what is known about Montana's rates of substance abuse. Further, these survey results clearly indicate that prevention efforts cannot afford to take a one-size-fits-all approach to address substance abuse in Montana. Differences among population perceptions toward the use and abuse of alcohol, along with associated risk behaviors by geographic location, gender, race, age, and parental status are evident. Those in the prevention field should consider local levels of support for various control measures and prevention efforts, and work to improve support for areas such as policy and enforcement.



INTRODUCTION

Montana has higher prevalence rates of alcohol consumption and substance abuse than most other states—a behavioral pattern that has been manifest practically since the Old West. While overall substance abuse is down across the country, including in Montana, the state remains in the Top 5 for the highest abuse rates in the country for both adults and youth.

The National Institute on Alcohol Abuse and Alcoholism began tracking per-capita alcohol consumption in 1970, based on sales of spirits, wine, and beer, and Montana's consumption peaked in 1979 at 4.0 gallons per resident ages 21 and older. Montana's annual per capita consumption decreased to a low of just under 2.8 gallons in 1996, but has been gradually increasing since then. In 2014, the most recent year for which data is available, the annual alcohol consumption per capita among those 21 and older was 3.5 gallons. By comparison, the 2014 U.S. rate of alcohol consumption per capita among those 21 and older was 2.6 gallons.

Nationally, underage drinkers and adults who drink excessively contribute a disproportionate share of alcohol consumption and expenditures. One study found that the top 25% of drinkers, those who drink at least 5 drinks per week, consume 87% of all the alcohol drunk by those over 18 in the US (Greenfield & Rogers, 1999). Foster et al. have estimated that if all adult drinkers followed the recommended consumption guidelines for men of at most two drinks per day, and underage drinking was eliminated, the alcohol industry would lose nearly 49% of annual expenditures, \$82.2 billion (in 2016 dollars).

For decades, the method of choice in dealing with substance abuse has been individual treatment—the focus on addressing an existing problem in individuals rather than the population. Substance abuse prevention did not truly emerge as a science until relatively recently and the funding dedicated to prevention efforts—where success is less tangible and seemingly less focused than treatment—has lagged behind.

However, as medical practice across the country becomes increasingly focused on preventive care, so too has substance abuse prevention been brought to the forefront. With funding for research on current prevention work and needs in all 50 states, prevention workers are better able to understand the nature of the problem they are facing. Also emerging from this research is the realization that attitudes towards substance abuse—and particularly alcohol abuse—are different in the rural West compared to more urban communities.

Current Efforts

The state of Montana currently manages a number of prevention efforts across the state. One of these, the Strategic Prevention Framework-Partnership For Success (SPF-PFS), for which this report is part of the required program evaluation, is funded by a federal prevention grant from the Substance Abuse and Mental Health Services Administration (SAMHSA). The 5-year SPF-PFS grant was awarded to the State of Montana's Chemical Dependency Bureau in 2013. The grant's purpose is to prevent underage drinking among youth ages 12 to 17, and among young adults ages 18 to 20, along with the misuse and abuse of prescription drugs among those ages 12 to 25^2 . To this end, a variety of strategies are being implemented, including alcohol compliance check programs in all 56 Montana counties and community-based interventions in 22 high-need, low-resource counties.

² For more information on the Partnership For Success grant, please see <u>http://www.samhsa.gov/capt/about-capt/prevention-grants#pfs</u>.



THE ALCOHOL PERCEPTION SURVEY

One goal of the SPF-PFS grant is to affect a change in the attitudes people hold towards alcohol and prescription drug use in their communities. To assess these attitudes, Montana KIDS COUNT commissioned a survey of Montana residents from across the state. The survey in its entirety addressed both alcohol and prescription drugs; however,

this report focuses on the alcohol-related portion only, and is referred to as the Alcohol Perception Survey (APS).

The APS results provide a baseline measure of how Montana residents perceive issues related to alcohol and prescription drug abuse in their communities², and articulate overall Montana attitudes, as well as differences in perceptions between various demographic sub-groups. While anecdotally these variances were known to prevention workers, this survey constitutes the first effort at reliably quantifying these differences in a way that can be useful for prevention planners and workers.

The APS allowed for data disaggregation based on several criteria, including gender, race, age group, parental status, and rural/urban residency. The bulk of this report is devoted to the areas in which the disaggregation revealed significant differences between the groups, knowledge of which would be important to a successful prevention effort. Detailed breakdowns of survey data are provided in summary tables in Appendices A and B.



In order to be effective, prevention efforts must take into account the attitudes and perceptions held by community members towards substance abuse. Regardless of whether these perceptions are accurate, they are engrained in the people who are targeted for prevention efforts, and in the communities where the prevention approaches are implemented. As such, they create barriers to the efficacy of prevention efforts that cannot be overcome unless prevention workers are aware of the underlying reasons for various behavior patterns, reactions and responses.

² Survey respondents were not asked about their own use and/or abuse of alcohol and/or prescription drugs.

SURVEY METHODS

In the fall of 2014, with funding from DPHHS, Montana KIDS COUNT commissioned a statewide telephone survey to examine the views held by Montanans regarding alcohol use and prescription drug abuse. The survey was implemented in the winter of 2014 and early spring of 2015. It was intended as an update of a similar survey conducted in the spring of 2008; however, while the questions were kept as close to the original as possible, the 2008 survey was methodologically inferior and, as such, the results are not directly comparable. A follow-up survey will be conducted in 2017 as part of the SPF-PFS evaluation to determine what, if any, changes have

occurred in attitudes and perceptions.

The Survey Research Lab at the Bureau of Business and Economic Research at the University of Montana conducted the APS telephone survey. Both mobile

and land-based telephone numbers were sampled, and one respondent aged 18 or older was randomly selected from the household represented by each successful contact. Sampling and interviewing continued until a total of 800 usable responses were achieved, representing a cross-section of Montana residents. The chart below shows the demographic breakdown of the survey respondents (Table 1, page 4).

Survey questions can be loosely categorized as follows:

- Community norms regarding alcohol abuse
- Perceived severity of alcohol-related problems
- Support for statewide alcohol abuse control measures and preventive efforts

The full survey question text, along with topline results for each question, are provided in Appendix A.



Table 1. Respondent Characteristics

Category	Frequency	Percent
Gender		
Male	399	49%
Female	401	51%
Age		
18 - 34	229	28%
35 – 49	185	23%
50 - 61	189	24%
62+	197	25%
Race		
White	687	86%
American Indian	57	7%
Other/Refused	57	7%
Parental Status		
Parent/Legal Guardian of child under 21	283	36%
Not a Parent/Legal Guardian of child under 21	514	64%
Missing/Refused	2	<1%%
Geographic Location		
Urban (top 7 cities)	286	36%
Rural	514	64%
Household Telephone Status		
Wireless only	323	40%
Wireless mostly	113	14%
Dual use	133	17%
Landline mostly	122	15%
Landline only	109	14%
Survey Telephone Type		
Surveyed by Landline	440	55%
Surveyed by Cell Phone	360	45%
Educational Attainment		
Less than HS Diploma	36	5%
HS Diploma or GED	219	27%
Some college or tech school	258	32%
BA+	269	34%
Missing/Refused	18	2%

SURVEY RESULTS

Underage Drinking

Underage⁴ drinking constitutes half of the focus of the SPF-PFS grant, as youth in Montana use alcohol at higher rates than the national average. Data from the 2014 Prevention Needs Assessment (PNA)⁵ shows that nearly 59% of Montana high school students report at least some lifetime use of alcohol and 32% report having used alcohol in the 30 days previous to the PNA survey. Comparatively, 30-day alcohol use rates are higher than national rates by more than 5% for 8th-graders; by almost 11% for 10th-graders; and by 12% for 12th-graders.

Perceiving Youth Drinking as a Problem

As illustrated by the PNA data, underage drinking is commonplace in the state. However, Montanans appear to be unware of these higher rates, as demonstrated by the fact that less than half (45%) of survey respondents indicated that they think underage drinking is either a *somewhat severe* or *very severe* problem. More respondents indicated they think this issue to be a *somewhat mild* problem than any other category (30%) (Figure 1).

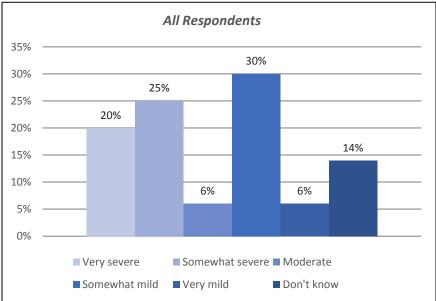


Figure 1. Perceiving youth drinking as a problem (overall)

⁴ For the purposes of the survey, "underage" and "youth" refer to those under the age of 21.

⁵ The Prevention Needs Assessment Student Survey (PNA) is a voluntary survey assessing prevention needs among students in grades 8,10, and 12. In 2014, 10,731 students in Montana completed the survey. For more information, and to see PNA results, visit the Montana Department of Public Health and Human Services PNA website at http://dphhs.mt.gov/amdd/SubstanceAbuse/CDDATA/PNADATA.aspx.

Disaggregating the data reveals sharp contrasts in perceptions based on gender, race and urban/rural residency.

- 51% of **female** survey respondents perceive underage drinking as a *very severe* or *somewhat severe* problem, compared to 39% of **male** respondents;
- 71% of American Indian survey respondents perceive underage drinking as a *very severe* or *somewhat severe* problem, compared to 43% of **white** respondents; and
- 54% of **urban** survey respondents perceive underage drinking as a *very severe* or *somewhat severe* problem, compared to 40% of **rural** respondents.

Considering Youth Drinking "part of growing up"

An explanation for why relatively few Montanans perceive underage drinking as a problem is that youth drinking is often considered to be "just a part of growing up" in the collective consciousness, and therefore not an issue that needs to be addressed. Asked if they believe underage drinking is "a rite of passage", more respondents stated youth alcohol use is *sometimes* part of growing up (36%) than any other response category, while 6% of respondents feel youth drinking is *always* part of growing up. However, 52% of respondents said they consider youth drinking to be *mostly not* or *never* part of growing up (Figure 2).

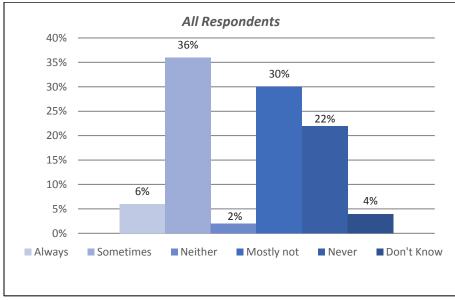


Figure 2. Considering youth drinking a part of "growing up" (overall)

Again, there are notable differences in responses based on gender and on race.

- 37% of **female** survey respondents see underage drinking as *always* or *sometimes* a part of growing up, compared to 47% of **male** respondents;
- 24% of **female** survey respondents *never* consider underage drinking as a part of growing up, compared to 20% of **male** respondents;
- 61% of American Indian survey respondents see underage drinking as *always* or *sometimes* a part of growing up, compared to 42% of **white** respondents; and
- 24% of American Indian survey respondents *never* consider underage drinking as a part of growing up, compared to 7% of white respondents.

Youth Obtaining Alcohol

Underage drinkers report they get their alcohol from a variety of sources. The 2014 PNA results show that among Montana students who reported using alcohol, nearly half (49%) got it from someone they know aged 21 or older, and 27% got it from someone they know under age 21. About 25% got it from home *with* their parents' permission, while 24% got it from home *without* their parents' permission. Twenty-four

percent of respondents stated they got it from a party or a keg, and a small percentage reported buying the alcohol themselves--3% *with* a fake ID and 4% *without*. Categories are not additive, as respondents could indicate more than one category.

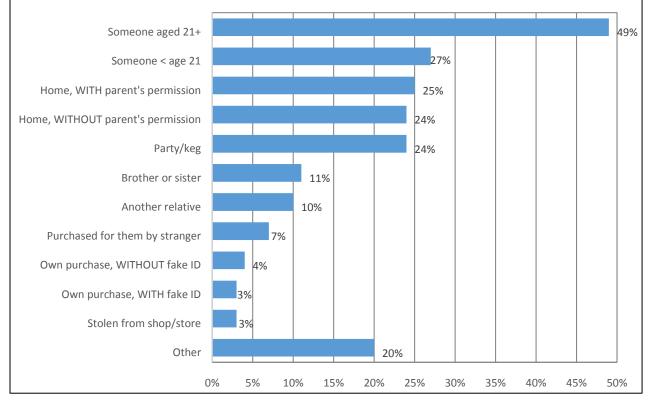
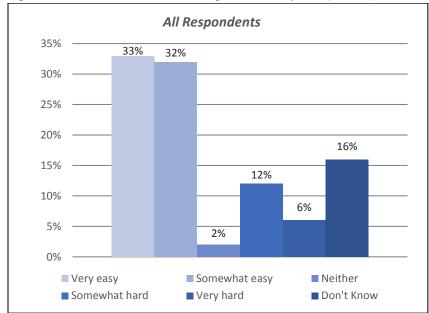


Figure 3. Source of alcohol obtained by high school students

Source: 2014 Prevention Needs Assessment survey; Chemical Dependency Bureau MT DPHHS

APS respondents were asked how accessible they believe alcohol is for underage youth in their community. Nearly 65% of respondents perceive it to be *very easy* or *somewhat easy* for those under age 21 to get alcohol, while 18% perceive it to be *very hard* or *somewhat hard* (Figure 4).





The majority of variation in survey responses to this item was based on gender and age.

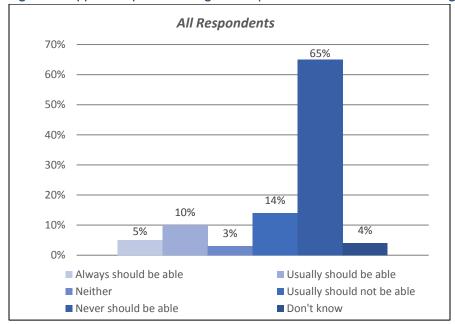
- 68% of **female** survey respondents perceive youth obtaining alcohol as *very easy* or *somewhat easy*, compared to 62% of **male** respondents; and
- 71% of survey respondents **ages 18-34** perceive youth obtaining alcohol as *very easy* or *somewhat easy*, compared to at most 63% of respondents in **any other age group**.

Support for Parents Buying Alcohol for Own Children Under Age 21

As stated above, one in four students who drink alcohol reported in the 2014 PNA that they are getting alcohol from home with their parents' permission. Parents may assume that it is safer for their child to drink at home where they can monitor their child's wellbeing under the influence and/or their children can avoid driving or riding with someone who is under the influence. However, Foley et al. has found that youth who report that their parent or a friend's parent provided alcohol at a party not only drink more, but are twice as likely to binge drink as well (Foley, Altman, Durant, & Wolfson, 2004). Research by Song et al. also showed that being at a party where alcohol is provided by a friend's parent is related to higher levels of drunkenness and binge drinking, as well as higher rates of driving under the influence, experiencing nonviolent consequences (e.g., citation or arrest for underage drinking or DUI, hangover, missed school), and a 40% greater likelihood of riding with an impaired driver (Song, Smiler, Wagoner, & Wolfson, 2012).

To understand the level of permissiveness in adult attitudes toward supplying alcohol to underage youth, respondents were asked if it is right or wrong for parents to supply alcohol at parties for youth under age 21. The majority of respondents (92%) thought it was *always wrong* or *mostly wrong*, while 4% reported it is *always right* or *mostly right*. Significant demographic differences were not observed in responses to this question.

Approaching the issue from a different angle, survey respondents were also asked if parents should be **able** to buy alcohol for their underage children. A majority (78%) stated that parents *never should* or *usually should not* be able to buy alcohol for their underage children, while 15% of respondents stated parents *always should* or *usually should* be able to make such purchases. It appears that even though Montana residents mostly see it as wrong to supply alcohol to underage youth, they still think parents should be **able** to do so (Figure 5).





There were differences in responses to the question about being able to buy alcohol for one's own underage children based on gender, race, and age group, as well as urban versus rural residency.

- 11% of **female** survey respondents think that parents should *always* or *usually* be able to purchase alcohol for their own children under age 21, compared to 19% of **male** respondents;
- 2% of **American Indian** survey respondents think that parents should *usually* be able to purchase alcohol for their own children under age 21, while 17% of **white** respondents think that parents should *always* or *usually* be able to make such purchases;
- 11% of **rural** survey respondents think that parents should *always* or *usually* be able to purchase alcohol for their own children under age 21, compared to 21% of **urban** respondents; and
- 6% of survey respondents **ages 62 and older** think that parents should *always* or *usually* be able to purchase alcohol for their own children under age 21, compared to 27% of respondents **ages 18-34**.

Enforcement of Laws Pertaining to PROVIDING Alcohol to Underage Youth

Adults over 21 were identified as the most frequent source from which youth obtain alcohol, despite the existence of laws prohibiting such actions. Enforcement of laws penalizing adults who provide alcohol for underage youth were nearly evenly distributed between those who felt these laws were *very adequately* or *somewhat adequately* enforced (35%), and those who felt the laws were *very inadequately* or *somewhat inadequately* enforced (39%). Notably, the category that received the most responses was "*I don't know*" (25%) (Figure 6).

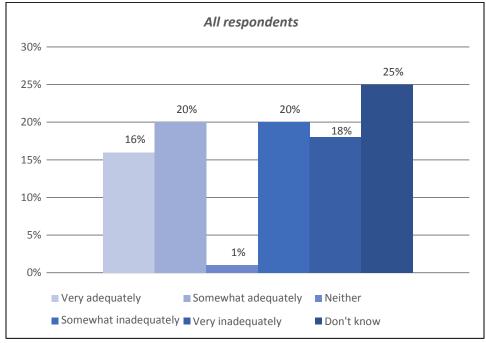


Figure 6. Enforcement of laws pertaining to adults PROVIDING alcohol to underage youth (overall)

Differences in responses to this question were seen along gender lines and between races.

- 43% of **female** survey respondents think that laws penalizing adults who provide alcohol for underage youth are *very inadequately* or *somewhat inadequately* enforced, compared to 34% of **male** respondents; and
- 50% of American Indian survey respondents think that laws penalizing adults who provide alcohol for underage youth are very inadequately or somewhat inadequately enforced, compared to 38% of white respondents.

Enforcement of Laws Pertaining to SELLING Alcohol to Underage Youth

PNA survey results indicated that a relatively low percentage of high school students who drink alcohol obtain alcohol by purchasing it either with or without a fake ID. The action of an underage youth using a fake ID to purchase alcohol from a retailer can have severe legal repercussions for both the youth and the retailer. By contrast, the legal consequences of an underage youth being given alcohol by someone over the age of 21 are often negligible to non-existent. This dichotomy is reflected in people's perceptions of how vigorously laws are enforced: more than half of respondents (55%) felt that laws prohibiting the sale of alcohol to underage youth were *very adequately* or *somewhat adequately* enforced (Figure 7).

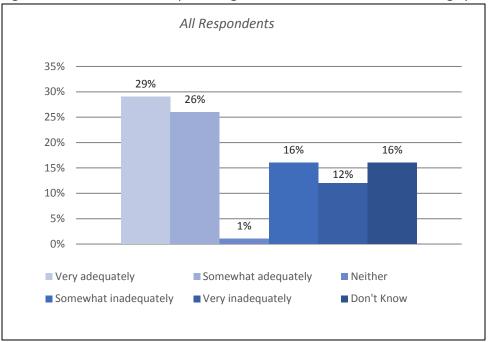


Figure 7. Enforcement of laws pertaining to adults SELLING alcohol to underage youth (overall)

Again, the largest differences in responses were identified based on gender and race.

- 31% of **female** survey respondents think that laws penalizing adults who **sell** alcohol to underage youth are *very inadequately* or *somewhat inadequately* enforced, compared to 25% of **male** respondents; and
- 47% of American Indian survey respondents think that laws penalizing adults who provide alcohol for underage youth are *very inadequately* or *somewhat inadequately* enforced, compared to 27% of white respondents.

Males and white survey respondents are less aware of, and as a result, less concerned with, the risks associated with underage drinking than their female and American Indian counterparts. Also, being less aware, males and white respondents find enforcement of alcohol-related laws to be adequate at a higher rate.

Drinking and Driving

The act of driving a motor vehicle while under the influence of alcohol is one of the negative consequences of alcohol use. It is a high-risk behavior that puts everyone at risk: impaired drivers themselves, their passengers, and anyone else encountered, including other drivers, passengers, and pedestrians. According to a survey by the Centers for Disease Control (CDC), in 2012, 3% of Montana adults self-reported driving after drinking too much in the 30-day period prior to being surveyed, higher than the national rate of 2% (CDCa, 2014). PNA data from 2010 and 2014 show a reduction in the rate of youth who had been riding (during the past 30 days) with a driver who had been drinking, as well as in the rate of youth drinking and driving. Still, in 2014, nearly 24% of all PNA respondents reported riding with a driver who had been drinking, and 7% reported drinking and driving. To understand perceptions about this behavior, survey respondents were asked about the severity of drinking and driving among youth and adults in their communities, as well as how adequately laws against drinking and driving are enforced.

Perceiving YOUTH Drinking and Driving as a Problem

Overall, similar percentages of survey respondents find youth drinking and driving to be an either *very severe/somewhat severe* problem (41%) OR *very mild/somewhat mild* (39%) problem in their community. However, despite this seemingly equal split, the largest percentage of respondents indicated that they think youth drinking and driving is a *somewhat mild* problem (30%) (Figure 8).

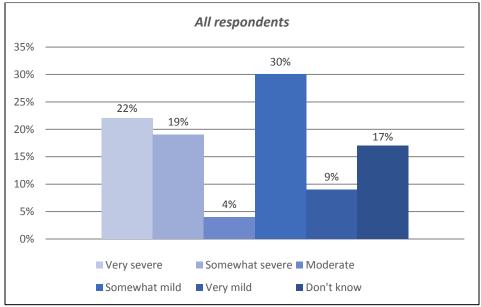


Figure 8. Problem severity: Drinking and driving among YOUTH (overall)

The overall responses hide a multitude of variations based on all the different categories analyzed.

- 45% of **female** survey respondents find youth drinking and driving to be a *very severe* or *somewhat severe* problem in their communities, compared to 38% of **male** respondents;
- 62% of American Indian survey respondents find youth drinking and driving to be a *very severe* or *somewhat severe* problem in their communities, compared to 40% of **white** respondents; and
- 46% of **rural** survey respondents find youth drinking and driving to be a *very severe* or *somewhat severe* problem in their communities, compared to 38% of **urban** respondents.

Among respondents who were a **parent or a legal guardian** of a child under age 21, 36% find youth drinking and driving to be either a *very severe* or a *somewhat severe* problem. By contrast, 43% of those who are **not a parent or legal guardian** of a child under age 21 find youth drinking and driving to be either a *very severe* or a *somewhat severe* problem. By contrast, 43% of those who are **not a parent or legal guardian** of a child under age 21 find youth drinking and driving to be either a *very severe* or a *somewhat severe* problem.

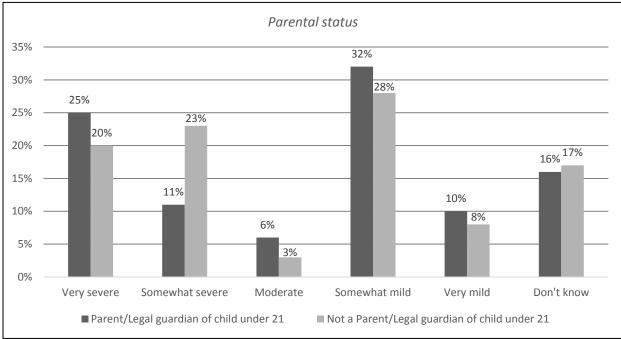


Figure 9. Problem severity: Drinking and driving among YOUTH (by parental status)

Perception of ADULT Drinking and Driving as a Problem

Adult drinking and driving is considered a severe problem to the majority of survey respondents: 28% find it to be *very severe* problem, and 28% find it to be a *somewhat severe* problem. Only 6% see adult drinking and driving as a *very mild* problem (Figure 10).

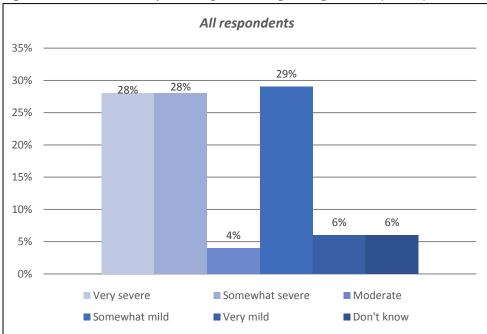


Figure 10. Problem severity: Drinking and driving among ADULTS (overall)

There were great differences in how severe of a problem adult drinking and driving represents to respondents, primarily by gender, race and parental status.

- 61% of **female** survey respondents find ADULT drinking and driving to be a *very severe* or *somewhat severe* problem in their communities, compared to 50% of **male** respondents;
- 66% of American Indian survey respondents find ADULT drinking and driving to be a *very severe* or *somewhat severe* problem in their communities, compared to 55% of white respondents; and
- 61% of respondents who were **parents/legal guardians** of children under age 21 find ADULT drinking and driving to be a *very severe* or *somewhat severe* problem in their communities, compared to 53% of respondents who were **not parents or legal guardians**.

Enforcement of Laws Pertaining to Drinking and Driving

In response to questions about their perceptions of enforcement of laws pertaining to drunk driving, a total of 57% of respondents indicated they think such laws are *very adequately* or *somewhat adequately* enforced (Figure 11).

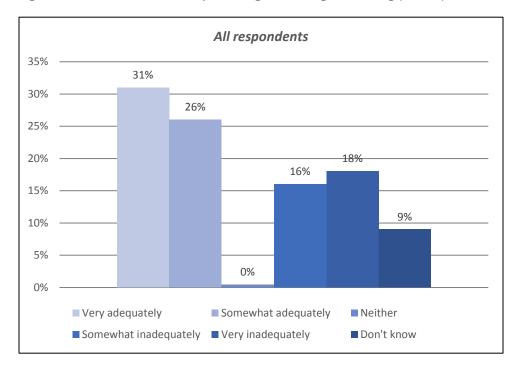


Figure 11. Enforcement of laws pertaining to drinking and driving (overall)

Differences in public perception of the enforcement of laws against drinking and driving can be seen primarily along gender lines, and by age group.

- 40% of female survey respondents find laws against drinking and driving to be very inadequately or somewhat inadequately enforced, compared to 30% of male respondents; and
- 43% of respondents ages 35-49 find laws against drinking and driving to be very inadequately or somewhat inadequately enforced in their communities, compared to 28% of respondents ages 50-61.

Males generally engage in risk behaviors at a higher rate than females; particularly, the prevalence for male drinking and driving is higher than for females. As such, not only are males less likely to be aware of the severity of the problem of drunk driving in Montana, they also find the enforcement of drunk-driving laws to be adequate at a higher rate than females.

Binge Drinking

Binge drinking is defined as consuming five or more alcoholic drinks within a 2-hour period. The poor health outcomes and consequences that result, including alcohol poisoning and unintentional injury, ARE well documented (CDC, 2014b). While the stereotypical binge drinker is a college student, excessive drinking at any age is problematic. To be sure, college drinkers engage in binge drinking at extreme rates: of the 60% of college students aged 18 to 22 who reported consuming alcohol in the past month, "almost 2 out of 3 of them engaged in binge drinking during that same timeframe" (National Institute on Alcohol Abuse and

Alcoholism, December 2015, p. 1). However, data from the PNA show binge drinking behavior as prevalent in high school as well, as 20% of high school students reported having five or more alcoholic drinks in a row on at least one occasion within two weeks prior to the survey. This rate is twice as high as the national baseline set forth in Healthy People 2020 for 12 to 17 year olds (9.5%). Also, according to the CDC, adults ages 26 and older are involved in 70% of all binge drinking episodes (CDC, 2014b).

Perceptions of YOUTH Binge Drinking as Safe or Dangerous

Respondents to the Alcohol Perception Survey were asked whether binge drinking among youth is safe or dangerous. The vast majority of respondents (94%) considered YOUTH binge drinking to be *somewhat dangerous* or *very dangerous* (Figure 12)

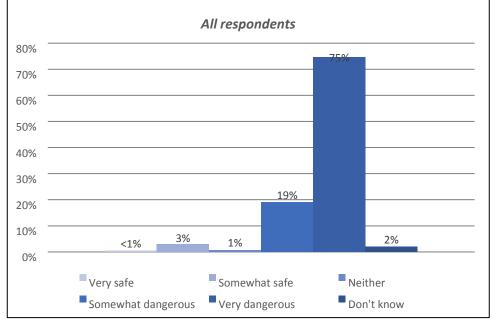


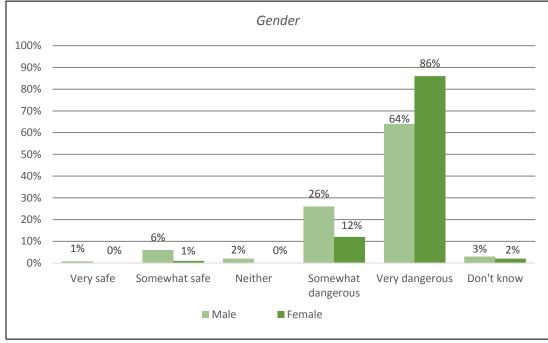
Figure 12. Perception of safety/danger of YOUTH binge drinking (overall)

Respondents' perception of how dangerous binge drinking is to youth is pretty uniform across sub-groups, with one important exception that is worth emphasizing:

• While 86% of **female** survey respondents realize that binge drinking is *very dangerous* to youth, only 64% of **male** respondents have made this realization.

This gender-based difference in the perception of the dangers associated with binge drinking speaks not only of stereotypical gender characteristics, but also of the need to develop different education and prevention efforts for males and females. Given that males are more ignorant (or dismissive) of the dangers associated with binge drinking, they will not respond to the same approaches and arguments as females. Prevention work is clearly not a one-size-fits-all endeavor, and any kind of public campaign needs to reflect that (Figure 13).





Perceiving ADULT Binge Drinking as Safe or Dangerous

One of the reasons that youth binge drinking is considered especially damaging is its effect on youth development, which includes but is not limited to brain development and the development of socioemotional maturity. Adult binge drinking, however, can be equally damaging. According to the CDC, more "adult" consequences of binge drinking include domestic violence; sexual assault; unintended pregnancy; sexual dysfunction; and poor control of diabetes (2014b). Research by Naimi et al. has found high social and economic costs, such as child neglect and lost worker productivity (Naimi et al., 2003) while Bouchery et al. points out consequences such as increased healthcare costs; increased crime and criminal justice system costs; and reduced earning potential (Bouchery et al., 2011).

Adult binge drinking is an underestimated risk behavior that should not be taken lightly, though it appears a number of Montanans do. While three-fourths of survey respondents realize the danger associated with adult binge drinking, a full 15% of respondents do not, thinking adult binge drinking to be either *very safe* or *somewhat safe* (Figure 14).

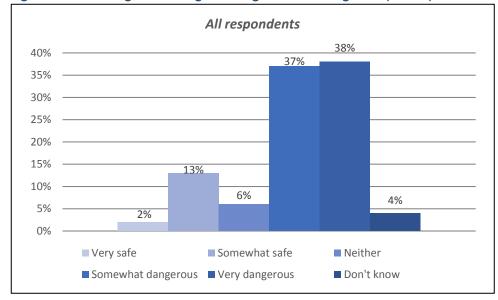


Figure 14. Perceiving ADULT binge drinking as safe or dangerous (overall)

Stand-out differences include variation based on gender and age.

- 81% of **female** survey respondents realize that binge drinking is *very dangerous* or *somewhat dangerous* to ADULTS, compared to 69% of **male** respondents; and
- Only 58% of respondents **ages 18-34** realize that binge drinking is *very dangerous* or *somewhat dangerous* to ADULTS, compared to between 76% and 89% of respondents in **any other age group.**

Perceiving Binge Drinking as a Problem

In addition to asking about binge drinking being safe or dangerous, respondents were asked about the severity of binge drinking as a problem among youth, college students, and adults. Among the three age groups, survey respondents mostly perceive—and correctly so—that binge drinking is a greater problem among college student than for the other two groups: 65% consider binge drinking to be a *very severe* or *somewhat severe* problem among college students, while those same numbers for youth and adults are 42% and 39%, respectively (Figure 15, Figure 16 and Figure 17).

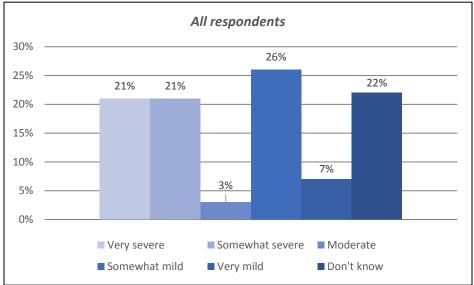
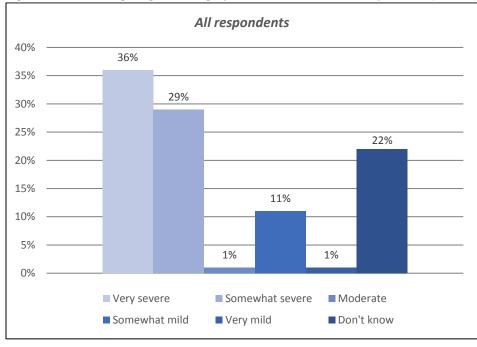


Figure 15. Perceiving binge drinking by YOUTH as a problem (overall)

Figure 16. Perceiving binge drinking by COLLEGE STUDENTS as a problem (overall)



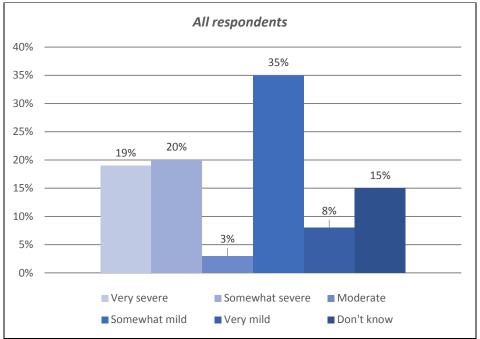


Figure 17. Perceiving binge drinking by ADULTS as a problem (overall)

As is the case with the perception of other risk behaviors investigated in this report, female respondents tend to be more aware than males of the problem that binge drinking constitutes, and for all age groups. Likewise, American Indian respondents exhibit a higher level of awareness than white respondents.

One point of interest is that for all three age groups, about one-third of those **ages 62 and older** report that they *don't know* if binge drinking is a severe problem or not—a higher rate than for any other question.

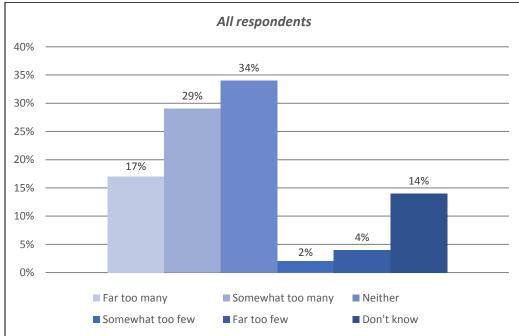
The message that binge drinking is dangerous to youth appears to have been received more evenly across the various sub-groups, with the exception of gender. In keeping with the previously-mentioned propensity of males to engage in risk behaviors at a higher rate than females, males also fail to recognize the dangers associated with binge drinking both in youth and in adults. Consequently, males do not see binge drinking as a severe problem at the same rate other groups do.

Alcohol Advertising and Promotion

Alcohol advertisements at retailers, along with drink specials at bars, are community norms in Montana, and all but expected in local establishments. Alcohol advertisements may seem harmless but they have been found to have an impact on underage drinking and drinking initiation. Particularly, alcohol advertisements in small local stores and supermarkets influence youth who have not started drinking by 7th grade; the likelihood that these youth have started drinking in the 9th grade increases with greater exposure to such displays (Ellickson, Collins, Hambarsoomians, & McCaffrey, 2005).

Opinions on Prevalence of Alcohol Advertising

To assess Montanans' perceptions of, and reactions to, these social cues, APS respondents were asked if they thought there are too many or too few signs and banners advertising beer and other alcohol in stores and gas stations. Less than half of the respondents (46%) thought that there were *far too many* or *somewhat too many* signs and banners in stores and gas stations advertising alcohol. Over one-third (34%) reported that there were *neither too many nor too few* alcohol ads (Figure 18).





Differences in perceptions related to alcohol advertising varied primarily by gender and parental status.

- 49% of **female** survey respondents indicated they think there either *far too many* or *somewhat too many* alcohol advertisements in local stores and gas stations, compared to 42% of **male** respondents; and
- 54% of survey respondents who are **parents/legal guardians** of children ages 21 and younger indicated they think there either *far too many* or *somewhat too many* alcohol advertisements in local stores and gas stations, compared to 42% of respondents who are **not parents or guardians**.

Additionally, as research suggests that younger people are more susceptible to advertisements of alcoholic beverages, it is unfortunate that among the 18-34 age group, 10% do not realize the effect of such advertising, as they indicated that they think there are *somewhat too few* or *far too few* advertisements for beer and other alcohol in their local community.

Perceptions of Effect of Drink Specials at Local Serving Establishments

In addition to asking about advertising, respondents were asked if they think drink specials at bars, like "2 for 1" and "Ladies' Night", encourage or discourage excessive alcohol consumption. The majority of respondents (74%) felt that drink specials *strongly encourage* or *somewhat encourage* drinking too much alcohol, while a small minority (3%) felt that they *somewhat discourage* or *strongly discourage* drinking too much alcohol Figure 19).

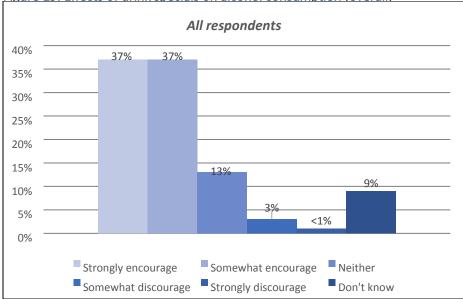


Figure 19. Effects of drink specials on alcohol consumption (overall)

The only notable difference in responses was race-based.

• None of the **American Indian** survey respondents (0%) think that drink specials in any way *discourage* excessive alcohol consumption, while 4% of **white** respondents think drink specials either *somewhat discourage* or *strongly discourage* drinking too much alcohol.

The majority of respondents appear to have a realistic understanding of the effects of drink specials on bar patrons' alcohol consumption.

On the other hand, they seem to be somewhat unaware of the sheer amount of alcohol advertising in their local environment, suggesting that they have become rather oblivious to its existence and its effect on people.

Support for Statewide Alcohol Abuse Control Measures and Prevention Efforts

There are a number of approaches to prevention that either can be or are currently being implemented in Montana. These range in degree of personal involvement by community residents and, as such, also vary in the level of support they garner.

Respondents were asked about their level of support for various efforts aimed at curbing alcohol abuse and misuse, as well as other alcohol-related activities. Each strategy was supported by the majority of survey respondents; however, some received more support than others. There was greater support for education and promotion of increased awareness than there was for increased enforcement and enacting new laws.

The measures and prevention efforts addressed in the survey are listed below in order of greatest support to least, based on the combined percentages of respondents who indicated that they would either *strongly support* or *somewhat support* each item:

- 1. Educating people about the consequences of alcohol abuse (95%);
- 2. Making the community aware of the problems and costs associated with alcohol abuse (90%);
- 3. Teaching community how to change established and accepted unsafe behaviors or community norms related to alcohol abuse (87%);
- 4. Letting communities know that some of the things related to drinking alcohol that they think are OK are really not OK (86%);
- 5. Increasing enforcement of existing alcohol-related laws (77%); and
- 6. Enacting new laws that are aimed at the problem of alcohol abuse (63%).



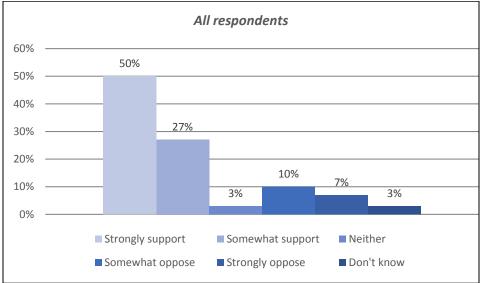
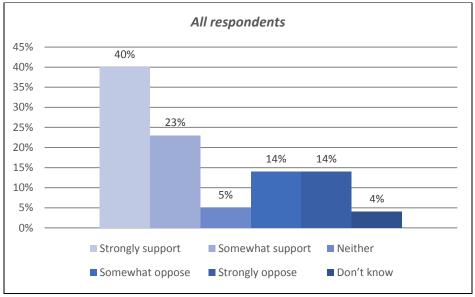


Figure 21. Support for enacting new alcohol-related laws (overall)



Support for increasing enforcement of existing alcohol-related laws varies by gender, age and parental status, while support for enacting new laws aimed at the problem of alcohol abuse varies by gender and race.

- 85% of **female** respondents either *strongly support* or *somewhat support* increasing enforcement of existing alcohol-related laws, compared to 69% of **male** respondents;
- 70% of respondents **ages 18-34** either *strongly support* or *somewhat support* increasing enforcement of existing alcohol-related laws, compared to 76% to 85% of respondents in **all other age groups**;
- 81% of respondents who are **parents/guardians** of children under age 21 either *strongly support* or *somewhat support* increasing enforcement of existing alcohol-related laws, compared to 76% of respondents who are **not parents or guardians**
- 69% of **female** respondents either *strongly support* or *somewhat support* enacting new laws aimed at alcohol abuse, compared to 56% of **male** respondents; and
- 81% of American Indian respondents either *strongly support* or *somewhat support* enacting new laws aimed at alcohol abuse, compared to 62% of **white** respondents.

When considering that males are more likely than females to drive while under the influence, it follows that they show less support for stricter enforcement of existing laws, as well as for enacting additional laws targeted at problems associated with alcohol use.



DISCUSSION

The implementation of substance abuse prevention efforts commonly take target age group into account by using different approaches and messaging for teens and adults. Additionally, some prevention campaigns are developed specifically for use in Indian Country. What this survey reveals, and which has so far largely been overlooked in prevention implementation, are the marked differences between males and females in

how they understand and view issues related to alcohol abuse. In fact, the APS demonstrates a greater variation by gender than any other demographic.

GENDER-BASED DIFFERENCES

More females than males demonstrate awareness of the safety risks associated with binge drinking, and more females than males recognize that underage drinking, drinking and driving, and binge drinking constitute real problems in Montana. There is an obvious difference in how male and female Montanans acquire and/or process information dealing with these issues. It is unclear whether the difference results from males and females being exposed to different information, or from males and females assimilating the same information differently; it is likely a combination of the two. However, what has become obvious is that the amount and nature of assimilated information differs between males and females.

From these differences in recognition of risk, it follows that males and females judge the severity of alcoholrelated problems differently, and as such show differing levels of permissiveness when it comes to what should be considered acceptable behavior. Further, as males perceive alcohol-related problems as less severe than females do, males show themselves less inclined to support prevention efforts. This is especially the case for prevention efforts that appear to have a direct effect on people and their habits and behaviors.

The Alcohol Perception Survey results are supported by the findings of other research. De Haan and Thompson found females to have less permissive attitudes toward underage drinking (De Haan & Thompson, 2003), while Beck et al. found females to consider underage drinking to be a problem to a greater degree than males (Beck, Scaffa, Swift, & Ko, 1995; De Haan & Thompson, 2003). Moreover,

research also shows that women are more supportive of alcohol-related control measures (Wagenaar, Harwood, Toomey, Denk & Zander, 2000), and are more likely to favor penalties for underage drinking (De Haan & Thompson, 2003) and sanctions for those providing alcohol to youth (Beck, Scaffa, Swift & Ko, 1995). Women are also more supportive of underage drinking prevention policies and efforts (De Haan & Thompson, 2003; Latimer, Harwood, Newcomb, and Wagenaar, 2001).



RACE-BASED DIFFERENCES

As mentioned above, substance abuse prevention campaigns do currently show some awareness of the cultural and traditional differences between American Indian and white populations. Responses to the APS indicate that American Indians in Montana are less permissive in their attitudes toward alcohol use and abuse than their white counterparts, and have more concern regarding risk behaviors such as underage drinking, binge drinking, and drinking and driving. Understanding alcohol use and perceptions among American Indian populations requires a greater lesson in the historical context and role of alcohol in



American colonialization (Quintero, 2001), a discussion that is beyond the scope of this report. It should, however, be noted that what research does exist indicates that tribal communities support alcohol prevention programs that are community based (Yuan, et al., 2010).

OTHER DEMOGRAPHIC DIFFERENCES

In addition to gender and race, other demographic variations emerged in the survey responses, as detailed in the body of this report. It is apparent that younger respondents in the 18 to 34 age group hold more permissive attitudes regarding alcohol use and abuse. At risk of stating the obvious, this is the age category which would include underage drinkers and college students, for whom alcohol use is most prevalent (Substance Abuse Mental Health Administration, 2013).

Also notable is that fewer older Montanans support prevention efforts and control measures, particularly around education and raising awareness. Polling by the Pew Research Center finds that a larger portion of millennials (those ages 18 to 29) believe the government should do more to solve problems (53%) compared to all other generations (Generation X [30 to 45 year olds]—45%; Baby Boomers [46 to 64 years old]—43%; the Silent Generation [ages 65 and older]—39%) (Pew Research Center, 2010). Such findings suggest a connection between attitudes towards government's role and said government's role in prevention (i.e., increased enforcement of current laws, enacting new laws) (Table 2).

Group	Age range	Percent believing government should do more to solve problems
Millennials	Ages 18-29	53%
Generation X	Ages 30-45	45%
Baby Boomers	Ages 46-64	43%
Silent Generation	Ages 65 +	39%

Table 2. Role of government in societal problem solving, by age group

Differences in parental status caused less variation among responses. In the few areas with notable variation, it should be noted that only the question regarding the severity of the problem of youth drinking and driving had more non-parents than parents consider it to be *very severe* or *somewhat severe*. Research

suggests that parents may underestimate their own child's risk behavior (Haynie, Beck, Crump, Shattuck, & Simons-Morton, 1999) which could cause parents to perceive overall risk in the state to be unrealistically low.

Finally, urban versus rural residency caused little variation throughout the survey. However, where variation did occur, rural respondents generally held more permissive attitudes and considered youth drinking with less concern than their urban counterparts.





REVIEW OF PREVENTION STRATEGIES

EVIDENCE-BASED APPROACHES

Evidence-based prevention programs are data-driven and culturally appropriate prevention strategies that have been proven to be effective. SAMHSA maintains a repository of evidence-based programs, the National Registry of Evidence-Based Programs and Practices (NREPP)⁶, as well as a list of repositories of evidence based programs maintained by other agencies⁷.

While adopting any of the evidence-based programs detailed by these sources, there are certain family- and community-level considerations that are important to keep in mind

Family-Level Considerations

Parents have the greatest impact on the alcohol culture within their own homes. A recent study by Donaldson, Handren, and Crano (2016) assessed the impact of parental monitoring, parental alcohol use, parental expectations of adolescent use, and teen binge drinking on children's future alcohol abuse and arrests. The researchers found:

Low monitoring, low warmth, binge drinking during the teen years, and having parents who consumed alcohol and expected that their child was an alcohol user were predictive of higher incidences of their child's binge drinking during young adulthood. In turn, teen binge drinking and young adult binging were positively predictive of having an arrest record (p. 610).

Parental influence on youth cannot be overstated, and efforts to engage and educate parents constitute a vital component of prevention in Montana, or anywhere else.

Community-Level Considerations

Community-based efforts using strategy teams can be effective at preventing and reducing underage drinking and alcohol abuse as well as changing public policy. These types of efforts can include alcohol sales compliance checks, school-based strategies, or community-wide social marketing campaigns.

One such effort, which implemented alcohol sales compliance checks, saw 18to 20-year-olds reporting increased difficulty purchasing alcohol, leading to a cascade effect whereby these same young adults also reported drinking less and showed a reduced tendency to provide alcohol to younger teens (Wagenaar, Gehan, Jones-Webb, Toomey, & Forster, 1999; Wagenaar, et al. 2000).



⁶ <u>http://www.samhsa.gov/nrepp</u> NOTE: a new review and screening process for NREPP is currently underway to ensure all programs on the site meet specific criteria; as such, many are currently listed as "Legacy" programs, meaning they have not yet been reviewed under the new criteria.

⁷ http://www.samhsa.gov/capt/tools-learning-resources/finding-evidence-based-programs

School based strategies have also been effective at curbing alcohol use among youth. One such example is Project ALERT, which appears as a Legacy Program on SAMHSA's NREPP⁸. This middle-school based program has been found to reduce future drinking, both among those who have already begun, and among those who have not. Additionally, ALERT Plus, which includes high school and middle school students, was found to mitigate the effects of alcohol advertising on youth, which, as previously mentioned, influences adolescent alcohol use (Ellickson, Collins, Hambarsoomians, & McCaffrey, 2005).

Changing community attitudes about underage drinking can lead to increased community support for control measures and prevention efforts. Lipperman-Kreda, Grube, and Paschall (2010) have shown that the perception of community disapproval for youth alcohol use leads to increased implementation and enforcement of related policies. Moreover, concern for teens (Latimer, Harwood, Newcomb, & Wagenaar) and concern for underage drinking (Richter, Vaughan, & Foster, 2004) have been found to be attitudinal predictors of support for policies addressing youth alcohol use.

Changing adult attitudes towards their own alcohol abuse and related risk behavior should also be a consideration when planning and implementing prevention efforts. Social marketing campaigns are designed to encourage voluntary behavioral changes among a targeted population. One such example is the Montana Department of Transportation's "MOST of Us



Prevent Drinking and Driving" campaign. This program, implemented in 1998 by the Montana Social Norms Project at Montana State University, was based on the Montana Model of Social Norms Marketing and focused on reducing driving after drinking among 21 to 34-year-olds. This successful campaign resulted in a decrease of those reporting driving after drinking by nearly 14% and an increase of 15% in those reporting the use of designated drivers (National Highway Traffic Safety Administration, 2005).

⁸ The NREPP legacy profile for Project ALERT can be found at <u>http://legacy.nreppadmin.net/ViewIntervention.aspx?id=62</u>

DISPROVEN PREVENTION APPROACHES

In addition to research that shows certain prevention practices to be effective, there is also research that shows a number of approaches to be <u>in</u>effective in preventing a variety of risk behaviors.

For example, school-based mandatory random student drug testing is an approach which aims to randomly drug test students involved in athletics and extra-curricular activities. This approach purports to identify students with drug use problems in order to refer them for appropriate services, and to discourage student substance abuse. A study funded by the U.S. Department of Education's Institute of Education Sciences found that while students at risk of mandatory random drug testing did report lesser rates of past-30-day substance use, there was no impact on those students not at risk of drug testing and no impact on future intention to use of either group of students (James-Burdumy, S., Goesling, B., Deke, J., & Einspruch, E., 2010). There was also no difference in students' perception of substance use consequences.



Other practices that have been found to be ineffective include scare tactics, which constitute the oldest strategy to substance abuse prevention, and that include "dramatized messaging designed to shock and frighten" (SAMHSA 2015, p1). Scared Straight is an example of a scare tactics program that brings youth inside prison facilities in order to deter delinquent behavior. Such tactics have been found to not only be ineffective at preventing delinquency, but also to have the opposite effect, actually leading to an *increase* in such behavior (Petrosino, A., Turpin-Petrosino, C., & Buehler, J. 2012). SAMHSA's Center for the Application of Prevention

Technologies has identified a number of studies debunking the use of scare tactics (ibid.).



RECOMMENDATIONS AND CONCLUSIONS

Based on the survey results presented in this report, as well as the extensive literature review supporting those findings and underpinning the complementary recommendations included here, the authors can make several recommendations to benefit the planning and implementation of effective prevention efforts, as well as improve their outcomes.

- As demonstrated by the differences in survey responses between various sub-groups of the Montana population, prevention strategies benefit from NOT taking a one-size-fits-all approach in order to be effective. The variations in survey responses demonstrate the need for targeted approaches for different population groups that take into account cultural differences, particularly by gender, race, and age.
- 2. Efforts to change perceptions and attitudes about alcohol use and abuse in Montana should be targeted to those groups holding more lenient and permissive attitudes (e.g., males).
- 3. Prevention efforts seeking supporters and champions to participate in community-based approaches may have more success recruiting individuals from those populations known to support prevention efforts (e.g., females).
- 4. Approaches and strategies implemented to change attitudes and perceptions as well as reduce and prevent alcohol misuse and abuse should be based on evidence-based programming and research which shows such efforts to be effective. Strategies and approaches which have been shown to be ineffective or counterproductive should be avoided. A multi-level approach should include families, schools, and community.

Additional research on the perceptions of parents in Montana should be explored in-depth to understand their potential impact on Montana's youth. As a first step, local prevention efforts should examine county PNA profiles to determine family risk and protective factors that should be addressed and improved. However, given the dominant influence of parents on their children's engagement in risk behaviors, understanding and influencing parental attitudes would allow for the implementation of prevention strategies that attack these problems at the root, BEFORE children and youth start envisioning their own risk behavior that mirrors that of their parents.

Parental attitudes is a complex issue that is reflective of societal norms and fraught with pit falls related to social acceptability as well as judgement. As such, it can be difficult to achieve accurate information through face-to-face, or even telephone, probing. Focus groups may yield better outcomes; however, the same issues of social desirability—both in relation to the moderator AND the other group participants—may hamper such an effort.

The community-based participatory research method referred to as Photovoice is, in the authors' opinion, the research method best suited to explore the issue of parental attitudes as they relate to underage drinking and adult problem drinking. As such, the authors recommend a follow-up Photovoice study to examine these issues.



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APPENDIX A

ATTITUDES TOWARD ALCOHOL: QUESTIONS AND TOPLINE RESULTS

PERCEPTIONS AND ATTITUDES REGARDING ALCOHOL ABUSE

Do you think that it is safe or dangerous <u>for a youth</u> to consume five or more alcoholic drinks within a 2-hour period?

Very safe	<1%
Somewhat safe	3%
Neither	1%
Somewhat dangerous	19%
Very dangerous	75%
Don't know	2%
Missing/Refused	<1%

Do you think that it is right or wrong for parents to supply alcohol at parties with youth under the age of 21?

Always right	<1%
Mostly right	4%
Neither	3%
Mostly wrong	21%
Always wrong	71%
Don't know	2%
Missing/Refused	<1%

Do you think that parents should or should not be able to buy alcohol for their children who are under the age of 21?

Always should be able to	5%
Usually should be able to	10%
Neither	3%
Usually shouldn't be able to	13%
Never should be able to	64%
Don't know	4%
Missing/Refused	<1%

Do you think that, in your community, the laws prohibiting the sale of alcohol to youth are adequately enforced or inadequately enforced?

Very adequately enforced	29%
Somewhat adequately enforced	26%
Neither	1%
Somewhat inadequately enforced	16%
Very inadequately enforced	12%
Don't know	16%
Missing/Refused	<1%

Do you think that, in your community, it is easy or hard for youth under the age of 21 to get alcohol?

Very easy	33%
Somewhat easy	31%
Neither	2%
Somewhat hard	12%
Very hard	6%
Don't know	16%

Do you think that underage drinking is like a rite of passage, meaning it is just part of growing up, or not?

Always part of growing up	6%
Sometimes a part of growing up	36%
Neither	2%
Mostly not a part of growing up	30%
Never a part of growing up	22%
Don't know	4%

Do you think, in your community, that the laws penalizing adults who give alcohol to youth are adequately enforced or inadequately enforced?

Very adequately enforced	15%
Somewhat adequately enforced	20%
Neither	1%
Somewhat inadequately enforced	20%
Very inadequately enforced	19%
Don't know	25%
Missing/Refused	<1%

Do you think that it is safe or dangerous <u>for an adult</u> to consume five or more alcoholic drinks within a 2-hour period?

Very safe	2%
Somewhat safe	12%
Neither	6%
Somewhat dangerous	37%
Very dangerous	38%
Don't know	4%
Missing/Refused	1%

Do you think that, in your community, the laws against drinking and driving are adequately enforced or inadequately enforced?

Very adequately enforced	31%
Somewhat adequately enforced	26%
Neither	<1%
Somewhat inadequately enforced	17%
Very inadequately enforced	17%
Don't know	9%

Do you think that drink specials like"2 for 1" and "Ladies' Night" encourage people to drink too much alcohol, or discourage people from drinking too much alcohol?

Strongly encourage too much drinking	37%
Somewhat encourage too much drinking	37%
Neither	13%
Somewhat discourage too much drinking	3%
Strongly discourage too much drinking	1%
Don't know	9%
Missing/Refused	<1%

Do you think that there are too many or too few signs and banners in stores and gas stations that advertise beer and other alcohol?

Far too many	17%
Somewhat too many	29%
Neither	34%
Somewhat too few	2%
Far too few	4%
Don't know	14%
Missing/Refused	<1%

Perceived Severity of Alcohol-Related Problems

Next I am going to ask you to rate the severity or mildness of some possible problems in your community. After I read each possible problem, I will ask you to tell me whether it is:

	Very Severe	Somewhat Severe	Moderate	Somewhat Mild	Very Mild	Do not know	Missing/ Refused
Alcohol use among <u>youth</u> in your community.	20%	24%	6%	30%	6%	14%	<1%
Drinking and driving among <u>youth</u> in your community.	22%	18%	4%	30%	9%	17%	<1%
Binge drinking by <u>youth</u> under age 21 in your community.	21%	21%	3%	26%	7%	22%	<1%
Binge drinking by Montana's <u>college</u> <u>students</u> .	36%	29%	1%	11%	1%	22%	<1%
Drinking and driving among <u>adults</u> in your community.	28%	28%	4%	28%	6%	6%	<1%
Binge drinking by <u>adults</u> age 21 or older in your community.	19%	20%	3%	34%	8%	15%	<1%

Support for Statewide Alcohol Abuse Control Measures and Preventive Efforts

Currently, several possible MEASURES TO CONTROL alcohol abuse in Montana have been proposed. Please tell me whether you, yourself, would support or oppose each proposed measure I read. Do you support or oppose?

	Strongly Support	Somewhat Support	Neither	Somewhat Oppose	Strongly Oppose	Do not know	Missing/ Refused
Increasing enforcement of existing alcohol- related laws.	50%	27%	3%	10%	7%	3%	<1%
Educating people about the consequences of alcohol abuse.	73%	21%	1%	2%	2%	1%	<1%
Making the community more aware of the problems and costs associated with alcohol abuse.	68%	22%	2%	4%	2%	2%	<1%
Letting communities know that some of the things related to drinking alcohol that they think are OK are really not OK.	58%	28%	1%	4%	4%	4%	<1%
Teaching communities how to change established and accepted unsafe behaviors or community norms related to alcohol abuse.	60%	26%	1%	4%	4%	5%	1%
Enacting new laws that are aimed at the problem of alcohol abuse.	40%	22%	5%	14%	14%	4%	<1%



APPENDIX B:

SURVEY RESPONSES DISAGGREGATED BY DEMOGRAPHIC SUB-GROUPS

Item B-1: Detail tables associated with Figure 1, page 5

	Very severe	Somewhat severe	Moderate	Somewhat mild	Very mild	Don't know
Male	14%	25%	5%	38%	8%	11%
Female	27%	24%	6%	22%	5%	16%
All respondents	20%	25%	6%	30%	6%	14%

How alcohol use among youth is perceived in community/BY GENDER

How alcohol use among youth is perceived in community/BY AGE GROUP

	Very severe	Somewhat severe	Moderate	Somewhat mild	Very mild	Don't know
18-34	19%	24%	4%	34%	10%	10%
35-49	22%	24%	6%	32%	3%	13%
50-61	21%	28%	8%	27%	5%	11%
62+	19%	21%	6%	27%	6%	22%
All respondents	20%	25%	6%	30%	6%	14%

How alcohol use among youth is perceived in community/BY URBAN/RURAL

	Very severe	Somewhat severe	Moderate	Somewhat mild	Very mild	Don't know
Urban (top 7 cities)	24%	30%	5%	27%	3%	12%
Rural	18%	22%	6%	32%	8%	14%
All respondents	20%	25%	6%	30%	6%	14%

How alcohol use among youth is perceived in community/BY PARENTAL STATUS

	Very severe	Somewhat severe	Moderate	Somewhat mild	Very mild	Don't know
Parent/legal guardian of child <21	23%	24%	9%	31%	4%	10%
NOT parent/legal guardian of child <21	19%	25%	4%	30%	7%	15%
All respondents	20%	25%	6%	30%	6%	13%

How alcohol use among youth is perceived in community/BY RACE

	Very severe	Somewhat severe	Moderate	Somewhat mild	Very mild	Don't know
White	19%	24%	6%	32%	6%	13%
American Indian	36%	35%	0%	9%	7%	13%
Other/Refused	21%	23%	5%	30%	4%	18%
All respondents	20%	25%	6%	30%	6%	14%

Item B-2: Detail tables associated with Figure 2, page 6

Alcohol use being considered	"part of growing up'	or a "rite of passage"/BY GENDER
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	Always part of growing up	Sometimes part of growing up	Neither	Mostly NOT part of growing up	Never part of growing up	Don't know
Male	7%	40%	2%	28%	20%	4%
Female	5%	32%	3%	31%	24%	5%
All respondents	6%	36%	2%	30%	22%	4%

Alcohol use being considered "part of growing up" or a "rite of passage"/BY AGE GROUP

	Always part of growing up	Sometimes part of growing up	Neither	Mostly NOT part of growing up	Never part of growing up	Don't know
18-34	4%	39%	2%	23%	29%	3%
35-49	7%	32%	3%	36%	16%	6%
50-61	6%	37%	2%	33%	19%	3%
62+	9%	33%	3%	28%	22%	6%
All respondents	6%	36%	2%	30%	22%	4%

Alcohol use being considered "part of growing up" or a "rite of passage"/BY URBAN/RURAL

	Always part of growing up	Sometimes part of growing up	Neither	Mostly NOT part of growing up	Never part of growing up	Don't know
Urban (top 7 cities)	8%	35%	1%	27%	24%	5%
Rural	5%	36%	3%	31%	21%	4%
All respondents	6%	36%	2%	30%	22%	4%

Alcohol use being considered "part of growing up" or a "rite of passage"/BY PARENTAL STATUS

	Always part of growing up	Sometimes part of growing up	Neither	Mostly NOT part of growing up	Never part of growing up	Don't know
Parent/legal guardian of child <a>	7%	34%	4%	30%	23%	2%
NOT parent/legal guardian of child <21	6%	37%	1%	29%	22%	5%
All respondents	6%	36%	2%	30%	22%	4%

Alcohol use being considered "part of growing up" or a "rite of passage"/BY RACE

	Always part of growing up	Sometimes part of growing up	Neither	Mostly NOT part of growing up	Never part of growing up	Don't know
White	6%	36%	2%	29%	24%	3%
American Indian	16%	45%	0%	27%	7%	5%
Other/Refused	4%	26%	4%	40%	12%	14%
All respondents	6%	36%	2%	30%	22%	4%

Item B-4: Detail tables associated with Figure 4, page 8

	Very easy	Somewhat easy	Neither	Somewhat hard	Very hard	Don't know
Male	29%	33%	2%	16%	6%	14%
Female	38%	30%	1%	7%	6%	19%
All respondents	33%	32%	2%	12%	6%	16%

Easy or hard for youth under age 21 to obtain alcohol/ BY GENDER

Easy or hard for youth under age 21 to obtain alcohol/ BY GENDER

	Very easy	Somewhat easy	Neither	Somewhat hard	Very hard	Don't know
18-34	34%	37%	0%	11%	10%	7%
35-49	31%	29%	2%	16%	5%	16%
50-61	33%	29%	3%	11%	6%	17%
62+	35%	28%	2%	8%	3%	25%
All respondents	33%	31%	2%	12%	6%	16%

Easy or hard for youth under age 21 to obtain alcohol/ BY GENDER

	Very easy	Somewhat easy	Neither	Somewhat hard	Very hard	Don't know
Urban (top 7 cities)	34%	33%	1%	12%	5%	15%
Rural	33%	31%	2%	11%	7%	17%
All respondents	33%	32%	2%	12%	6%	16%

Easy or hard for youth under age 21 to obtain alcohol/ BY GENDER

	Very easy	Somewhat easy	Neither	Somewhat hard	Very hard	Don't know
Parent/legal guardian of child <21	35%	34%	1%	11%	6%	12%
NOT parent/legal guardian of child <21	33%	30%	2%	11%	6%	18%
All respondents	33%	32%	2%	11%	6%	16%

Easy or hard for youth under age 21 to obtain alcohol/ BY GENDER

	Very easy	Somewhat easy	Neither	Somewhat hard	Very hard	Don't know
White	33%	33%	1%	11%	6%	16%
American Indian	39%	29%	2%	7%	11%	13%
Other/Refused	28%	19%	4%	19%	7%	23%
All respondents	33%	31%	2%	11%	6%	16%

Item B-5: Detail tables associated with Figure 5, page 9

	Always should be able to	Usually should be able to	Neither	Usually should not be able to	Never should be able to	Don't know
Male	7%	12%	4%	14%	60%	4%
Female	4%	7%	3%	13%	70%	4%
All respondents	5%	10%	3%	13%	65%	4%

Parents should or should not be able to buy alcohol for their children under age 21/BY GENDER

Parents should or should not be able to buy alcohol for their children under age 21/BY AGE GROUP

	Always should be able to	Usually should be able to	Neither	Usually should not be able to	Never should be able to	Don't know
18-34	9%	18%	2%	16%	49%	6%
35-49	4%	8%	4%	10%	69%	5%
50-61	4%	8%	4%	16%	65%	3%
62+	2%	4%	3%	12%	79%	1%
All respondents	5%	10%	3%	14%	65%	4%

Parents should or should not be able to buy alcohol for their children under age 21/BY URBAN/RURAL

	Always should be able to	Usually should be able to	Neither	Usually should not be able to	Never should be able to	Don't know
Urban (top 7 cities)	7%	14%	3%	13%	61%	2%
Rural	4%	7%	3%	14%	67%	5%
All respondents	5%	10%	3%	13%	65%	4%

Parents should or should not be able to buy alcohol for their children under age 21/BY PARENTAL STATUS

	Always should be able to	Usually should be able to	Neither	Usually should not be able to	Never should be able to	Don't know
Parent/legal guardian of child <21	4%	8%	4%	14%	68%	2%
NOT parent/legal guardian of child <21	6%	11%	3%	13%	63%	5%
All respondents	5%	10%	3%	14%	65%	4%

Parents should or should not be able to buy alcohol for their children under age 21/BY RACE

	Always should be able to	Usually should be able to	Neither	Usually should not be able to	Never should be able to	Don't know
White	6%	11%	3%	15%	62%	4%
American Indian	0%	2%	0%	9%	82%	7%
Other/Refused	2%	9%	14%	3%	72%	0%
All respondents	5%	10%	3%	14%	64%	4%

Item B-6: Detail tables associated with Figure 6, page 10

	Very adequately enforced	Somewhat ade- quately enforced	Neither	Somewhat inade- quately enforced	Very inade- quately enforced	Don't know
Male	19%	24%	2%	16%	18%	22%
Female	12%	15%	0%	23%	20%	29%
All respondents	15%	20%	1%	20%	19%	25%

Adequacy of enforcement of laws penalizing adults who provide alcohol to youth/BY GENDER

Adequacy of enforcement of laws penalizing adults who provide alcohol to youth/BY AGE GROUP

	Very adequately enforced	Somewhat ade- quately enforced	Neither	Somewhat inade- quately enforced	Very inade- quately enforced	Don't know
18-34	21%	24%	2%	19%	17%	17%
35-49	12%	17%	1%	24%	19%	28%
50-61	16%	22%	0%	17%	22%	23%
62+	11%	15%	1%	19%	19%	35%
All respondents	15%	20%	1%	20%	19%	25%

Adequacy of enforcement of laws penalizing adults who provide alcohol to youth/BY URBAN/RURAL

	Very adequately enforced	Somewhat ade- quately enforced	Neither	Somewhat inade- quately enforced	Very inade- quately enforced	Don't know
Urban (top 7 cities)	15%	20%	2%	17%	18%	27%
Rural	16%	19%	1%	21%	19%	24%
All respondents	16%	20%	1%	20%	19%	25%

Adequacy of enforcement of laws penalizing adults who provide alcohol to youth/BY PARENTAL STATUS

	Very adequately enforced	Somewhat ade- quately enforced	Neither	Somewhat inade- quately enforced	Very inade- quately enforced	Don't know
Parent/legal guardian of child <21	13%	20%	0%	26%	21%	20%
NOT parent/legal guardian of child <21	17%	20%	1%	17%	18%	28%
All respondents	15%	20%	1%	20%	19%	25%

Adequacy of enforcement of laws penalizing adults who provide alcohol to youth/BY RACE

	Very adequately enforced	Somewhat ade- quately enforced	Neither	Somewhat inade- quately enforced	Very inade- quately enforced	Don't know
White	16%	20%	1%	19%	19%	26%
American Indian	18%	16%	0%	27%	23%	16%
Other/Refused	12%	17%	0%	26%	17%	28%
All respondents	16%	20%	1%	20%	19%	25%

Item B-7: Detail tables associated with Figure 7, page 11

	Very adequately enforced	Somewhat ade- quately enforced	Neither	Somewhat inade- quately enforced	Very inade- quately enforced	Don't know
Male	34%	26%	1%	16%	9%	14%
Female	24%	25%	2%	17%	14%	19%
All respondents	29%	26%	1%	16%	12%	16%

Adequacy of enforcement of laws prohibiting the sale of alcohol to youth/BY GENDER

Adequacy of enforcement of laws prohibiting the sale of alcohol to youth/BY AGE GROUP

	Very adequately enforced	Somewhat ade- quately enforced	Neither	Somewhat inade- quately enforced	Very inade- quately enforced	Don't know
18-34	31%	24%	1%	19%	14%	12%
35-49	31%	28%	2%	17%	11%	11%
50-61	34%	25%	1%	13%	11%	16%
62+	21%	26%	1%	16%	11%	26%
All respondents	29%	26%	1%	16%	12%	16%

Adequacy of enforcement of laws prohibiting the sale of alcohol to youth/BY URBAN/RURAL

	Very adequately enforced	Somewhat ade- quately enforced	Neither	Somewhat inade- quately enforced	Very inade- quately enforced	Don't know
Urban (top 7 cities)	27%	28%	2%	15%	10%	18%
Rural	30%	24%	1%	17%	12%	16%
All respondents	29%	26%	1%	16%	12%	16%

Adequacy of enforcement of laws prohibiting the sale of alcohol to youth/BY PARENTAL STATUS

	Very adequately enforced	Somewhat ade- quately enforced	Neither	Somewhat inade- quately enforced	Very inade- quately enforced	Don't know
Parent/legal guardian of child <21	30%	24%	1%	20%	13%	12%
NOT parent/legal guardian of child <21	29%	27%	1%	14%	11%	18%
All respondents	29%	26%	1%	16%	12%	16%

Adequacy of enforcement of laws prohibiting the sale of alcohol to youth/BY RACE

	Very adequately enforced	Somewhat ade- quately enforced	Neither	Somewhat inade- quately enforced	Very inade- quately enforced	Don't know
White	29%	27%	1%	16%	11%	16%
American Indian	27%	14%	0%	29%	18%	13%
Other/Refused	35%	16%	4%	11%	11%	25%
All respondents	29%	26%	1%	16%	12%	16%

Item B-8: Detail tables associated with Figure 8, page 12

	Very severe	Somewhat severe	Moderate	Somewhat mild	Very mild	Don't know
Male	19%	19%	4%	34%	10%	15%
Female	26%	19%	4%	25%	8%	19%
All respondents	22%	19%	4%	30%	9%	17%

How drinking and driving among YOUTH is perceived in community/BY GENDER

How drinking and driving among YOUTH is perceived in community/BY AGE GROUP

	Very severe	Somewhat severe	Moderate	Somewhat mild	Very mild	Don't know
18-34	21%	17%	3%	26%	18%	14%
35-49	24%	19%	3%	32%	6%	16%
50-61	21%	19%	4%	34%	5%	17%
62+	22%	22%	5%	26%	4%	21%
All respondents	22%	19%	4%	30%	9%	17%

How drinking and driving among YOUTH is perceived in community/BY URBAN/RURAL

	Very severe	Somewhat severe	Moderate	Somewhat mild	Very mild	Don't know
Urban (top 7 cities)	26%	20%	4%	25%	6%	18%
Rural	20%	18%	4%	32%	10%	16%
All respondents	22%	19%	4%	30%	9%	17%

How drinking and driving among YOUTH is perceived in community/BY PARENTAL STATUS

	Very severe	Somewhat severe	Moderate	Somewhat mild	Very mild	Don't know
Parent/legal guardian of child <21	25%	11%	6%	32%	10%	16%
NOT parent/legal guardian of child <21	20%	23%	3%	28%	8%	17%
All respondents	22%	19%	4%	30%	9%	17%

How drinking and driving among YOUTH is perceived in community/BY RACE

	Very severe	Somewhat severe	Moderate	Somewhat mild	Very mild	Don't know
White	21%	19%	4%	30%	9%	17%
American Indian	41%	21%	0%	25%	5%	7%
Other/Refused	16%	19%	5%	28%	11%	21%
All respondents	22%	19%	4%	30%	9%	17%

Item B-10: Detail tables associated with Figure 10, page 14

	Very severe	Somewhat severe	Moderate	Somewhat mild	Very mild	Don't know
Male	22%	28%	4%	36%	7%	4%
Female	34%	27%	4%	22%	5%	8%
All respondents	28%	28%	4%	29%	5%	6%

How drinking and driving among ADULTS is Perceived in community/BY GENDER

How drinking and driving among ADULTS is Perceived in community/BY AGE GROUP

	Very severe	Somewhat severe	Moderate	Somewhat mild	Very mild	Don't know
18-34	31%	28%	2%	32%	3%	4%
35-49	31%	29%	3%	25%	5%	7%
50-61	25%	27%	6%	28%	7%	6%
62+	24%	27%	5%	29%	7%	8%
All respondents	28%	28%	4%	29%	5%	6%

How drinking and driving among ADULTS is Perceived in community/BY URBAN/RURAL

	Very severe	Somewhat severe	Moderate	Somewhat mild	Very mild	Don't know
Urban (top 7 cities)	32%	27%	5%	25%	4%	7%
Rural	26%	28%	3%	31%	6%	6%
All respondents	28%	28%	4%	29%	6%	6%

How drinking and driving among ADULTS is Perceived in community/BY PARENTAL STATUS

	Very severe	Somewhat severe	Moderate	Somewhat mild	Very mild	Don't know
Parent/legal guardian of child <21	34%	27%	5%	27%	4%	4%
NOT parent/legal guardian of child <21	25%	28%	4%	30%	7%	7%
All respondents	28%	28%	4%	29%	6%	6%

How drinking and driving among ADULTS is Perceived in community/BY RACE

	Very severe	Somewhat severe	Moderate	Somewhat mild	Very mild	Don't know
White	28%	27%	4%	30%	5%	6%
American Indian	32%	34%	0%	20%	11%	4%
Other/Refused	28%	31%	5%	17%	10%	9%
All respondents	28%	28%	4%	29%	6%	6%

Item B-11: Detail tables associated with Figure 11, page 15

	Very adequately enforced	Somewhat ade- quately enforced	Neither	Somewhat inade- quately enforced	Very inade- quately enforced	Don't know
Male	38%	26%	1%	14%	16%	6%
Female	23%	25%	0%	19%	21%	12%
All respondents	30%	25%	0%	16%	18%	9%

Adequacy of enforcement of laws against drinking and driving/BY GENDER

Adequacy of enforcement of laws against drinking and driving/BY AGE GROUP

	Very adequately enforced	Somewhat ade- quately enforced	Neither	Somewhat inade- quately enforced	Very inade- quately enforced	Don't know
18-34	39%	24%	0%	14%	18%	5%
35-49	26%	24%	0%	22%	21%	7%
50-61	34%	30%	1%	12%	16%	7%
62+	21%	24%	2%	18%	20%	16%
All respondents	30%	26%	0%	16%	18%	9%

Adequacy of enforcement of laws against drinking and driving/BY URBAN/RURAL

	Very adequately enforced	Somewhat ade- quately enforced	Neither	Somewhat inade- quately enforced	Very inade- quately enforced	Don't know
Urban (top 7 cities)	33%	24%	0%	17%	20%	7%
Rural	29%	27%	0%	16%	18%	10%
All respondents	30%	26%	0%	16%	18%	9%

Adequacy of enforcement of laws against drinking and driving/BY PARENTAL STATUS

	Very adequately enforced	Somewhat ade- quately enforced	Neither	Somewhat inade- quately enforced	Very inade- quately enforced	Don't know
Parent/legal guardian of child <21	29%	23%	0%	22%	21%	5%
NOT parent/legal guardian of child <21	31%	27%	1%	14%	17%	10%
All respondents	30%	26%	0%	16%	18%	9%

Adequacy of enforcement of laws against drinking and driving/BY RACE

	Very adequately enforced	Somewhat ade- quately enforced	Neither	Somewhat inade- quately enforced	Very inade- quately enforced	Don't know
White	30%	26%	0%	16%	19%	9%
American Indian	32%	29%	0%	23%	11%	5%
Other/Refused	34%	23%	0%	20%	14%	9%
All respondents	31%	26%	0%	16%	18%	9%

Item B-12: Detail tables associated with Figure 12, page 16

	Very safe	Somewhat safe	Neither	Somewhat dangerous	Very dangerous	Don't know
Male	1%	6%	2%	26%	64%	3%
Female	<1%	1%	<1%	12%	86%	2%
All respondents	%	3%	1%	19%	75%	2%

Safety or danger of YOUTH binge drinking/BY GENDER

Safety or danger of YOUTH binge drinking/BY AGE GROUP

	Very safe	Somewhat safe	Neither	Somewhat dangerous	Very dangerous	Don't know
18-34	1%	9%	1%	28%	58%	3%
35-49	<1%	2%	1%	15%	81%	1%
50-61	<1%	1%	1%	18%	78%	3%
62+	<1%	1%	1%	12%	85%	2%
All respondents	%	3%	1%	19%	75%	2%

Safety or danger of YOUTH binge drinking/BY URBAN/RURAL

	Very safe	Somewhat safe	Neither	Somewhat dangerous	Very dangerous	Don't know
Urban (top 7 cities)	<1%	3%	1%	19%	73%	3%
Rural	1%	3%	<1%	18%	75%	2%
All respondents	%	3%	1%	19%	75%	2%

Safety or danger of YOUTH binge drinking/BY PARENTAL STATUS

	Very safe	Somewhat safe	Neither	Somewhat dangerous	Very dangerous	Don't know
Parent/legal guardian of child <21	<1%	1%	1%	13%	83%	2%
NOT parent/legal guardian of child <21	1%	5%	1%	22%	70%	2%
All respondents	<1%	3%	1%	19%	75%	2%

Safety or danger of YOUTH binge drinking/BY RACE

	Very safe	Somewhat safe	Neither	Somewhat dangerous	Very dangerous	Don't know
White	<1%	2%	1%	20%	74%	2%
American Indian	<1%	14%	<1%	12%	72%	2%
Other/Refused	<1%	5%	<1%	9%	82%	4%
All respondents	%	3%	1%	19%	75%	2%

Item B-14: Detail tables associated with Figure 14, page 18

	Very safe	Somewhat safe	Neither	Somewhat dangerous	Very dangerous	Don't know
Male	4%	15%	8%	43%	26%	4%
Female	1%	10%	4%	31%	50%	4%
All respondents	2%	12%	6%	37%	38%	4%

Safety or danger of ADULT binge drinking/BY GENDER

Safety or danger of ADULT binge drinking/BY AGE GROUP

	Very safe	Somewhat safe	Neither	Somewhat dangerous	Very dangerous	Don't know
18-34	6%	24%	9%	39%	19%	4%
35-49	1%	12%	6%	38%	38%	5%
50-61	2%	10%	4%	38%	44%	3%
62+	1%	3%	5%	35%	54%	3%
All respondents	2%	13%	6%	37%	38%	4%

Safety or danger of ADULT binge drinking/BY URBAN/RURAL

	Very safe	Somewhat safe	Neither	Somewhat dangerous	Very dangerous	Don't know
Urban (top 7 cities)	1%	11%	6%	35%	41%	6%
Rural	3%	13%	6%	39%	36%	3%
All respondents	2%	12%	6%	37%	38%	4%

Safety or danger of ADULT binge drinking/BY PARENTAL STATUS

	Very safe	Somewhat safe	Neither	Somewhat dangerous	Very dangerous	Don't know
Parent/legal guardian of child <21	4%	11%	6%	38%	37%	4%
NOT parent/legal guardian of child <21	1%	13%	6%	37%	39%	4%
All respondents	2%	12%	6%	37%	38%	4%

Safety or danger of ADULT binge drinking/BY RACE

	Very safe	Somewhat safe	Neither	Somewhat dangerous	Very dangerous	Don't know
White	3%	12%	7%	38%	37%	3%
American Indian	0%	24%	0%	34%	33%	9%
Other/Refused	0%	11%	5%	28%	49%	7%
All respondents	2%	13%	6%	37%	38%	4%

Item B-15: Detail tables associated with Figure 15, page 19

	Very severe	Somewhat severe	Moderate	Somewhat mild	Very mild	Don't know
Male	17%	20%	2%	31%	10%	20%
Female	26%	21%	3%	22%	5%	23%
All repondents	21%	21%	3%	26%	7%	22%

Severity of issue of YOUTH binge drinking/BY GENDER

Severity of issue of YOUTH binge drinking/BY AGE GROUP

	Very severe	Somewhat severe	Moderate	Somewhat mild	Very mild	Don't know
18-34	24%	18%	1%	31%	11%	15%
35-49	24%	24%	4%	23%	5%	20%
50-61	21%	25%	3%	23%	7%	21%
62+	17%	16%	3%	26%	6%	32%
All repondents	21%	21%	3%	26%	8%	22%

Severity of issue of YOUTH binge drinking/BY URBAN/RURAL

	Very severe	Somewhat severe	Moderate	Somewhat mild	Very mild	Don't know
Urban (top 7 cities)	26%	27%	2%	18%	4%	23%
Rural	19%	17%	3%	31%	9%	21%
All repondents	21%	21%	3%	26%	7%	22%

Severity of issue of YOUTH binge drinking/BY PARENTAL STATUS

	Very severe	Somewhat severe	Moderate	Somewhat mild	Very mild	Don't know
Parent/legal guardian of child <21	25%	20%	5%	27%	7%	17%
NOT parent/legal guardian of child <21	20%	20%	2%	26%	8%	25%
All repondents	21%	20%	3%	26%	7%	22%

Severity of issue of YOUTH binge drinking/BY RACE

	Very severe	Somewhat severe	Moderate	Somewhat mild	Very mild	Don't know
White	20%	20%	2%	28%	7%	23%
American Indian	34%	16%	4%	21%	9%	16%
Other/Refused	23%	29%	7%	11%	13%	18%
All repondents	21%	21%	3%	26%	7%	22%

Item B-16: Detail tables associated with Figure 16, page 19

	Very severe	Somewhat severe	Moderate	Somewhat mild	Very mild	Don't know
Male	30%	31%	1%	15%	3%	21%
Female	43%	27%	1%	6%	1%	23%
All respondents	36%	29%	1%	11%	2%	22%

Severity of issue of COLLEGE STUDENTS binge drinking/BY GENDER

Severity of issue of COLLEGE STUDENTS binge drinking/BY AGE GROUP

	Very severe	Somewhat severe	MODERATE	Somewhat mild	Very mild	Dont know
18-34	37%	34%	0%	15%	0%	13%
35-49	38%	30%	1%	10%	3%	18%
50-61	35%	28%	1%	9%	1%	26%
62+	35%	23%	1%	7%	2%	32%
All respondents	36%	29%	1%	11%	1%	22%

Severity of issue of COLLEGE STUDENTS binge drinking/BY URBAN/RURAL

	Very severe	Somewhat severe	Moderate	Somewhat mild	Very mild	Don't know
Urban (top 7 cities)	44%	26%	2%	11%	1%	16%
Rural	32%	31%	0%	10%	2%	25%
All respondents	36%	29%	1%	11%	2%	22%

Severity of issue of COLLEGE STUDENTS binge drinking/BY PARENTAL STATUS

	Very severe	Somewhat severe	Moderate	Somewhat mild	Very mild	Don't know
Parent/legal guardian of child <21	38%	31%	1%	10%	1%	18%
NOT parent/legal guardian of child <21	35%	28%	1%	11%	2%	24%
All respondents	36%	29%	1%	11%	1%	22%

Severity of issue of COLLEGE STUDENTS binge drinking/BY RACE

	Very severe	Somewhat severe	Moderate	Somewhat mild	Very mild	Don't know
White	36%	29%	1%	10%	1%	23%
American Indian	36%	27%	2%	14%	5%	16%
Other/Refused	32%	32%	0%	11%	5%	20%
All respondents	36%	29%	1%	11%	1%	22%

Item B-17: Detail tables associated with Figure 17, page 20

	Very severe	Somewhat severe	Moderate	Somewhat mild	Very mild	Don't know
Male	13%	21%	3%	43%	9%	11%
Female	25%	19%	4%	26%	7%	20%
All respondents	19%	20%	3%	35%	8%	15%

Severity of issue of ADULT binge drinking/BY GENDER

Severity of issue of ADULT binge drinking/BY AGE GROUP

	Very severe	Somewhat severe	Moderate	Somewhat mild	Very mild	Don't know
18-34	23%	24%	2%	40%	8%	3%
35-49	23%	20%	6%	28%	8%	15%
50-61	18%	20%	4%	33%	7%	19%
62+	12%	15%	2%	36%	9%	26%
All respondents	19%	20%	3%	35%	8%	15%

Severity of issue of ADULT binge drinking/BY URBAN/RURAL

	Very severe	Somewhat severe	Moderate	Somewhat mild	Very mild	Don't know
Urban (top 7 cities)	18%	24%	4%	34%	5%	15%
Rural	20%	18%	3%	35%	10%	15%
All respondents	19%	20%	4%	35%	8%	15%

Severity of issue of ADULT binge drinking/BY PARENTAL STATUS

	Very severe	Somewhat severe	Moderate	Somewhat mild	Very mild	Don't know
Parent/legal guardian of child <21	26%	22%	6%	29%	5%	12%
NOT parent/legal guardian of child <21	15%	19%	2%	37%	10%	17%
All respondents	19%	20%	3%	35%	8%	15%

Severity of issue of ADULT binge drinking/BY RACE

	Very severe	Somewhat severe	Moderate	Somewhat mild	Very mild	Don't know
White	17%	20%	3%	36%	8%	16%
American Indian	38%	18%	2%	27%	11%	5%
Other/Refused	21%	23%	12%	19%	9%	16%
All respondents	19%	20%	4%	35%	8%	15%

Item B-18: Detail tables associated with Figure 18, page 21

	Far too many	Somewhat too many	Neither	Somewhat too few	Far too few	Don't know
Male	12%	30%	37%	3%	6%	13%
Female	22%	27%	31%	1%	3%	16%
All respondents	17%	29%	34%	2%	4%	14%

Signs and banners in stores and gas stations that advertise alcohol/BY GENDER

Signs and banners in stores and gas stations that advertise alcohol/BY AGE GROUP

	Far too many	Somewhat too many	Neither	Somewhat too few	Far too few	Don't know
18-34	11%	37%	33%	4%	6%	8%
35-49	23%	30%	32%	1%	2%	13%
50-61	15%	26%	37%	1%	4%	17%
62+	20%	21%	32%	1%	5%	20%
All respondents	17%	29%	34%	2%	4%	14%

Signs and banners in stores and gas stations that advertise alcohol/BY URBAN/RURAL

	Far too many	Somewhat too many	Neither	Somewhat too few	Far too few	Don't know
Urban (top 7 cities)	16%	28%	35%	1%	5%	15%
Rural	18%	29%	33%	2%	4%	14%
All respondents	17%	29%	34%	2%	4%	14%

Signs and banners in stores and gas stations that advertise alcohol/BY PARENTAL STATUS

	Far too many	Somewhat too many	Neither	Somewhat too few	Far too few	Don't know
Parent/legal guardian of child <21	20%	34%	32%	1%	1%	12%
NOT parent/legal guardian of child <21	16%	26%	34%	2%	6%	16%
All respondents	17%	29%	34%	2%	4%	14%

Signs and banners in stores and gas stations that advertise alcohol/BY RACE

	Far too many	Somewhat too many	Neither	Somewhat too few	Far too few	Don't know
White	16%	30%	34%	2%	5%	14%
American Indian	32%	21%	34%	0%	4%	9%
Other/Refused	21%	23%	33%	0%	0%	23%
All respondents	17%	29%	34%	2%	4%	14%

Item B-19: Detail tables associated with Figure 19, page 22

	Strongly encourage	Somewhat encourage	Neither	Somewhat discourage	Strongly discourage	Don't know
Male	32%	39%	17%	3%	1%	8%
Female	42%	35%	10%	2%	0%	10%
All respondents	37%	37%	13%	3%	1%	9%

Effects of drink specials on drinking TOO MUCH alcohol/BY GENDER

Effects of drink specials on drinking TOO MUCH alcohol/BY AGE GROUP

	Strongly encourage	Somewhat encourage	Neither	Somewhat discourage	Strongly discourage	Don't know
18-34	36%	44%	10%	5%	1%	4%
35-49	41%	30%	17%	1%	0%	11%
50-61	35%	35%	18%	3%	1%	9%
62+	38%	37%	10%	1%	1%	13%
All respondents	37%	37%	13%	3%	1%	9%

Effects of drink specials on drinking TOO MUCH alcohol/BY URBAN/RURAL

	Strongly encourage	Somewhat encourage	Neither	Somewhat discourage	Strongly discourage	Don't know
Urban (top 7 cities)	33%	38%	17%	4%	0%	8%
Rural	40%	37%	11%	2%	1%	10%
All respondents	37%	37%	13%	3%	1%	9%

Effects of drink specials on drinking TOO MUCH alcohol/BY PARENTAL STATUS

	Strongly encourage	Somewhat encourage	Neither	Somewhat discourage	Strongly discourage	Don't know
Parent/legal guardian of child <21	43%	34%	15%	2%	1%	5%
NOT parent/legal guardian of child <21	34%	39%	13%	3%	1%	11%
All respondents	37%	37%	13%	3%	1%	9%

Effects of drink specials on drinking TOO MUCH alcohol/BY RACE

	Strongly encourage	Somewhat encourage	Neither	Somewhat discourage	Strongly discourage	Don't know
White	36%	39%	13%	3%	1%	9%
American Indian	44%	37%	13%	0%	0%	6%
Other/Refused	45%	17%	22%	0%	0%	16%
All respondents	37%	37%	13%	3%	1%	9%

Item B-20: Detail tables associated with Figure 20, page 23

	Strongly support	Somewhat support	Neither	Somewhat oppose	Strongly oppose	Don't know
Male	42%	27%	4%	14%	11%	2%
Female	58%	27%	3%	5%	4%	4%
All respondents	50%	27%	3%	10%	7%	3%

Attitude towards increasing enforcement of EXISTING alcohol-related laws/BY GENDER

Attitude towards increasing enforcement of EXISTING alcohol-related laws/BY AGE GROUP

	Strongly support	Somewhat support	Neither	Somewhat oppose	Strongly oppose	Don't know
18-34	37%	32%	4%	15%	10%	2%
35-49	56%	27%	1%	5%	8%	4%
50-61	52%	24%	4%	11%	6%	2%
62+	59%	23%	4%	6%	4%	4%
All respondents	50%	27%	3%	10%	7%	3%

Attitude towards increasing enforcement of EXISTING alcohol-related laws/BY URBAN/RURAL

	Strongly support	Somewhat support	Neither	Somewhat oppose	Strongly oppose	Don't know
Urban (top 7 cities)	50%	25%	3%	11%	9%	1%
Rural	50%	28%	3%	9%	6%	4%
All respondents	50%	27%	3%	10%	7%	3%

Attitude towards increasing enforcement of EXISTING alcohol-related laws/BY PARENTAL STATUS

	Strongly support	Somewhat support	Neither	Somewhat oppose	Strongly oppose	Don't know
Parent/legal guardian of child <21	56%	25%	1%	6%	7%	4%
NOT parent/legal guardian of child <21	47%	28%	4%	11%	7%	3%
All respondents	51%	27%	3%	10%	7%	3%

Attitude towards increasing enforcement of EXISTING alcohol-related laws/BY RACE

	Strongly support	Somewhat support	Neither	Somewhat oppose	Strongly oppose	Don't know
White	51%	26%	3%	10%	7%	3%
American Indian	45%	38%	0%	13%	4%	0%
Other/Refused	43%	29%	7%	5%	9%	7%
All respondents	50%	27%	3%	10%	7%	3%

Item B-21: Detail tables associated with Figure 21, page 24

	Strongly support	Somewhat support	Neither	Somewhat oppose	Strongly oppose	Don't know
Male	31%	25%	5%	17%	19%	4%
Female	49%	20%	5%	12%	9%	5%
All respondents	40%	23%	5%	14%	14%	4%

Attitude towards enacting NEW laws aimed at curbing alcohol abuse/BY GENDER

Attitude towards enacting NEW laws aimed at curbing alcohol abuse/BY AGE GROUP

	Strongly support	Somewhat support	Neither	Somewhat oppose	Strongly oppose	Don't know
18-34	38%	28%	9%	13%	12%	1%
35-49	45%	21%	3%	11%	15%	5%
50-61	39%	22%	2%	16%	17%	5%
62+	40%	18%	5%	18%	14%	5%
All respondents	40%	23%	5%	14%	14%	4%

Attitude towards enacting NEW laws aimed at curbing alcohol abuse/BY URBAN/RURAL

	Strongly support	Somewhat support	Neither	Somewhat oppose	Strongly oppose	Don't know
Urban (top 7 cities)	40%	22%	5%	13%	15%	5%
Rural	40%	23%	5%	15%	14%	4%
All respondents	40%	23%	5%	14%	14%	4%

Attitude towards enacting NEW laws aimed at curbing alcohol abuse/BY PARENTAL STATUS

	Strongly support	Somewhat support	Neither	Somewhat oppose	Strongly oppose	Don't know
Parent/legal guardian of child <21	45%	19%	5%	11%	16%	4%
NOT parent/legal guardian of child <21	37%	25%	4%	16%	13%	4%
All respondents	40%	23%	5%	14%	14%	4%

Attitude towards enacting NEW laws aimed at curbing alcohol abuse/BY RACE

	Strongly support	Somewhat support	Neither	Somewhat oppose	Strongly oppose	Don't know
White	41%	21%	5%	14%	15%	4%
American Indian	45%	36%	0%	9%	7%	4%
Other/Refused	32%	23%	7%	19%	16%	4%
All respondents	40%	23%	5%	14%	14%	4%

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