

State Epidemiological Outcomes Workgroup Meeting

November 2, 2006

Attendees: *Roy Gabriel, RMC Research* *Jon Collins, AMH*
Mathew Tschabold, OCCF *Karen Wheeler, AMH*
Bill Etter, DEA *Lawrence Piper, AMH*
Rita Conrad, Progress Board *Jeff Ruscoe, AMH*
Mel Kohn, PHD *Caroline Cruz, AMH*
Lesa Dixon-Gray, OFH *Shane Lopez-Johnston, AMH*
Dee Humphries, AMH *Geralyn Brennan, AMH*

Review of Minutes from September meeting:

- Minutes from the October 5 meeting were reviewed. No corrections were noted.

Summary of Input Provided by Email

There were a number of workgroup members who were unable to attend the meeting, but emailed some thoughts about the alcohol data and summary documents. The comments were reviewed at the start of the meeting and are summarized here. Comments focused primarily on 1) importance of Oregon trends; 2) identifying and using national results as targets; 3) the age of first use measure; 4) alternatives to 30 day use as a measure of severity; 5) notes on counter interpretations; and 6) cost data.

1. Importance of Oregon trends-- Comparisons to national results and trends can provide useful context. It will be a challenge to distill all of the information into a short set of priorities.

Suggestions:

- Use US results as context for Oregon results, but not as strict targets. Priority setting should take Oregon trends into greater consideration than US rates. The more important question to ask when looking at the data is “are we making sufficient progress toward the target with all groups?”
 - Highlight trends that show differences of more than just a few percentage points such as: binge drinking and heavy drinking for males 18 to 24; underage drinking; alcohol-involved motor vehicle crashes; and alcohol availability for 8th graders.
2. Setting, reporting and using targets—There is a big method bias between the Oregon Healthy Teen survey and the National Survey on Drug Use and Health so NSDUH results should not be used as a comparison for OHT survey results.

Suggestions:

- Monitoring the Future provides national annual trend data for grades 8, 10 and 12 that can be used as an appropriate comparison of results. Whenever available Geralyn will use national MTF results for target/US rate information for 8th grade OHT measures.
 - YRBSS trend data specific to 11th grade, if available, is another good comparison for OHT grade 11.
3. Age of first use—a number of people responded that this is an important measure because of its association with the severity of later alcohol or drug use but it is problematic. The mechanism through which early onset affects later problems is unclear. It is often interpreted as causal, however, it is just as likely that those who are predisposed to dependence, start drinking earlier and because of these same predisposing factors develop problems. In addition, age at first use is not strongly related to regular use.

Suggestions:

- Retain the age of first use measure for 11th graders and add trends in lifetime use of 8th graders and compare to national trend data from Monitoring the Future survey.
 - This may be possible in the future however this question has not been on the OHT survey so we do not have data to use for the alcohol profile.
4. 30 day use rates—data has been reported by simply using the usual 30 day use dichotomous measure.

Suggestions:

- Create a second level of greater severity from existing aggregate data. (Question states: On how many occasions (if any) have you had beer or wine (non-religious) or hard liquor (for example, vodka, whiskey, or gin) to drink during the past 30 days? Answer choices: 0 occasions; 1 to 2 occasions; 3 to 5 occasions; 6 to 9 occasions; 10 or more occasions)
5. Counter interpretations—it would be good to start recording footnotes during the discussions of methodological issues and environmental factors that might explain or influence interpretation of the data.
6. Cost data—the fact sheets that are eventually produced will need costs of these problems.

Review of the Compiled Alcohol Data:

Geralyn gave an overview of how the alcohol-related data was compiled and summarized. One worksheet provided trend data for a set of measures that

give an overview of the state. If data for a measure was broken out by age, gender, or race ethnicity, it was presented in subsequent Excel spreadsheets. For example the Oregon Healthy Teen Survey provides results for 8th and 11th grades by gender and race/ethnicity so a spreadsheet was included to provide this additional detail.

The data was examined for trends over time, some measures had data for 10 years, others 5 years or less. It was also compared to a target or US results. The summary classifies the measures in a 2X3 grid based on trends and comparison to a target or the US rate and then provides some description of trends for the measures.

Review of Alcohol Data Summary:

Roy led the workgroup through a lengthy discussion of the alcohol data summary. The workgroup provided a lot of valuable insight and recommendations for further development of the alcohol profile. Below is a summary of the comments:

1. *Priority population omitted.* Lesa noted that there was no data provided regarding pregnant women. Pregnant women have been a priority population for treatment. There's also a benchmark regarding alcohol, tobacco and drug use during pregnancy. This omission highlights the role of the SEOW in reviewing the information and ensuring that the data included in the profiles is adequate enough to provide information about important populations and issues. The benchmark data will be added and Geralyn will work with Lesa to identify any additional data that should be incorporated into the profile.
2. *Connect information to programs.* Mel suggested that measures/data that connect directly to programs and can be used by them in a practical way (planning, assessing, goal-setting, outcomes) is valuable to examine and include in the profiles. Report on things that we can really do something about, not what is just interesting.
3. *Targets.* In the profiles it's most important to examine Oregon trends. Comparison to national trends can be used as long as it's from comparable data. But the comparison to national trends is to set the context within the profile rather than assessing success or failure. Targets presented or discussed in the profiles should be realistic.

4. *Adult data.* In general, there hasn't been much change in a lot of the adult data. Limited consequence data was provided, but vital statistics data is being pulled together regarding alcohol-related deaths and years of productive life lost. If there were any obvious themes they are that men continue to be overrepresented in both levels of consumption and impacts, and that there's a high rate of binge drinking in young adulthood (18-24) and then it drops off in the 30's.
5. *Wine.* For beer and liquor Oregon's per capita consumption is the same as the national rate however, Oregonians consume more wine. There was lively discussion of many aspects of this fact.
 - An important point was made by Rita when she noted that state government helps support economic development of many aspects of the wine industry (agriculture, production and tourism to name a few).
 - Another important point that was made was that although wine accounts for Oregon's higher per capita alcohol consumption, it does not appear to contribute to underage drinking. OHT data shows that both 8th and 11th grade youths choose liquor as their preferred drink of choice. Wine isn't in the top 3 choices for either grade.
6. *Crash.* When presenting the data do not refer to motor vehicle "accidents", rather the term to use should be "crash". Geralyn will make these changes.
7. *Underage DUIIs.* One striking trend has been the decrease in the number of DUIIs issued to 18 to 24 year olds. It was noted that DUII campaigns have been widespread and there was a tightening of the laws and possible saturation of patrols. This has been the result of ODOT efforts. Geralyn will contact Gretchen or Troy to get their input on what happened with this age group that can account for the marked drop in DUII rates for them.
8. *Native American data.* Lesa shared some information about a study that the Office of Family Health conducted that showed that American Indian and Caucasian women of childbearing age had the highest binge drinking rates 3 months prior to pregnancy. Lesa suggested we look at some regional data also. Leslie Randall, Epidemiologist from the Northwest Portland Area Indian Health Board, may have additional tribal data that may be useful including data about the urban population. Geralyn will invite Leslie to participate in the workgroup.

9. *More on race/ethnicity data.* It was noted that the race/ethnicity data was interesting, but that Oregon has a small population and the nonwhite population is even smaller. The OHT race/ethnicity report published to the web uses the random sample for calculating results. There was additional conversation about whether this included a large enough sample to reliably generalize the results. Geralyn will test this by taking a couple questions and comparing the results for the entire population of specific race/ethnicity groups to the results provided in the OHT report. If the results are consistent in both instances, then trend data will be examined for each of the race/ethnicity subcategories. If the results seem markedly different, then the matter will be returned to workgroup for further discussion.

10. *Significant middle school trends.* The data about 30 day alcohol use and binge drinking have shown marked increases, with some serious girl-specific issues. A number of people noted that the data validates what they are doing—focusing on middle school and their parents.

- Roy pointed out additional information that was summarized for the 2006 OHT alcohol press release that would help describe the issues. He suggested some additional data that helps probe underage drinking, but doesn't necessarily have to be presented as trend data. Geralyn will add information regarding the type of alcohol consumed, where they get alcohol, and the influence of parents' opinions.
- Karen stated that beer and wine taxes pay for some prevention; liquor does not. Given the preference youth expressed for liquor, there is a case to be made for dedicating some liquor proceeds for prevention.
- Youth seem to prefer liquor because they can drink less and get a faster effect. Bill noted that there's a new trend for putting cough syrup in sodas for a high, not unlike adding liquor to soda.
- Lawrence noted the need to focus on elementary schools and to survey 6th graders. This was recommended in the Governor's Council's Domino Effect and the data compiled so far reinforces this need.
- The youth information should be valuable to the Department of Education. Lawrence explained that the Department of Education has Oars that require annual alcohol education in high schools throughout the state. Lawrence will follow up with Todd Twyman to see if ODE tracks the programs being implemented in high schools/school

districts throughout the state. Lawrence will also encourage Todd's participation in the December meeting.

11. *Telling the story with data.* There was discussion of what we want the data to tell us. The main thing is to help identify where communities can make an impact. In moving from the profile to fact sheets the audiences will go from broad to focused. So in developing the profile, more comprehensive data may be analyzed and then for fact sheets, additional or more specific data can help shape the message.

Action Items:

<i>What</i>	<i>Who</i>
Revise target/US rate information for 8 th grade OHT measures	Geralyn
Geralyn will work with Lesa to identify/obtain additional data that should be incorporated regarding pregnant women and infants.	Geralyn Lesia
Add benchmark data regarding substance use during pregnancy to the profile measures.	Geralyn
Contact Gretchen or Troy regarding DUIs and 18 to 24 year olds.	Geralyn
Contact Todd Twyman to encourage him to attend the December SEOW meeting and find out if there is an inventory of school-based programs.	Lawrence
Test race/ethnicity data.	Geralyn
Add information to youth profile regarding type of alcohol consumed, where they get alcohol, and influence of parents.	Geralyn

Next meeting: Thursday, December 7, 1:00-4:00
 DHS, Room 352
 500 Summer Street, Salem
Videoconferencing is available