DRIP! *Data Rich Information Poor*: Linking Questions to the Right Data Sources

Cecil J. Picard Center for Child Development & Lifelong Learning

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Contributors:
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Today’s Objective is to identify sources of data responsive to new and recurring questions.

- National Level
- State Level
- Region Level
- Parish Level
- School Level
• Who
• What
• When
• Where
• How
• How many
• **WHY**
See the evidence
Substance Abuse and Mental Health Service Administration (SAMHSA)

First and best source for national and regional data

www.SAMHSA.gov
SAMHSA

Type of Data (5)
1) Population Data
2) Client Level Data
3) Substance Abuse Facilities Data
4) Mental Health Facilities Data
5) Emergency Department Data

Data level
1) State
2) Region
3) Metro
<table>
<thead>
<tr>
<th>Subject</th>
<th>Total</th>
<th>Labor Force Participation Rate</th>
<th>Employment/Population Ratio</th>
<th>Unemployment Rate</th>
<th>Total</th>
<th>Labor Force Participation Rate</th>
<th>Employment/Population Ratio</th>
<th>Unemployment Rate</th>
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</thead>
<tbody>
<tr>
<td>Arabic Parishes, Louisiana</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Population 15 years and over</td>
<td>47,857</td>
<td>6,030</td>
<td>50.6%</td>
<td>14.4%</td>
<td>32.2%</td>
<td>45.9%</td>
<td>2.2%</td>
<td>51.8%</td>
</tr>
<tr>
<td>Age</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>65 and older</td>
<td>9,874</td>
<td>1,330</td>
<td>25.7%</td>
<td>2.4%</td>
<td>37.0%</td>
<td>10.5%</td>
<td>2.7%</td>
<td>51.3%</td>
</tr>
<tr>
<td>18-64 years</td>
<td>37,983</td>
<td>4,700</td>
<td>54.7%</td>
<td>15.3%</td>
<td>32.2%</td>
<td>45.9%</td>
<td>2.2%</td>
<td>51.8%</td>
</tr>
<tr>
<td>Race and Hispanic origin</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>White alone</td>
<td>38,349</td>
<td>4,260</td>
<td>54.1%</td>
<td>15.1%</td>
<td>32.2%</td>
<td>45.9%</td>
<td>2.2%</td>
<td>51.8%</td>
</tr>
<tr>
<td>Black or African American alone</td>
<td>8,770</td>
<td>1,250</td>
<td>51.0%</td>
<td>14.6%</td>
<td>32.2%</td>
<td>45.9%</td>
<td>2.2%</td>
<td>51.8%</td>
</tr>
<tr>
<td>American Indian and Alaska Native alone</td>
<td>27</td>
<td>38</td>
<td>61.5%</td>
<td>14.2%</td>
<td>32.2%</td>
<td>45.9%</td>
<td>2.2%</td>
<td>51.8%</td>
</tr>
<tr>
<td>Asian alone</td>
<td>305</td>
<td>53</td>
<td>51.5%</td>
<td>13.8%</td>
<td>32.2%</td>
<td>45.9%</td>
<td>2.2%</td>
<td>51.8%</td>
</tr>
<tr>
<td>Native Hawaiian and Other Pacific Islander alone</td>
<td>14</td>
<td>3</td>
<td>60.0%</td>
<td>13.0%</td>
<td>32.2%</td>
<td>45.9%</td>
<td>2.2%</td>
<td>51.8%</td>
</tr>
<tr>
<td>Some other race alone</td>
<td>341</td>
<td>105</td>
<td>50.0%</td>
<td>16.0%</td>
<td>32.2%</td>
<td>45.9%</td>
<td>2.2%</td>
<td>51.8%</td>
</tr>
<tr>
<td>TMacro race or multiple races alone</td>
<td>420</td>
<td>71</td>
<td>57.1%</td>
<td>15.0%</td>
<td>32.2%</td>
<td>45.9%</td>
<td>2.2%</td>
<td>51.8%</td>
</tr>
<tr>
<td>Hispanic origin or Latinx alone (of any race)</td>
<td>640</td>
<td>22</td>
<td>71.9%</td>
<td>3.7%</td>
<td>32.2%</td>
<td>45.9%</td>
<td>2.2%</td>
<td>51.8%</td>
</tr>
<tr>
<td>White alone, some Hispanic or Latino</td>
<td>35,042</td>
<td>1,977</td>
<td>51.7%</td>
<td>3.1%</td>
<td>32.2%</td>
<td>45.9%</td>
<td>2.2%</td>
<td>51.8%</td>
</tr>
<tr>
<td>Population 20 to 64 years</td>
<td>30,999</td>
<td>1,714</td>
<td>51.0%</td>
<td>2.1%</td>
<td>32.2%</td>
<td>45.9%</td>
<td>2.2%</td>
<td>51.8%</td>
</tr>
<tr>
<td>Sex</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>17,514</td>
<td>1,074</td>
<td>51.6%</td>
<td>2.3%</td>
<td>32.2%</td>
<td>45.9%</td>
<td>2.2%</td>
<td>51.8%</td>
</tr>
<tr>
<td>Female</td>
<td>13,485</td>
<td>1,150</td>
<td>54.7%</td>
<td>2.3%</td>
<td>32.2%</td>
<td>45.9%</td>
<td>2.2%</td>
<td>51.8%</td>
</tr>
<tr>
<td>W/O children under 10 years</td>
<td>7,822</td>
<td>1,423</td>
<td>60.4%</td>
<td>2.4%</td>
<td>32.2%</td>
<td>45.9%</td>
<td>2.2%</td>
<td>51.8%</td>
</tr>
<tr>
<td>W/O children under 5 years W/O 6 to 17 yrs</td>
<td>2,362</td>
<td>837</td>
<td>58.7%</td>
<td>2.4%</td>
<td>32.2%</td>
<td>45.9%</td>
<td>2.2%</td>
<td>51.8%</td>
</tr>
<tr>
<td>W/O children under 5 years and 6 to 17 yrs</td>
<td>1,460</td>
<td>406</td>
<td>63.0%</td>
<td>2.6%</td>
<td>32.2%</td>
<td>45.9%</td>
<td>2.2%</td>
<td>51.8%</td>
</tr>
<tr>
<td>With children under 5 years and 6 to 17 yrs</td>
<td>3,392</td>
<td>707</td>
<td>57.0%</td>
<td>2.5%</td>
<td>32.2%</td>
<td>45.9%</td>
<td>2.2%</td>
<td>51.8%</td>
</tr>
<tr>
<td>POVERTY STATUS IN THE PAST 12 MONTHS</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Below poverty level</td>
<td>8,319</td>
<td>1,098</td>
<td>67.6%</td>
<td>3.0%</td>
<td>32.2%</td>
<td>45.9%</td>
<td>2.2%</td>
<td>51.8%</td>
</tr>
<tr>
<td>At poverty level</td>
<td>23,899</td>
<td>1,718</td>
<td>71.0%</td>
<td>2.3%</td>
<td>32.2%</td>
<td>45.9%</td>
<td>2.2%</td>
<td>51.8%</td>
</tr>
<tr>
<td>DISABILITY STATUS</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>With any disability</td>
<td>5,230</td>
<td>758</td>
<td>62.1%</td>
<td>3.0%</td>
<td>32.2%</td>
<td>45.9%</td>
<td>2.2%</td>
<td>51.8%</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
What is NSDUH?

The National Survey on Drug Use and Health (NSDUH) provides up-to-date information on tobacco, alcohol, and drug use, mental health and other health-related issues in the United States.

NSDUH began in 1971 and is conducted every year in all 50 states and the District of Columbia. This year almost 70,000 people will be interviewed for this important study.

Information from NSDUH is used to support prevention and treatment programs, monitor substance use trends, estimate the need for treatment and inform public health policy.
NSDUH Reports

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Quick links

NSDUH in the News
View the NSDUH Brochure
Who Conducts NSDUH?
Who Uses NSDUH Data?
Frequently Asked Questions
Confidentiality
National Survey on Drug Use and Health (NSDUH)

- National level
- State level
Welcome to the online analysis tool for SAMHDA studies.

This tool allows access, exploration and analysis of the nation’s substance abuse and mental health data, in order to support a better understanding of these critical areas of public health.

The Public-use Data Analysis System (P-DAS) uses the surveys listed under “Public Surveys” in the left column. This section allows users to explore the relevant study variables, run crosstab analyses, and download the results of analysis as a PNG image, or as a data file in CSV format.

The Restricted-use Data Analysis System (R-DAS) uses the surveys listed under “Restricted Surveys” in the left column. Access to this section requires creating a user name and password to access the tool. This section functions similarly to the P-DAS, but also allows assessing results over multiple survey years or year pairs, and includes surveys with location-based information.

To begin, select a survey from the list of available surveys to the left. This will bring you to the survey page to then select individual study variables to analyze.
Bach Harrison
Social Indicators → Louisiana Substance Abuse Prevention Indicator Database → Data Sources

www.bach-harrison.com
Bach Harrison

- National Data Sources
- Louisiana Specific Data Sources

www.bach-harrison.com
<table>
<thead>
<tr>
<th>Report</th>
<th>Description</th>
<th>Notes</th>
<th>Data Source Info</th>
</tr>
</thead>
<tbody>
<tr>
<td>Substance Abuse Profile Report by Parish</td>
<td>The Substance Abuse Profile Report by Parish provides an overview for each parish of the state’s priority substance abuse related indicators for tobacco, alcohol and illicit drugs. Additionally, a variety of demographic information about each parish is included. <a href="#">more...</a></td>
<td>For a publication ready document we recommend exporting the report to PDF using the export button found at the top of the report (floppy disk icon). You may also export to Word or Excel, for a more easily editable document.</td>
<td>Parish-Region SA Profile Report Indicator Information.pdf</td>
</tr>
<tr>
<td>Substance Abuse Profile Report by Region</td>
<td>The Substance Abuse Profile Report by Region provides an overview for each (Office of Behavioral Health) region of the state’s priority substance abuse related indicators for tobacco, alcohol and illicit drugs. Additionally, a variety of demographic information about each region is included. <a href="#">more...</a></td>
<td>For a publication ready document we recommend exporting the report to PDF using the export button found at the top of the report (floppy disk icon). You may also export to Word or Excel, for a more easily editable document.</td>
<td>Parish-Region SA Profile Report Indicator Information.pdf</td>
</tr>
</tbody>
</table>
Access CCYS Reports on our website

www.picardcenter.louisiana.edu
CCYS

- State Level
- Regional Level
- Parish Level
- School Level

www.picardcenter.louisiana.edu

CCYS Reports

(Please Remember to sign out at the Welcome CCYS Guest prompt at the top right of screen.)

State Reports
DHH Region Reports
Education Region Reports
Parish Reports
District Reports
School Reports

Note: To access School Reports, please contact the Superintendent of the School District.
Underage Drinking: What’s the Problem?

Cecil J. Picard Center for Child Development & Lifelong Learning

Paula D. Zeanah, Ph.D., M.S.N., R.N.

Contributors:
Ray Biggar, Ph.D., York Forsyth, M.S., Jing Chen, M.S., Karen Burstein, Ph.D.
Is underage drinking really a problem?

- “All kids do it”
- “I did, and I turned out all right”
- “I’d rather they learn to drink before they go to college—then it’s not such a big deal”
- “I just take away the keys”
- “They’ve gotta learn”
Objectives of Today’s Presentation

• Discuss adolescence as a period of *vulnerability* to the effects of alcohol
• Highlight current data on underage alcohol *consumption*
• Describe short and long-term *consequences* of underage alcohol use
• Consider preventive interventions and need for interdisciplinary research
Adolescents are Vulnerable

- Adolescence: a time of increased susceptibility to effects of alcohol (Petit et al, 2013):
  - Brain development
  - Peer influence
  - Family
  - Community/Social expectations

- Alcohol abuse can be apparent during teen years
Human Brain at Different Ages

Newborn infant brain

Adolescent brain
Ungrateful, talks back, risk taking, doesn't clean room, moody

Adult brain

Slide courtesy Charles A. Nelson, Ph.D.
Peer Influences

- Peers are a strong predictor of adolescent behavior
  - Use peers to determine what’s “normative”...
  - Even if parents might disapprove
  - Tend to underestimate use and effects of substance use by friends/selves

- Affiliation with deviant group increases likelihood of substance use, delinquent, and risk-taking behaviors
Peer Influences  
*Source: CCYS*

- Number of friends who tried alcohol when parents didn’t know about it (12 mos.)?
- How wrong would your friends feel it would be if you have 1-2 drinks of alcohol most days? A little or not wrong: **19.56%**
- Would your friends think you were cool if you began drinking alcohol?
  - Some chance: **9.77%**
  - Pretty good or very good chance: **11.83%**
Family Influences

- Family history
  - Children of alcoholics 3-4x more likely to develop alcohol use disorder
  - Higher risk if more family members also have alcohol use disorder
  - Other: impulse disorders, bipolar, schizophrenia (APA, 2013)

- Adverse Childhood Experiences (ACEs) (Dube et al, 2006)

- Lenient attitudes/expectations about youth drinking
  - Rules, limits, modeling
Community Influences

**ATTITUDES**

Adults believe teen drinking is:
- A little wrong/not wrong: 21.1%

Get caught by police drinking and driving:
- Unlikely or very unlikely: 63.56%

If caught by police:
- Little or no trouble: 23.35%

**ACCESS**

Ease of getting beer, wine, or hard liquor:
- Sort of or very easy: 36.86%

Ease of buying from a store:
- Sort of or very easy: 20.78%
Louisiana Laws

• Minimum Legal Drinking Age (MLDA) is 21 years.
• Underage drinking is allowed:
  • On private, non-alcohol selling premises with parental permission (29 states)
  • On private, non-alcohol selling premises without parental consent or presence (6 states)
  • On alcohol-selling premises with parental approval (8 states)
## Alcohol Consumption by Louisiana Youth

*Source: CCYS*

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Age Category</th>
<th>Year</th>
<th>Louisiana</th>
<th>USA</th>
<th>LA:USA</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>30 Day Alcohol</strong></td>
<td>Grade 8</td>
<td>2016</td>
<td>14.1%</td>
<td>7.3%</td>
<td>1.93:1</td>
</tr>
<tr>
<td></td>
<td>Grade 10</td>
<td>2016</td>
<td>26.8%</td>
<td>19.9%</td>
<td>1.35:1</td>
</tr>
<tr>
<td></td>
<td>Grade 12</td>
<td>2016</td>
<td>36.4%</td>
<td>33.2%</td>
<td>1.10:1</td>
</tr>
<tr>
<td><strong>Binge Drinking</strong></td>
<td>Grade 8</td>
<td>2016</td>
<td>7.8%</td>
<td>3.4%</td>
<td>2.29:1</td>
</tr>
<tr>
<td>(At least 5 drinks at one</td>
<td>Grade 10</td>
<td>2016</td>
<td>14.6%</td>
<td>9.7%</td>
<td>1.51:1</td>
</tr>
<tr>
<td>session within two weeks)</td>
<td>Grade 12</td>
<td>2016</td>
<td>21.2%</td>
<td>15.5%</td>
<td>1.37:1</td>
</tr>
<tr>
<td>Indicators</td>
<td>Non-drinker (No consumption past year)</td>
<td>Non-heavy drinker (&lt; 5 drinks on single occasion in past 2 wks)</td>
<td>Heavy drinker (binge) (&gt; 5 drinks on single occasion in past 2 wks)</td>
<td>Heavy and frequent (&gt; 5 drinks on single occasion AND drank &gt; 3 occasions per week)</td>
<td></td>
</tr>
<tr>
<td>------------------------------------</td>
<td>----------------------------------------</td>
<td>---------------------------------------------------------------</td>
<td>---------------------------------------------------------------</td>
<td>--------------------------------------------------------------------------------</td>
<td></td>
</tr>
<tr>
<td>Percent of students</td>
<td>20.3%</td>
<td>45%</td>
<td>21.2%</td>
<td>12.5%</td>
<td></td>
</tr>
<tr>
<td>Avg. # of drinks/week</td>
<td>0.3</td>
<td>1.0</td>
<td>3.4</td>
<td>11.7</td>
<td></td>
</tr>
<tr>
<td>Use marijuana in past 30 days</td>
<td>2.5%</td>
<td>11.9%</td>
<td>26.7%</td>
<td>43.3%</td>
<td></td>
</tr>
<tr>
<td>Other illicit drugs in past 30 days</td>
<td>1.4%</td>
<td>4.4%</td>
<td>8.4%</td>
<td>26.7%</td>
<td></td>
</tr>
<tr>
<td>Public misconduct</td>
<td>6.2%</td>
<td>20.1%</td>
<td>45.1%</td>
<td>62.7%</td>
<td></td>
</tr>
<tr>
<td>“Personal problems”</td>
<td>6.2%</td>
<td>14.4%</td>
<td>29.9%</td>
<td>43.4%</td>
<td></td>
</tr>
</tbody>
</table>

N=5,873; 78% 18-22 years of age; 63.8% female; 90.4% heterosexual; 85.7% from Louisiana; 62.1% white/28.4% black
Underage alcohol use consequences

- Nearly 5,000 deaths/year <21 years (e.g., car accidents, injuries, suicide, homicide)
- Increased risk taking behaviors
- Injuries requiring ER treatment
- Decreased academic performance
- Unwanted/unprotected sexual activity (including initiation)
- Cause or victim of physical/sexual assault
- Other drug use

(CDC, 2016)
Long-term Consequences

• Increased binge drinking, alcohol-related harm and symptoms of alcohol use disorder (Mattick et al, 2018)
  • For teens who receive alcohol from parents
  • Greater risk for teens who receive alcohol from parents and other sources

• Initiation of alcohol use (≤ 14 years) 5x more likely to develop an alcohol use disorder compared to those who begin drinking ≥ 21 years

• 12-month prevalence of alcohol use disorder (APA, 2013)
  • 4.6% among 12-17 year olds
  • 8.5% 18 and above
What Helps?

• Public information campaigns
  • SAMHSA’s “Talk. They Hear You” targets parents of children 9-15 years of age

• Individual strategies
  • Education/awareness, skills, motivation and feedback

• Family approaches
  • Expectations, limit setting, modeling, communication

• Environmental programs or policies
  • Alternative activities, alcohol-free zones

• Enforce or enact stricter laws*
  • Reduce availability/access

(CDC, 2016; NIAAA, 2017; SAMSHA, 2017)
Final Thoughts

• Despite improvements in alcohol use and misuse, underage drinking remains a significant concern for the health and well-being of teens and young adults.

• Given the risks and consequences of underage drinking, comprehensive, multidisciplinary approaches remain urgently needed.

• Ongoing research to build the evidence to best address adolescent vulnerabilities, consumption, and consequences associated with underage drinking.
References


• Rowald, L. (2015). 2015 Core Survey Results: Examining the Louisiana Consortium


• CCYS data (ask Ray)
Thank you