

Childhood Drinking

How can we prevent and reduce the number of children drinking alcohol?

Childhood drinking is a problem for the entire community. It does not have a single solution. It must be addressed by many different kinds of people, because solutions will depend on actions by everyday people, community organizations, and government.

To make decisions, we need to look at our main concerns and examine possible solutions.

Every option has advantages as well as drawbacks.

This discussion guide will help you make choices about this question:

How should our community prevent and reduce drinking by children aged 9-15?

•Reach Children with Problems Early

Option One

•Remove Access and Incentives

Option Two

•Help Children through Difficult Times in Development

Option Three



www.nifi.org



Published 2/2010



Alcohol is the drug of choice for America's youth. By age 15, half of the nation's children and adolescents will have had an entire drink. Among 15-year-olds who drink, one study shows that, on average, they binge drink (five drinks or more per session) twice a month.

How many children are drinking that way? According to a federally funded survey conducted by the University of Michigan, 8 percent of 8th graders (13 years old) have binged in the past two weeks, and 18 percent of 10th graders (15 years old) have done so.

Alcohol is easy for children to obtain, whether in the home or from stores. In many communities, drinking by children is a significant problem. In some places, it is hidden from view, in others it becomes better known across the community after an incident that makes the news.

There is an emerging understanding that the negative effects of alcohol on a child's development may be greater than once thought. According to the *Surgeon General's Call to Action to Prevent and Reduce Underage Drinking*, "The

physical consequences of underage alcohol use range from medical problems to death by alcohol poisoning, and alcohol plays a significant role in risky sexual behavior, physical and sexual assaults, various types of injuries, and suicide."

Underage drinking is not just a problem for parents of children who drink. It can have ripple effects throughout the community. Recent studies indicate that drinking at a young age can derail a person's later development, which can harm communities.

There is also evidence that early alcohol use can affect a child's brain development. One study suggests that adolescents who abuse alcohol may remember 10 percent less of what they have learned than those who don't drink.

According to the American Medical Association, young people who drink may "perform worse in school, are more likely to fall behind

economically, and have an increased risk of social problems, depression, suicidal thoughts, and violence."

Alcohol is rapidly absorbed into the bloodstream and affects every organ in the body. Research has demonstrated that early and excessive use of alcohol can have both immediate effects on health, such as unintentional injuries, violence, and risky sexual behavior, as well as long-term effects, such as neurological and cardiovascular problems, alcoholism, cancer, and liver disease.

Since nearly 50 percent of those who start to drink before age 15 will experience immediate and/or long-term effects in their lifetime, preventing childhood drinking is key to improving the health of both adolescents and adults.

≈ Leadership To Keep Children Alcohol Free Foundation, Statement on alcohol and wellness

There are also factors in adolescence that tend to work against making healthy choices. Recent research suggests that the adolescent brain may be “wired” to engage in risky and thrill-seeking behavior.

Furthermore, as children approach adolescence, fitting in with peers, some of whom use alcohol, becomes increasingly important.

People who drink at a young age are also at higher risk for alcoholism down the line.

When significant numbers of people have these problems, it lowers the quality of life for everyone. It can increase crime, lower productivity, and raise health-care costs.

Drinking by children aged 9-15 is a different kind of problem than high school drinking or drinking on college campuses. Few would say that it is good for children

under 15 to drink under any circumstances, yet such drinking is more common than many people realize.

This discussion guide provides three different options for how to respond to the question:

How should our community prevent and reduce drinking by children aged 9-15?

Each option reflects a fundamentally different concern. Each concern suggests actions that we might take to address it, but any action has a downside, or a trade-off.

The options and actions described in this issue guide are not the only ones possible—groups may well come up with many more. In general, most action items will fall into one of the three options, as each is rooted in a specific understanding of what the problem is and why we face it.

By working through each option, we can come to our own individual and collective decisions about what we would support and under what conditions.

Option One: Reach Children with Problems Early

Some children have problems when it comes to alcohol. We need to find these children as early as possible and help them.



When alcoholism or other problems develop in childhood, they can derail development and cause problems in later life. Children who abuse or are dependent on alcohol are also at greater risk for injury, violence, or suicide. This option holds that these are the children whom it is most important to reach and reach effectively.

There is a definite connection between drinking at a young age and later alcohol problems. According to a study by the National Institute on Alcohol Abuse and Alcoholism, 40 percent of adults who say they began drinking before age 14 show signs of alcohol dependency or alcoholism. Just 10 percent of adults who began drinking later (after age 20) show such signs.



At Risk for Alcohol Use

Youth with histories of behavior problems (for example, delinquent activity, impulsive actions, and difficulty controlling responses) are more likely to use alcohol than are other young people. The same is true for youth who have an unusually strong desire for new experiences and sensations, and for those with histories of family conflict and stress, and/or alcohol problems.

~ Source: United States Surgeon General, 2007 Call to Action

Proponents of this option say that the connection between drinking at an early age and future alcoholism suggests that intervention is warranted. Of course, just because there is a statistical connection, does not mean childhood drinking causes alcoholism later in life. Early drinking and alcohol dependence could be caused by underlying personality characteristics, rather than vice versa. There are children who seem inordinately drawn to risk taking.

However, a study by the Washington University

School of Medicine of over 6,000 twins suggests that early drinking may in fact play a role in making alcoholism more likely. Researchers studied twins who began drinking at different ages. “Risk for alcohol dependence symptoms increased with decreasing age at first drink,” according to the researchers. In this study, children who begin drinking before 13 had a significantly higher likelihood of developing alcohol dependence, than their twins who did not begin drinking until later.

Early drinking is a larger red flag than many think. “The traditional thinking is that risk factors for alcohol abuse show up in adolescence,” says Robert A. Zucker in an article in the *San Francisco Examiner*. He is director of the Addiction Research Center at the University of Michigan and has led studies designed to identify children at risk for alcohol and other substance abuse. “But, actually, they can show up earlier—in children 9 or younger, even in preschoolers.”

In addition to the age that young people begin drinking, the amount they drink and the number of children who drink are also worrisome. While adolescents drink less

frequently than adults, when they do drink, they drink more heavily. Youths between the ages of 12 and 20 who consume alcohol drink on average about five drinks per occasion about six times a month. (Adults who drink have on average two to three drinks per occasion about nine times a month.)

Adolescents Drink Less Often but More per Occasion Than Adults



~ Source SAMHSA data from 2005 NSDUH

According to the 2008 National Survey on Drug Use and Health (NSDUH) of the Substance Abuse and Mental Health Administration (SAMHSA), in 2008, approximately 1.4 million children aged 12-15 said they had used alcohol. In this survey, 704,000 children aged 12-15 admitted binge drinking within the past 30 days. To get a sense of the percentages, for 15-year-olds that translates to 15.5 percent who said they had used alcohol in the past month, and 8.6 percent who reported binge drinking.

What's more, youths who use alcohol are not receiving treatment. According to SAMHSA, "In 2008, there were 1.2 million youths (5 percent) aged 12-17 who needed treatment for an alcohol use problem. Of this group, only 77,000 received treatment at a specialty facility (0.3 percent of all youths and 6.2 percent of youths who needed treatment), leaving almost 1.2 million youths who needed but did not receive treatment."

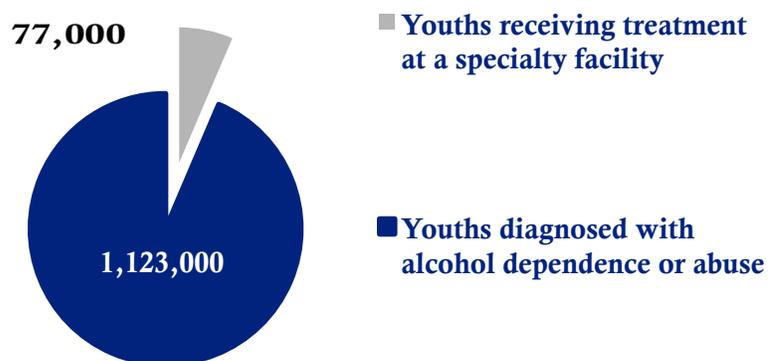
Not only is treatment needed, but it must be the appropriate treatment. What works for adults does not necessarily work for children. For instance, according to the initiative Ensuring Solutions to Alcohol Problems, a project of the George Washington University Medical Center, "The gains young people make during treatment may be undercut when they

return to an unhealthy atmosphere at home, in their neighborhoods, or at school. They do not always have access to age-appropriate support groups. This explains why they have higher relapse rates than adults and typically require three or four treatment episodes before achieving recovery." One way to address this would be to provide recovery support services in schools.

The National Academy of Sciences agrees in its comprehensive report, *Reducing Underage Drinking: A Collective Responsibility*:

Most [treatment] programs in use were originally designed for adults . . . and it is rare to find standalone programs for adolescents....Treatment is more effective if it is fully integrated into all aspects of an adolescent's life—school, home, family, peer group, and workplace....For example, with adolescents it is usually important for the treatment to involve the school.

Unmet Needs for Treatment Among Children



~ Source: SAMHSA 2008

What We Could Do

When it comes to childhood drinking, say people who agree with this option, we must make sure children do not develop alcoholism or experience other consequences of alcohol use, such as injury or suicide. That means intervening when necessary and making sure appropriate treatment is available. Here are some things this option suggests we could do, along with some of the drawbacks:

Train school workers and health-care professionals to identify children who need intervention or treatment for alcohol problems. Schools and doctor's offices are on the front lines when it comes to seeing behaviors and signs that indicate problems.

- ◆ ***But***, if we do this, then families will need to tolerate what they may see as interference in a private matter. Parents may not agree with professionals that their children need help. After all, they may have drunk as children.

Make sure there are places for families to turn if they discover their children or others are drinking. Many families are unsure what to do or how to respond to such a crisis.

- ◆ ***But***, this assumes that families will step forward and seek help. Alcohol is a sensitive issue and to ask families to risk exposure may be too much.

Increase the availability of treatment programs and recovery support services specifically designed for young people. Research shows that treatment programs designed for adults do not work as well when applied to adolescents.

- ◆ ***But***, if we do this we will divert resources away from the majority of children and focus them on a much smaller handful. Fewer than 5 percent of children aged 12-17 were found to have alcohol use problems in 2008.

These and other suggestions are shown in the table on pages 14-15.



Option Two: Remove Access and Incentives

If we are going to make it so our children don't drink, we will need to change the community. This includes not only making it harder to access alcohol, but also stronger enforcement of the laws and the establishment of new community norms.



According to Columbia University's Center on Addiction and Substance Abuse, almost 20 percent of the alcohol consumed in the United States is drunk by people who are under 21, accounting for more than \$20 billion of the \$116 billion industry. Yet, in every part of the United States, the minimum age to purchase alcohol is 21.

Option Two holds that this is emblematic of the overall problem: *the current environment makes it almost impossible to make a dent in childhood drinking.* Children are bombarded with messages implying that drinking is fun, consequences are few, and those who drink are popular. These messages arrive in an environment in which there is often little supervision and it is easy to obtain alcohol, with little

enforcement of rules against purchasing or furnishing it.

It is little wonder, say people who agree with this option, that we've got a problem. They believe, fundamentally, that we need to change this, in much the same way attitudes and rules about tobacco use have changed in society. Indeed, the most recent Monitoring the Future (2009) study by the University of Michigan found that 8th graders say it is easier to obtain alcohol than it is for them to obtain cigarettes, even though the drinking age in every state is 21, while one only needs to be 18 to smoke legally.

One way to reduce access is to enforce the existing laws better, especially those having to do with selling alcohol to youth. Studies suggest that better enforcement of the laws could reduce childhood drinking by 40 percent. But, according to the National Academy of Sciences' *Reducing Underage Drinking: A Collective Responsibility* report, "Purchase surveys in the United States show that anywhere from 40 percent to 90 percent of outlets sell to underage buyers, depending on location."

"The rates of drinking among youth are quite high," write Thomas L. Hafemeister and Shelly L. Jackson of the National Sciences Academy. "However, existing research suggests that rates of enforcement of underage drinking laws are quite low."

Against this backdrop, "research has shown that one of the most promising ways to reduce risky alcohol use, whether it involves adults or minors, is to control access," Traci L. Toomey, a professor of public health at the University of Minnesota says. "Simply put, the easier it is to get alcohol, the more likely it will be used or abused."

Enforcing the laws against purchasing alcohol by underage people would appear to be a natural and logical response. But according to the National Academy of Sciences, "youth access restrictions to alcohol . . .



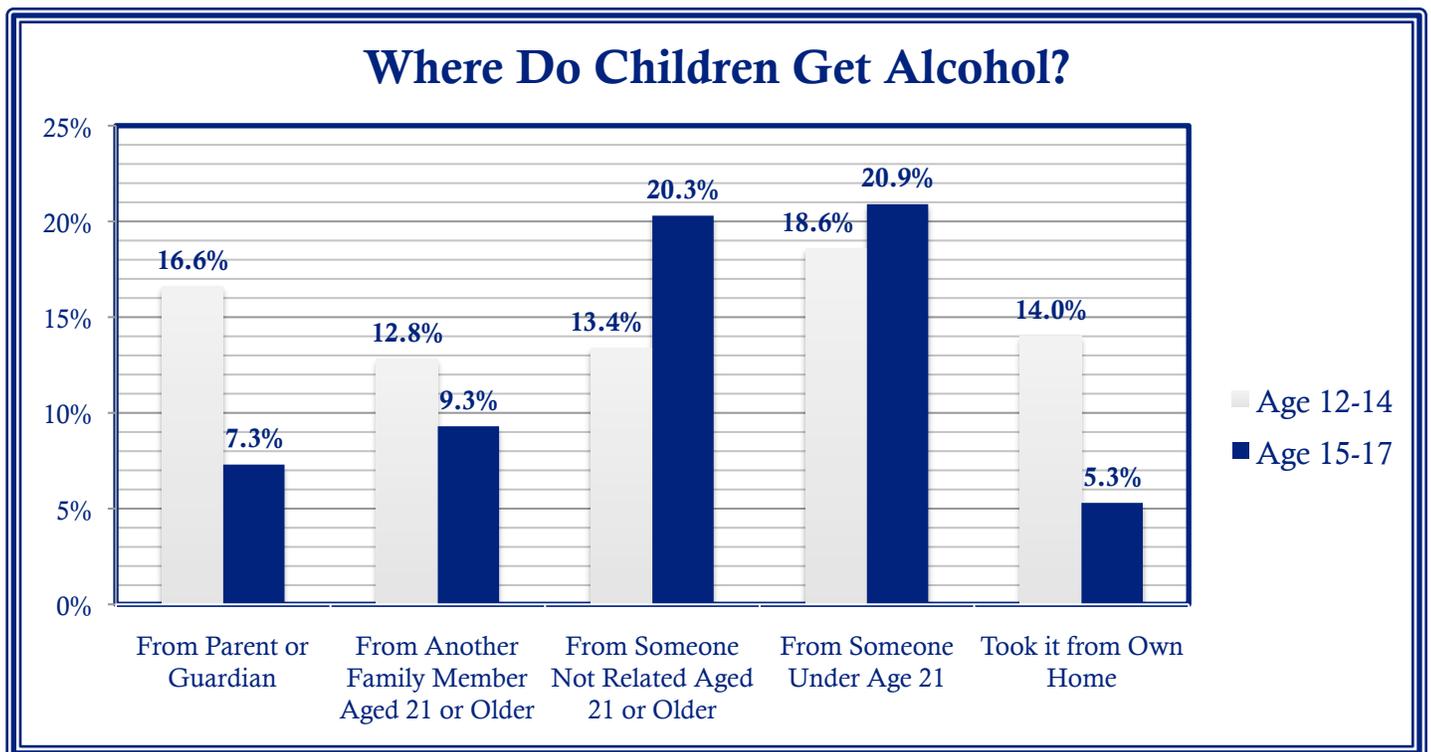
are easily evaded because alcohol is so widely available through so many channels and because the adult world is ambivalent about how forcefully they should be enforced.”

According to the Centers for Disease Control, among high schoolers who drink, just over 5 percent regularly obtain it from a store. This implies that, while enforcement of sales laws is important, other avenues must be pursued as well. According to Joseph Califano Jr., president of the National Center on Addiction and Substance Abuse, “Home—a child’s or a child’s friend’s—is a major source of alcohol for children, especially for younger children.”

This second option would beef up enforcement not just of rules against selling to minors, but also of adults allowing alcohol use by minors in the home (even if they are unaware).

This is an area that is not “cut and dried.” The laws about furnishing alcohol in the home are different in every state. In some states it is acceptable to provide one’s own child with alcohol, while in other states that is against the law. (It is not permitted in any state to furnish alcohol to *other* minors in one’s home.) Furthermore, there are no laws that require alcohol to be secured so that children do not sneak it.

And the percentage of children who get alcohol for free is overwhelming. According to research by SAMHSA, 92.5 percent of 12-14 year olds and 76.5 percent of 15-17 year olds get their alcohol for free. “Underage drinkers are able to purchase or obtain alcohol from relatives and friends at an unacceptably high rate,” according to the researchers.



~ Source: SAMHSA 2008

Proponents of this option say that the laws ought to be consistent from state to state, beefed up, and properly enforced. This would mean that adults who allow parties in their home where children drink alcohol would be punished. This option would also make adults in whose homes parties occur legally liable for anything that happens there, even if they are not present and don't know about it.

Proponents of this option also point to another aspect of access. They say that one big issue when it comes to alcohol and youth is the prevalence of alcohol promotion throughout the media. One study by the Center for Alcohol Marketing and Youth found that alcohol advertising by beverage companies on shows aimed at youth has risen by 38 percent from 2001 to 2007.

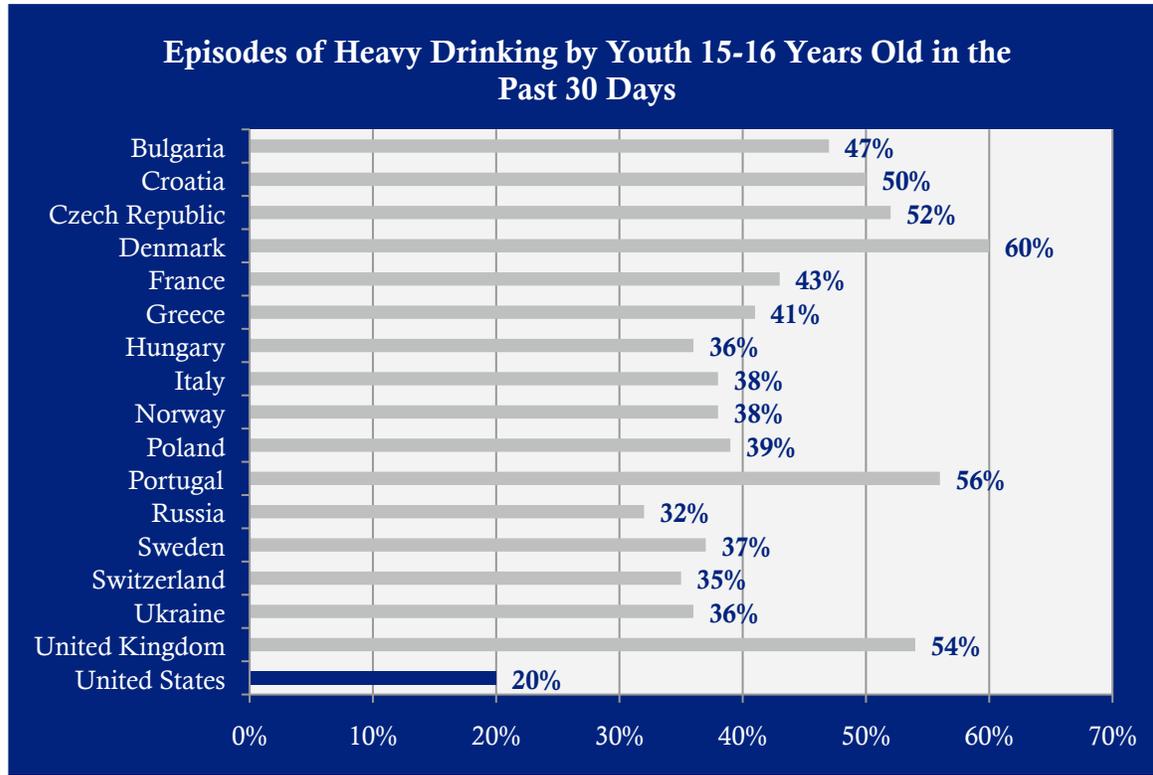
Alcohol also plays a large role in online media and social networks, where many children spend much of their time. The Marin Institute, for example, studied alcohol promotion by the beverage industry on Facebook and found youth were easily able to access pages about drinking, become members of groups with names such as “Alcohol!” and play social games, such as “Shots,” where virtual drinks are traded between friends. “[Researchers found] 93 pages with more than 1.1 million fans for the top-selling beer brands, 2,200 events for the top five beer brands and another 2,200 for the top liquor brands, and 58,000 groups related to the search term ‘alcohol,’” according to a review of the study. All of these were found to be easily accessible by children.

Some people raise the argument that, in countries that have more tolerant views of alcohol use by young people, there is less dependence on alcohol by adults. For instance, “when children are served alcohol by their parents, drinking problems are generally low,” writes State University of New York sociology professor David J. Hanson. “When children are prevented from drinking until an older age, drinking problems tend to be high.”

However, research disputes this. “Research clearly shows,” according to the National Academy of Science, “that most European countries not only have higher levels of consumption (an expected consequence of the lower drinking age), but also higher levels of problematic drinking (e.g., intoxication) among youth.”

In fact, the most recent data shows the United States well below the average of other European nations when it comes to the percentage of 15- and 16-year-olds who had been drinking heavily in the past 30 days.





~ Source: European School Survey Project on Alcohol and Drugs (ESSPAD), 2007;
U.S. Monitoring the Future Survey, 2007.

What We Could Do

Children live in a world in which alcohol is too readily available and too intrinsic a part of the media. And, the rules that exist do not get enforced. We must shift the environment so each of these trends is reversed.

Here are some things that this option suggests we could do, along with some of the drawbacks:

Increase enforcement of existing laws against underage drinking, and change regulations to close loopholes. Children say it is easier to get alcohol than cigarettes and studies show up to 90 percent of liquor stores will sell to underage youth. Many children drink at parties hosted by friends where the parents are turning a blind eye or condoning the activity.

- ◆ ***But***, increased enforcement will bring with it increased punishment. More youth will get in trouble. Some adults will face consequences too (such as fines or lawsuits), if they are hosting parties where children are allowed to drink. Punishment can lead to a police record. Communities may see this as overkill, and some community members will be turned against one another.

Create a culture that does not condone childhood drinking by protesting media portrayals, cracking down on alcohol advertising aimed at children. Alcohol use is pervasive in the media environment. The change required is similar to the difference in portrayals of tobacco use over the past few decades.

- ◆ ***But***, limitations on advertising will create freedom of speech questions, and fighting something as vague as "the media" is not something that can be accomplished in the short term. Groups pushing for these changes may be seen as sanctimonious or preachy, and this could undermine any effectiveness they may have.

Create more programs to fill children's time so they do not get into trouble. Statistics show that the idle time immediately after school is a time when many children engage in risky behaviors, including alcohol use. Taking away the opportunity will, for many children, reduce the likelihood that they will drink.

- ◆ ***But***, children already lead very scheduled lives. Their days are programmed in ways that their parents' never were. This would add yet more activities and increase stress.

Protective Factors for Alcohol and Other Drug Abuse

- ◆ Involvement in school
- ◆ An environment that helps children explore their talents and follow their passions, whether academic, musical, sports, or social or community causes
- ◆ Opportunities for validation and belonging
- ◆ Having a mentor, a valued teacher, or other caring adult
- ◆ Multiple venues where adolescents can get together with their friends

≈ Source: United States Surgeon General

These and other suggestions are shown in the table on pages 14-15.

Option Three: Help Children through a Difficult Time in Development

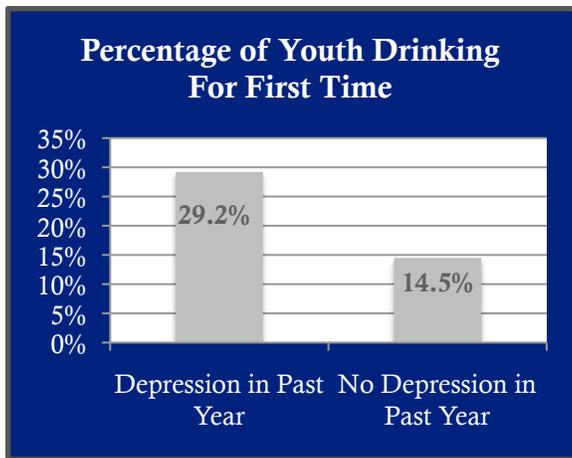
We need to help children through the difficult elementary and middle school years so they do not get derailed.



This option recognizes that children grow up with alcohol all around them. Later elementary and middle school can be difficult years for children. It is a time when experimentation on a number of fronts is natural. Children need support to make it through this period in a healthy way. Rather than focusing on children who show signs of trouble, this option would equip all children with the skills, attitudes, and habits they need for healthy development.

The best response, say people who agree with this option, is to equip children with the skills to navigate these difficult years without turning to alcohol. This involves helping young people withstand peer pressure, giving them healthy options for recreation, and making sure that they are connected to at least one adult in school (for instance, a teacher, counselor, or coach). It is a responsibility of the community to provide these things.

Just as important, according to this option, is to strengthen the family and community. There are a handful of approaches that have been shown to work. For instance, in schools, research suggests that



~ Source: SAMHSA, 2008

it is helpful for there to be at least one adult who knows and can relate to each child well. Ben Sillman at the University of Wyoming's Cooperative Extension Service reports: "One caring adult can make a difference in a child's resiliency."

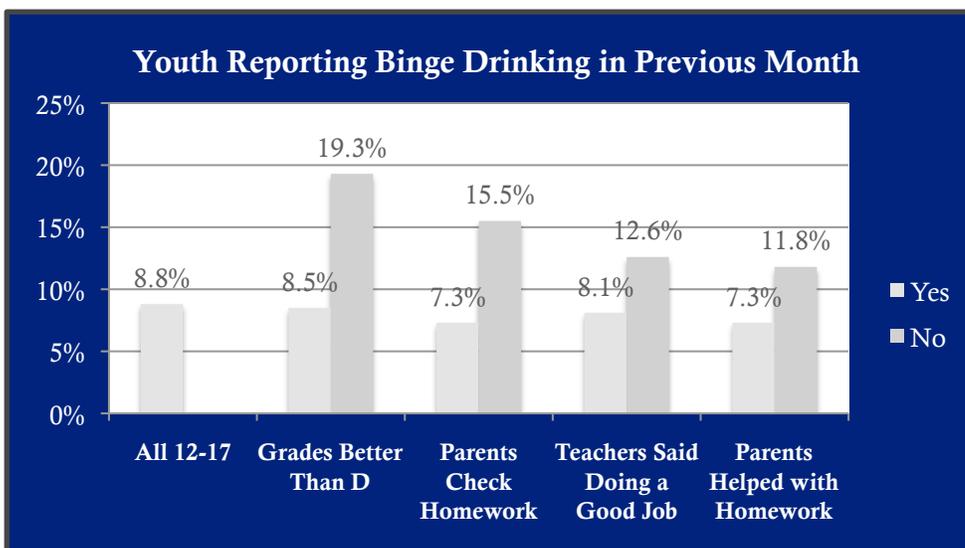
Childhood drinking does not occur in a vacuum. Children face many issues as they develop. Some of these can contribute to alcohol use. For example, a study of recent alcohol and drug use statistics by SAMHSA reveals that, among 12-17 year olds, youth who had experienced depression were twice

as likely to have begun drinking too. But helping children with mental illness and other conditions is just one piece of the puzzle. This option would seek to give *all* children the tools and resiliency they need to avoid drinking alcohol.

Part of this involves countering behaviors and characteristics that are known to be risk factors. According to Maria R. de Guzman and Kathy R. Bosch at the University of Nebraska:

Youth who have low self-esteem, who have negative peer groups, and low school engagement or educational aspirations are more likely to engage in risky behaviors. . . . [Youth where there is a] negative school climate, poor neighborhood quality and low socioeconomic status, and poor (or no) relationships with non-parental adults also are at more risk for negative behaviors.

However, another way to approach childhood drinking is to seek what psychologists call "protective factors," which can help with a child's development and resiliency. (See page 11 for a list of protective factors.) Among children aged 12-17, 8.8 percent reported binge drinking in the previous month, according to SAMHSA's annual survey on drug and alcohol use.



~ Source: SAMHSA, 2008

Compare that with other factors. Only 7.3 percent of children whose parents checked their homework, or helped with it, said they had engaged in binge drinking. Having a teacher who said that the child was doing a good job in school also is associated with a lower likelihood of drinking (8.1 percent). Beyond school programs, this option also focuses on community and family.

The family unit is where behaviors are learned and reinforced. Many parents are concerned that they provide an environment that will help their child thrive, but many are worried they may not be doing so. Studies have shown that community-based parenting programs can be very beneficial. Several parenting programs have been shown to result in children having lower rates of alcohol use and fewer behavior problems in school.

What We Could Do

Late elementary and middle school is a time fraught with many temptations, dangers, and opportunities. There is no way to take all of the risk out of growing up. Instead, we must equip children with the skills and strength to make good choices so they can develop in healthy ways. Here are some things this option suggests we could do, along with some of the drawbacks:

Help parents do the most effective job they can. Create programs that teach families how to provide the right balance of nurture and discipline.

- ◆ ***But***, some parents will have to change how they fulfill their roles. For parents who drink, such programs can be very uncomfortable and may force them to address their own drinking, even if they are not alcoholics.

Teach children ways to avoid drinking and engage in healthier activities instead. Many young people say that there is “nothing else to do” but drink. We can provide them with alternatives and spark their imagination to come up with other ideas.

- ◆ ***But***, there are already many programs like this in schools and their effectiveness is questionable. It is possible that few children will respond to such messages from adults and teachers.

Mount communitywide public awareness campaigns about the dangers of childhood drinking. Too many people regard childhood drinking as an aberration that can't happen here. Yet it is taking place all around, and combating it will take change across the community.

- ◆ ***But***, such campaigns may well fall flat with many adults, who themselves drank when they were younger and feel they turned out OK. These community members may see such campaigns as scare tactics and ignore them.

These and other suggestions are shown in the table on pages 14-15.



Option One: Reach Children With Problems Early

⇒ Childhood drinking can contribute to academic failure, difficulty in employment, and chronic criminal behavior. It can lead to risky sexual behavior, alcoholism, mental health problems, personality changes, injury, and other problems.
 ⇒ We should provide vulnerable children and their families with the support they need in order to recognize and deal with such problems.

Examples of What Might Be Done	Possible Consequences and Trade-offs to Consider
<i>Make sure there are early warning systems and effective intervention options.</i>	<i>Professionals will intrude in families' lives; the issue may get pushed underground.</i>
<ul style="list-style-type: none"> Community groups can provide places for families to turn to if they discover their child or a friend is drinking. 	<ul style="list-style-type: none"> Families will have to risk exposure and ask for help on this uncomfortable issue.
<ul style="list-style-type: none"> Schools can train teachers to identify children who need more support than they are getting at home. 	<ul style="list-style-type: none"> Parents will have to tolerate questions and suspicion from school.
<ul style="list-style-type: none"> Schools can improve remedial academic counseling so children can get back on track. 	<ul style="list-style-type: none"> Students getting specialized help will feel different and stigmatized. This may make their cases even worse.
<ul style="list-style-type: none"> Government can require health-care professionals to screen children and adolescents for alcohol problems and intervene when necessary. 	<ul style="list-style-type: none"> Families will have to tolerate intrusion from health-care workers.
<ul style="list-style-type: none"> Significantly increase availability and appeal of affordable and appropriate alcohol treatment designed for adolescents and their families. 	<ul style="list-style-type: none"> Focusing so much energy on treatment programs will mean that children with less serious problems will not get the same attention even though they may need it.

Option Two: Remove Access and Incentives

⇒ Children live in an environment where drinking is prevalent in too many aspects of daily life. Upbeat media portrayals of drinking; the presence of alcohol at home, sporting, and family social events; lax enforcement of existing rules and laws; and other factors undermine the abilities of parents, families, and communities to keep children from drinking.
 ⇒ We need to create an environment that makes it possible for children to grow up without alcohol.

Examples of What Might Be Done	Possible Consequences and Trade-offs to Consider
<i>Remove opportunities for children to drink, and make alcohol less available and visible.</i>	<i>We will need more control over children's day-to-day activities as well as more restrictions on adults' behavior.</i>
<ul style="list-style-type: none"> Community groups and schools can increase afterschool activities and other events so there are fewer "idle spaces" in children's days. 	<ul style="list-style-type: none"> Children will become even more "scheduled" than they already are.
<ul style="list-style-type: none"> Government can change regulations to make alcohol less easily accessible to children and youth. 	<ul style="list-style-type: none"> This will add to an already burdensome regulatory regime.
<ul style="list-style-type: none"> Police departments can increase funds and manpower devoted to enforcement of underage drinking laws. They can take drinking seriously by enforcing the laws against serving alcohol to children in the home. Community members can openly identify parents who allow parties where children drink. 	<ul style="list-style-type: none"> Increased enforcement means increased punishment of young people, which can change the course of their life for the worse. Parents may also face legal consequences. This may turn some community members against one another and could break up families.
<ul style="list-style-type: none"> Churches and other community groups can protest positive media portrayals of underage drinking and rebellious behavior. 	<ul style="list-style-type: none"> Such protests may make the groups appear sanctimonious and lose relevance in the community.
<ul style="list-style-type: none"> Government can create a law to eliminate advertising of alcohol less easily accessible to children and youth. 	<ul style="list-style-type: none"> Restrictions on advertising can interfere with free speech.
<ul style="list-style-type: none"> Families can make alcohol less accessible in the home by removing or securing it. Communities can implement measures that make access to alcohol more difficult at public events. 	<ul style="list-style-type: none"> This will interfere with access to alcohol for all people, adults as well as children. Some adults will find this to be a burden and will protest.

Option Three: Help Children through Difficult Times in Development	
<p>⇒ Elementary and middle school can be difficult years for children. It is a time when experimentation on a number of fronts is natural. Children need support to make it through this period in a healthy way. Childhood drinking can interfere with health development.</p> <p>⇒ We need to provide resources, support, and information so all children can develop without turning to negative influences.</p>	
Examples of What Might Be Done	Possible Consequences and Trade-offs to Consider
<i>Focus on wellness and healthy development for all children.</i>	<i>Responsibility for parenting children will shift from the family to professionals.</i>
<ul style="list-style-type: none"> Community groups can create workshops to help parents learn to provide the right balance of nurture and discipline, and model good behavior when it comes to alcohol. 	<ul style="list-style-type: none"> Some parents will have to change their parenting styles as well as their approach to their own alcohol use. Parents who would benefit most may not take part.
<ul style="list-style-type: none"> Schools can teach children ways to avoid drinking and make other healthy decisions through substance abuse prevention programs and other ways. 	<ul style="list-style-type: none"> There are many programs and initiatives designed to promote healthy decisions but they cannot reach everyone.
<ul style="list-style-type: none"> Schools can create opportunities in school for every child to feel connected and better known, and have a relationship with at least one adult. 	<ul style="list-style-type: none"> This will further increase the importance of schools and educators in the lives of children. Some parents will resent the feeling of being replaced by school officials. Teachers are already overburdened.
<ul style="list-style-type: none"> Government health services and businesses can create public awareness campaigns about the significant health dangers of childhood drinking. 	<ul style="list-style-type: none"> Many adults drank alcohol when underage, yet turned out OK. They may see such efforts as "scare tactics" that may have the opposite effect at a time when risk taking is attractive.
<ul style="list-style-type: none"> Community groups and churches can create programs that educate adults about how to talk about alcohol with their children. 	<ul style="list-style-type: none"> Many parents will avoid uncomfortable conversations no matter how much education they have about how to hold them. This does nothing for children in dysfunctional families.
<ul style="list-style-type: none"> Community groups can create campaigns that create new social norms and make it clear that childhood drinking is not "normal." 	<ul style="list-style-type: none"> It is difficult for individual groups, or even coalitions, to create changes in society. Such efforts are long-term and expensive.

Use this space to identify some of the things *you* might do in your community.

This discussion guide is a collaborative effort between the Leadership To Keep Children Alcohol Free Foundation and the National Issues Forums.

The Leadership To Keep Children Alcohol Free Foundation, a unique coalition of current and former Governors' spouses, Federal agencies, and public and private organizations, is an initiative to prevent the use of alcohol by children ages 9-15. It is the only national effort that focuses on alcohol use in this age group. It is also the oldest and largest organization of Governors' spouses focused on a single issue. For more information, visit www.alcoholfreechildren.org.

The National Issues Forums is a nonpartisan, nationwide network of locally sponsored forums for consideration of public policy issues. The forums are sponsored by civic, service, and religious organizations, as well as libraries, high schools, and colleges across the nation. For more information on the National Issues Forums, visit www.nifi.org.

The author would like to express appreciation to the Substance Abuse and Mental Health Services Administration and to the National Institute on Alcohol Abuse and Alcoholism for their valuable input in the development and writing of this document.

This work is the result of collaboration with the Charles F. Kettering Foundation. Any interpretations and conclusions are those of the authors and do not necessarily reflect the views of the Charles F. Kettering Foundation, its staff, directors or officers.

In addition, the authors wish to express their appreciation to the Verizon Foundation for their support in the printing and distribution of this discussion guide.

Writer: Brad Rourke, The Mannakee Circle Group
Co-Editors: Hope Taft, Leadership To Keep Children Alcohol Free Foundation
Alice Diebel, The Charles F. Kettering Foundation
Copy Editor: Lisa Boone-Berry, The Charles F. Kettering Foundation
Researchers: Lori Miller, The Mannakee Circle Group
Bonnie Hedrick, Leadership To Keep Children Alcohol Free Foundation

For more information related to continuing the conversation on childhood drinking, go to:

www.alcoholfreechildren.org



Published: 2/2010