

## INTRODUCTION

nderage drinking is a significant public health issue, with serious health and economic consequences for individuals and communities. In 2011, 9.7 million beople ages 12 to 20 reported past-month drinking.<sup>1</sup> The consequences of underage drinking include premature death and injury, sexual risk taking, poor academic performance, and substance abuse later in life.<sup>2</sup> To address this important issue, SAMHSA funds UADPEI to strengthen community capacity to prevent and reduce underage drinking. Every 2 years since 2006, SAMHSA—through UADPEI has sponsored Town Hall Meetings on underage drinking prevention. SAMHSA encourages community-based organizations (CBOs) nationwide to use these events to move their communities from being aware of the issue to taking evidence-based actions to prevent it.

To assess the effectiveness of Town Hall Meetings in changing underage drinking patterns in local communities, SAMHSA uses a multifaceted evaluation process, including a pair of Office of Management and Budget–approved surveys (Organizer Survey and Participant Form). Although some organizations received a \$500 stipend to defer the costs of planning and holding their event, no compensation or extra services were offered for the completion of the surveys. The Organizer Survey and Participant Form provide SAMHSA with valuable insights that will help shape future nationwide activities.

## **2012 TOWN HALL MEETING BACKGROUND**

During 2012:

- 1,398 CBOs held 1,564 events;
- Events were held in all 50 states, the District of Columbia, and 6 U.S. territories;
- 52 percent of events took place during April, which is Alcohol Awareness Month; and
- 1,263 planning stipends were distributed.

## **ORGANIZER SURVEY**

SAMHSA asked all participating CBOs to complete an Organizer Survey. The online survey contained 29 multiple-choice questions and 3 open-ended questions addressing event details, such as planning and promotion, participants, topics discussed, major actions planned, and overall satisfaction. A total of 990 (or 71 percent) of CBOs responded, representing all 50 states, the District of Columbia, and 3 U.S. territories (i.e., Guam, Puerto Rico, and the U.S. Virgin Islands).

Analysis of response frequency for each question was performed using IBM SPSS software. Hypotheses were established and then tested using regression models to measure associations between variables. The data were analyzed using STATA 12.1 software. The listing unit was a Town Hall Meeting organizer, registered on a central website for all Town Hall Meeting-related activities. The number of attendees was examined as a continuous variable. Actions to decrease youth access to alcohol included implementing social host ordinances, creating underage drinking prevention groups, starting a youth-led coalition, and developing strategic plans to reduce and prevent underage drinking; these actions were identified separately from other resulting actions. Town Hall Meeting promotion through technology included promotion through websites, e-mail, and social media.

# **PARTICIPANT FORM**

A random sample of 400 CBOs that registered as Town Hall Meeting organizers in 2012 was selected to solicit input from persons attending their event through a paper-based Participant Form. Of the 400 selected CBOs, 352 were eligible to participate in the assessment. Of these, 208 CBOs (59.1 percent) returned 5,281 forms.

The Participant Form solicited information on participant demographics, underage drinking issues facing the community, participant knowledge, and future involvement with underage drinking prevention efforts. Analysis of response frequency for each question was performed using IBM SPSS software. Hypotheses were established and then tested using regression models to measure associations between variables. The data were analyzed using STATA 12.1 software. The listing unit was a Town Hall Meeting participant. Actions to decrease youth access to alcohol were identified separately from other resulting actions.

Substance Abuse and Mental Health Services Administration. (2004). The NSDUH Report: Underage drinking in rural areas. Research Triangle Park, NC: Substance Abuse and Mental Health Services Administration.

# Getting to Outcomes: 2012 Town Hall Meetings on Underage Drinking

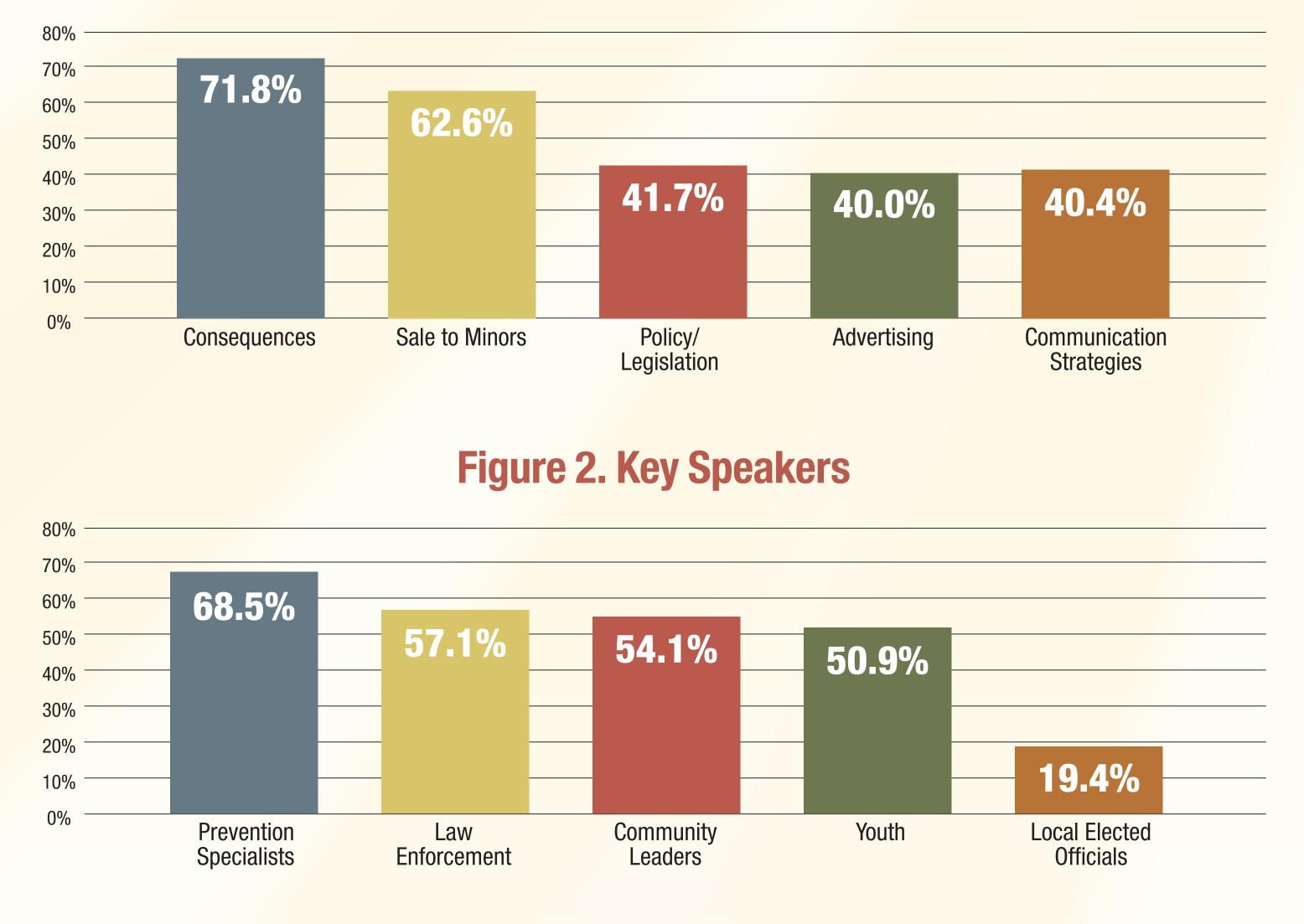
Tracy Farmer, M.B.A., U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Substance Abuse Prevention Matthew W. Walker, Dr.P.H., Deputy Project Director, SAMHSA Underage Drinking Prevention Education Initiatives (UADPEI)

## **ORGANIZER SURVEY FINDINGS**

Of the 990 community-based organizations (CBOs) that responded:

- 94 percent reported collaboration with other organizations in coordinating their event;
- **76 percent** reported that **youth were involved** in organizing and/or planning their event;
- 51 percent characterized the location of their Town Hall Meeting as rural, with 45 percent reporting an urban or suburban location; and
- 85 percent reported use of social networking sites, such as Facebook and Twitter, to promote their event.

## Figure 1. Primary Underage Age Drinking–Related Topic Discussed at Events



## Figure 3. Followup Planned as a Result of a Town Hall Meeting

70.00/				
/0.3%	<b>60 50/</b>			
	00.3%			
		12 20/		
		42.0/0	32 9%	
				18.4%
Collaborate with Other Organization		Develop a Strategic Plan	Apply for Prevention Funding	Implement a Social Host Ordinance
		Collaborate with	60.5%   42.8%   Collaborate with   Plan Develop a	Collaborate with Plan     60.5%   42.8%   32.9%     Collaborate with     Plan   Develop a   Apply for

Additionally, SAMHSA investigated the following research questions:

- 1. Which meeting characteristics are associated with higher attendance?
- 2. Which meeting characteristics are associated with actions to decrease youth access to alcohol?

#### Table 1. Results of Analysis – Organizer Survey

Variable	Attendance			Actions To Reduce Access					
	t	р	Coef. (95%CI)	t	р	Coef. (95%CI)			
Collaborative	2.07	.038	.003 (.00002, .0006)	09	.925	021 (467, .424)			
Participating Speakers									
Law Enforcement	2.35	.019	.0007 (.0001, .001)	2.14 .033		.246 (.020, .472)			
Policymakers	2.17	.031	.006 (.0005, .011)	3.4 .001 .045 (		.045 (.019, .070)			
Meeting Location									
Rural	0.05	.956	.0002 (007, .007)	1.78 .075 .168 (-		.168 (017, .353)			
Urban	-0.71	.48	001 (004, .002)	001 (004, .002) .92 .358		.043(049,.136)			
Promotional Materials Used									
Print Materials	1.66	.097	.291 (052, .634)	4.78 <.001 .028 (.01		.028 (.017, .039)			
Personal Communication	1.9	.058	2.83 (091, 5.76)	3.78	<.001	.191 (.092, .289)			
Technology	1.5	.134	.492 (153, 1.14)	4.64	<.001	.051 (.029, .073)			

Significant findings highlighted in color

Meetings with the following characteristics were statistically related to higher attendance:

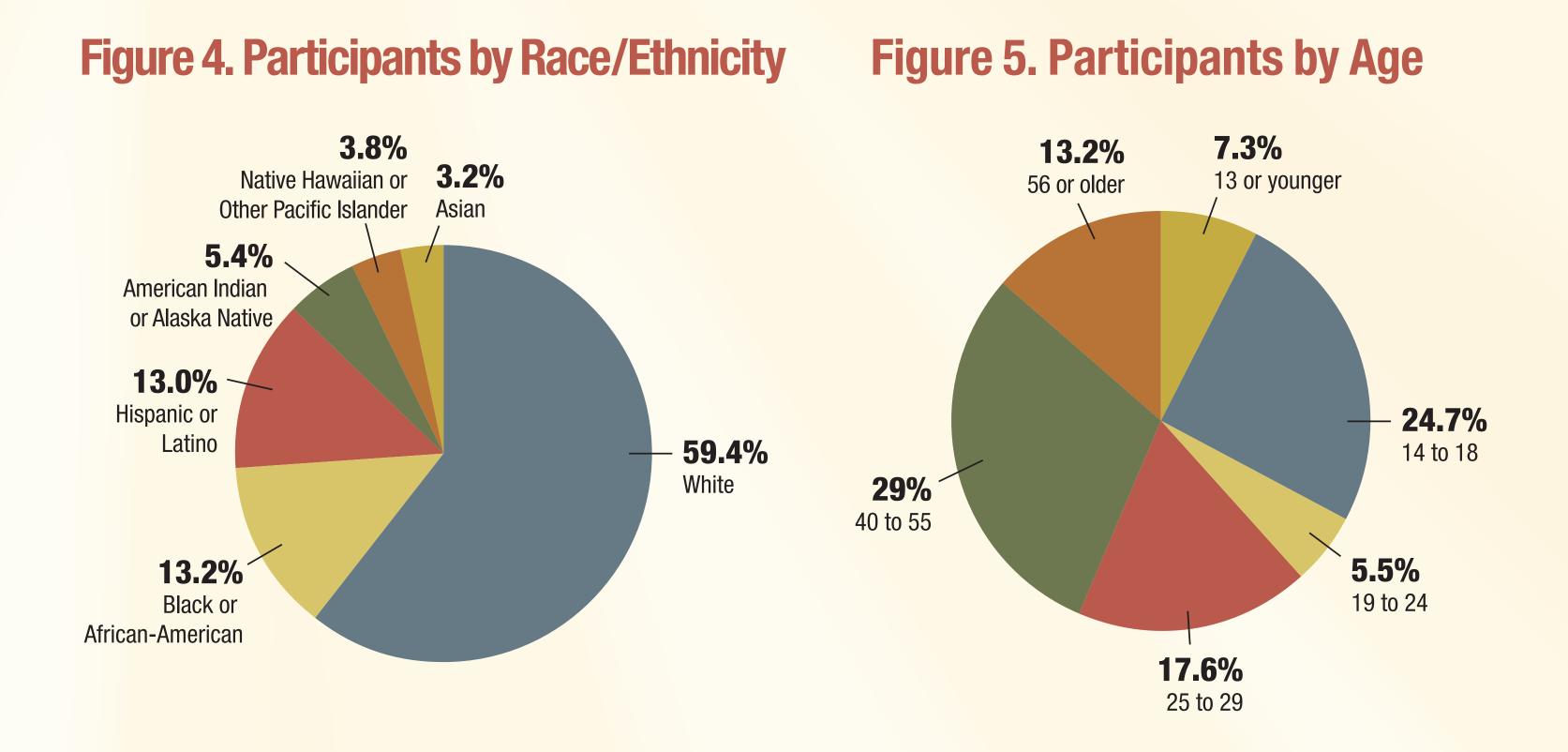
- Planned collaboratively; and
- Incorporated law enforcement officials/elected officials as speakers.

Meetings with the following characteristics were statistically related to the planning of actions for reduced access:

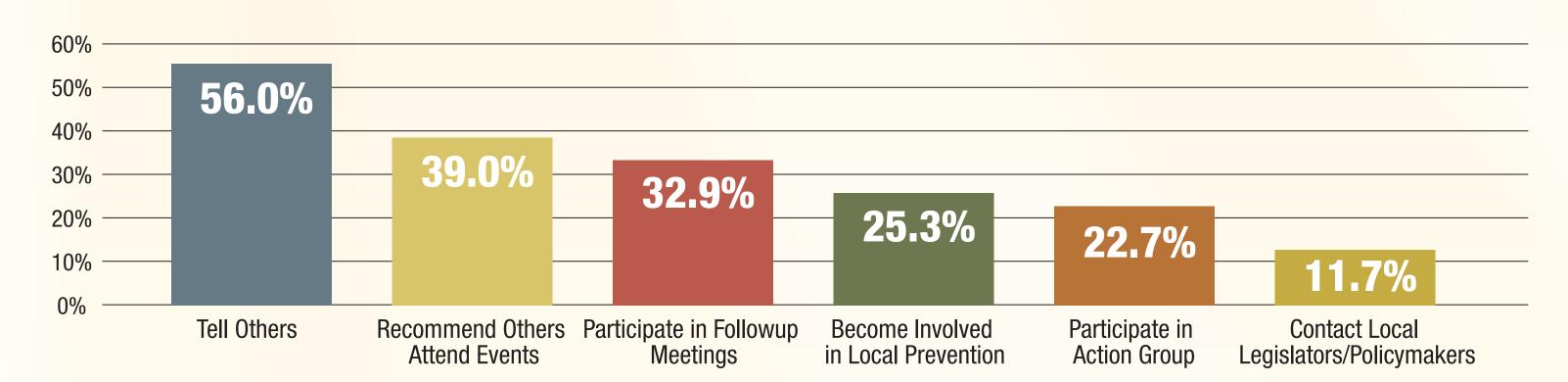
- Used print materials, personal communication, or technology to promote the event; and
- Incorporated law enforcement officials, policymakers, or elected officials as speakers.

# **PARTICIPANT FORM FINDINGS**

- 66 percent of participants reported that the event addressed the most important underage drinking issue(s) facing their community "a great deal." 27 percent responded to the same inquiry with "somewhat."
- 82 percent of participants said that they acquired new information about underage drinking and its consequences from the event they attended.
- 90 percent indicated that they planned to share materials or lessons learned.



#### **Figure 6. Planned Response to Town Hall Meeting Participation**



Additionally, SAMHSA investigated the following research questions, based on participant demographics:

1. Which participant characteristics are associated with having learned specific ways to prevent underage drinking?

2. Which participant characteristics are associated with planning to share information?

3. Which participant characteristics are associated with planning actions to decrease access?

## Table 2. Results of Analysis – Participant Survey

Variable	Learning			Plans To Share			Action Plan (grouped)		
	t	р	Coef. (95%CI)	t	р	Coef. (95%CI)	t	р	Coef. (95%CI)
Gender									
Female	10.9	<.001	.159 (.131, .189)	27.9	<.001	.284 (.264, .303)	5.33	<.001	.003 (.002, .004)
Age (ref 40–55 years)									
$\leq$ 13 years	67	.5	031 (.122, .059)	1.89	.059	.068 (.002,.139)	1.35	.177	.002 (009, .005)
14 to 18 years	-2.39	.017	080 (146,014)	2.76	.006	.071 (.021, .121)	.56	.572	.0006 (001, .003)
19 to 24 years	47	.636	080 (123, .075)	.23	.815	.011 (.083, .105)	3.20	.001	.006 (.002, .010)
25 to 39 years	105	.133	053 (121, .016)	1.58	.115	.046 (.011, .103)	.17	.861	.0002 (002, .002)
≥ 56 years	1.46	.144	.044 (015, .103)	3.68	<.001	.103 (.048, .158)	84	.401	.001 (003, .001)

Significant findings highlighted in color

Participants with the following characteristics were more likely to have learned specific ways to prevent underage drinking: • Female participants; and

Persons between the ages of 14 and 18 years.

Participants with the following characteristics were more likely to plan to share information about underage drinking: • Female participants;

- Persons ages 18 years or younger; and
- Persons ages 56 years or older.

Participants with the following characteristics were more likely to take actions to decrease access:

- Female participants; and
- Persons between the ages of 19 and 39 years.

# **APPLICATION OF FINDINGS**

#### **Event Promotion**

**Traditional promotional materials**, including printed materials and personal communication, continue to be highly utilized tools for recruiting Town Hall Meeting audiences, and meetings with these forms of promotion were more likely to result in actions that reduce youth access to alcohol (Table 1). Meeting organizers also frequently adopted **technology** to promote events including social media. These findings validate the development of customizable print materials made available at registration, and encourage the development of low-cost and downloadable promotional materials, even as other Internet-based technologies are being harnessed.

#### **Event Characteristics**

Responses as to what resulting actions were planned (Figures 3 and 6) indicate support for SAMHSA's intention to move the initiative to more action-oriented events. More than one quarter of participants reported their intention to become involved in local prevention activities, and 11.7 percent of participants reported their intention to contact their local legislators/ policymakers as a result of the event. Among organizers, 18.4 percent reported the specific intent to implement a social host ordinance. In addition, other findings support the importance of the initiative in awareness raising, with the overwhelming majority of participants reporting increased knowledge and an intention to share materials or lessons learned.

Town Hall Meetings that included elected officials and law enforcement officials attracted higher attendance and were more likely to result in actions that reduced youth access to alcohol. SAMHSA will support this trend by offering organizers resources that present policies and law enforcement efforts that have been shown to reduce underage drinking, and it will stress the value of including local decisionmakers and law enforcement officials in events.

Findings also confirmed the longstanding belief that **collaboration** is key to local action, with collaboratively hosted Town Hall Meetings resulting in higher attendance overall (Table 1). SAMHSA will continue to encourage collaborative events by showcasing examples of effective partnerships and developing information tailored to typical partner interests, e.g., how local alcohol retailers can support underage drinking prevention.

When characterized by **location**, almost three fourths of all meetings (73 percent) were held in nonurban areas (rural, suburban, or reservation). Research has demonstrated a high level of need for intervention in these areas, indicated by elevated levels of binge alcohol use among youth ages 12 to 17,<sup>1</sup> lower levels of perceived risk, less disapproval of alcohol use, and less perceived parental disapproval reported in nonurban areas.<sup>3</sup>

#### Audience

Youth were heavily involved in the initiative as organizers, planners, and speakers (Figure 5). Future initiatives will tailor resources for this population, including an expanded use of social media. Events were also shown to be particularly effective in educating young people, ages 14 to 18, about the risks of underage drinking (Table 2). Presenting organizers with published research about this age group can help them to realize maximum prevention benefits from their events. Facilitating youth ownership of underage drinking prevention appears likely to accelerate progress in reducing the prevalence of adolescent alcohol use.

The reported willingness of persons between the ages of 19 and 39 years to contact local legislators or advocate for enhanced enforcement of underage drinking laws as a result of an event underscores the significance of this issue among parentingage adults. SAMHSA will help organizers recognize and tap into this potential force for policy change at the local level.

Survey findings indicate that, in 2012, diverse populations adopted Town Hall Meetings as a way to strengthen and promote underage drinking prevention at the community level (Figures 4 and 5). This year, 8 percent of meetings were held in Spanish and 2 percent in a language other than English or Spanish. Development of additional Spanish-language Town Hall Meeting resources, and the promotion of Town Hall Meetings as a national grassroots initiative, may increase participation by non-English-speaking stakeholders. More than half of responding participants reported their race as White, with Black or African-American being the next largest racial/ethnic group, followed by Hispanic or Latino. According to SAMHSA's National Survey on Drug Use and Health, in 2011 the highest rates of past-month alcohol use and binge drinking were reported among White youth. Findings from our study indicated that although there was a statistical association with race of participant and certain event outcomes, there was not a clear indication that any one particular race had a higher magnitude of association than others.

**Women** played a disproportionately large role in the initiative, having outnumbered male participants by more than 2 to 1. The high level of female involvement, along with an increased likelihood for females to convey information and take action toward further prevention objectives (Table 2), indicates that the creation of materials that provide targeted information and resources for women, and encourage female participation, may enhance outcomes. Conversely, this finding suggests a need for new strategies to increase male participation in Town Hall Meetings and in underage drinking prevention efforts at the community level.

## **FOR MORE INFORMATION**



Help prevent underage drinking. Scan the QR code, visit the Town Hall Meeting site, and get involved. www.stopalcoholabuse.gov/townhallmeetings/



Scan the QR code to learn more about underage drinking and its prevention.
 www.stopalcoholabuse.gov/





Substance Abuse and Mental Health Services Administration. (2012). Results from the 2011 National Survey on Drug Use and Health: Summary of national findings. (NSDUH Series H-44, HHS Publications No, SMA 12-4713), Rockville, MD: Substance Abuse and Mental Health Services Administration,

<sup>2</sup> U.S. Department of Health and Human Services. (2007). *The Surgeon General's Call to Action To Prevent and Reduce Underage Drinking.* Department of Health and Human Services, Office of the Surgeon General. From http://www.surgeongeneral.gov/topics/underagedrinking/index.html (accessed September 14, 2012).