



**STATE OF HAWAII
DEPARTMENT OF HEALTH
KA 'OIHANA OLAKINO
ALCOHOL AND DRUG ABUSE DIVISION
KAKUHIHEWA BUILDING
601 Kamokila Boulevard, Room 360
Kapolei, Hawaii 96707
PH: (808) 692-7506
FAX: (808) 692-7521**

In reply, please refer to:
File: DOH/ADAD

**Provider Meeting
March 3, 2023, at 9:00 am
Department of Health
Alcohol and Drug Abuse Division**

AGENDA:

1. Presentations

- Alcohol, Tobacco, and Cannabis Use in Hawaii: An exploration based on BRFSS 2020-2021 data - *Presented by: Michael M. Phillips, PhD, Associate Specialist, Office of Public Health, University of Hawaii*
- Prevention Programs –
Presented by: Child Family Services (CFS)

2. Division Announcements

- Quality Assurance Improvement Office (QAIO)
 - ❖ *Funding Opportunity from the National Institute on Drug Abuse (NIH): Substance use Prevention Services in Primary Care Challenge.*
<https://www.challenge.gov/?challenge=substance-use-prevention-services-in-primary-care-challenge>
 - ❖ *Prevention of the Year Due date for applicants: March 19, 2023.*
Form Link: [Prevention Pro of Year Notice Form](#)
 - ❖ *New Prevention Test will start March 1, 2023.*
- Prevention Branch
 - ❖ *Billing*
- Fiscal
 - ❖ *FFATA FSRS*
- Treatment and Recovery Branch (TRB)
 - ❖ *Quarterly and Annual Reports/General Inquiries: Send to doh.adad.treatment@doh.hawaii.gov*

3. Provider Announcements

- Aloha United Way (AUW)
 - ❖ *Hawaii CARES Updates*

- The Māpuna Lab
 - ❖ *Native Hawaiian Cultural Intervention Training: The Kanilehua Framework*
<http://go.hawaii.edu/Gm2>

4. Other

- ❖ Provider Meeting for April 7, 2023 has been cancelled due to Good Friday holiday.

Next Meeting: Friday, May 5, 2023

Alcohol, Tobacco, and Cannabis Use in Hawai'i: An exploration of co- and poly- substance use based on BRFSS 2020-2021

UH SEOW Team

Michael M. Phillips, PhD

Mika Thompson, MSc

Laura Johnston, MA

John Massey, MPH, MSN, ~~BC~~, RN

ADAD Monthly Provider Meeting
March 3, 2023



UNIVERSITY of HAWAII at MANOA
THOMPSON SCHOOL
SOCIAL WORK & PUBLIC HEALTH

OVERVIEW

Introduction

- Alcohol, Tobacco/Nicotine, and Cannabis
- Co- and Polysubstance use

Co- and Poly -Substance Use

- Factors
- Risks and Harms

2020 -2021 Prevalence

- For PolyUse, Co-use, and Singular use
 - Across age spectrum
 - Young adult subpopulation
- Co-use combinations


Exploratory Predictive Models

- With young adults subpopulation
 - For pairwise co-use across substances
 - Mental wellbeing and Depression



SCOPE

- Focus on tobacco/nicotine, alcohol, and cannabis
 - Three most frequently used substances
 - 2020-2021 Behavioral Risk Factors Surveillance Survey (BRFSS)



Co- and Poly -substance use

Timeframe

What about time?

Using two or more substances within a designated time frame

- For example, past 30 day

Is there overlap?

- same day, same hour

Concurrent vs. simultaneous use

(Earleywine & Newcomb, 1997)

Backto-back days (concurrent) compared to overlapping intoxication or effects (simultaneous or maybe sequential)



Why focus on co - and poly -substance use?

Risk Factors & Reducing Harms

- Critical to identify characteristics and patterns of polyuse to target prevention and intervention strategies and programs

Focus for Today

- Prevalence of singular, co-, and poly-substance use in Hawai'i for 2020-2021
 - By Age and Sex
 - Across the lifespan
 - Young adults (18-29 yrs. old)
- For Young Adults: Assess models for co- and poly-substance use
 - Co-use predictive models
 - Mental wellness and health (depression)

Methods - BRFSS

- The HI BRFSS comprises annual, statewide telephone (landline and cell) surveys of adults aged 18 years and older and is part of the national survey coordinated by the CDC
 - Able to do comparisons with U.S. population
- Prevalence data regarding health behaviors, medical conditions, risk behaviors and preventive health practices
 - Core Modules
 - Optional Modules
 - State-added Questions
- Data are weighted by CDC to adjust for the probabilities of selection based on 8 demographic variables

Using 2020 -2021 BRFSS

Cannabis questions were only asked in these two years (so far)

Plus, wanted to use most recent data available

...because 2020-2021 data

Using the CDC released dataset

Limitations of BRFSS for today

Poly -Use considerations

Generally thought of ~~and~~ polyuse within the past 30 days

- Problem with way tobacco/nicotine questions are worded
- Needed to make call on ~~and~~ poly-use categorization

NO DOH Breakdown

Do not have State DOH race/ethnicity breakdown yet for 2021.

- We do plan to examine this in the future when available

A silver smartphone is shown at an angle, with a dark blue rectangular overlay covering its screen. The text "2020-2021 BRFSS QUESTIONS" is written in white, bold, sans-serif font across the center of the overlay. The phone's home button and charging port are visible at the bottom left.

2020-2021 BRFSS QUESTIONS

ALCOHOL

- “During the past 30 days, how many days per week or per month did you have at least one drink of any alcoholic beverage such as beer, wine, a malt beverage or liquor?”





CANNABIS

- “During the past 30 days, on how many days did you use marijuana or cannabis?”

Tobacco/Nicotine Products

Questions Used (based on skip logic)

- Combustible cigarettes
 - “Do you now smoke cigarettes every day, some days, or not at all?”
- E-cigarettes - Vaping
 - “Do you now use e-cigarettes or other electronic vaping products every day, some days, or not at all?”
- Other Nicotine products
 - “Do you currently use chewing tobacco, snuff, or snus every day, some days, or not at all?”



Mental Well-being and Mental Health (Depression)

- “Now thinking about your mental health, which includes stress, depression, and problems with emotions, for how many days during the past 30 days was your mental health not good?”
- “Have you ever been told you have/had a depressive disorder?”



Results

All Ages - Any Substance Use by Age and Sex

	Total*	Never/Former	Any Nicotine	Any Alcohol	Any Cannabis
	15,541 (100%)	5,896 (43.68%)	2,158 (16.83%)	7,284 (47.96%)	1,412 (9.46%)
Age Group					
18 to 24	1,078 (10.68%)	401 (44.42%)	255 (26.58%)	475 (44.74%)	137 (14.92%)
25 to 34	1,842 (17.11%)	542 (33.94%)	365 (23.34%)	1,002 (57.74%)	229 (13.85%)
35 to 44	2,189 (16.67%)	647 (33.35%)	423 (20.17%)	1,176 (56.99%)	252 (11.62%)
45 to 54	2,275 (14.94%)	775 (42.02%)	347 (16.14%)	1,094 (47.99%)	178 (8.03%)
55 to 64	2,809 (15.70%)	1,061 (44.69%)	377 (13.94%)	1,304 (46.58%)	272 (8.50%)
65+	5,348 (24.90%)	2,470 (56.49%)	391 (8.28%)	2,233 (37.64%)	344 (4.58%)
Sex					
Female	8,384 (50.30%)	3,616 (49.99%)	981 (13.46%)	3,517 (41.74%)	595 (7.33%)
Male	7,157 (49.70%)	2,280 (37.13%)	1,177 (20.24%)	3,767 (54.26%)	817 (11.68%)

Note: Unweighted N (Weighted Row % for substance use breakdown), Hawai'i BRFSS 2020-2021

Categories are **NOT** mutually exclusive

All Ages - Any Substance Use by Age and Sex

	Total*	Never/Former	Any Nicotine	Any Alcohol	Any Cannabis
	15,541 (100%)	5,896 (43.68%)	2,158 (16.83%)	7,284 (47.96%)	1,412 (9.46%)
Age Group					
18 to 24	1,078 (10.68%)	401 (44.42%)	255 (26.58%)	475 (44.74%)	137 (14.92%)
25 to 34	1,842 (17.11%)	542 (33.94%)	365 (23.34%)	1,002 (57.74%)	229 (13.85%)
35 to 44	2,189 (16.67%)	647 (33.35%)	423 (20.17%)	1,176 (56.99%)	252 (11.62%)
45 to 54	2,275 (14.94%)	775 (42.02%)	347 (16.14%)	1,094 (47.99%)	178 (8.03%)
55 to 64	2,809 (15.70%)	1,061 (44.69%)	377 (13.94%)	1,304 (46.58%)	272 (8.50%)
65+	5,348 (24.90%)	2,470 (56.49%)	391 (8.28%)	2,233 (37.64%)	344 (4.58%)
Sex					
Female	8,384 (50.30%)	3,616 (49.99%)	981 (13.46%)	3,517 (41.74%)	595 (7.33%)
Male	7,157 (49.70%)	2,280 (37.13%)	1,177 (20.24%)	3,767 (54.26%)	817 (11.68%)

Note: Unweighted N (Weighted Row % for substance use breakdown), Hawai'i BRFSS 2020-2021

Categories are **NOT** mutually exclusive

All Ages - Poly -Use, Co-Use, and Single Use by Age and Sex

Total*			Poly-use	Nicotine & Cannabis	Alcohol & Cannabis	Alcohol & Nicotine	Nicotine-only	Alcohol-only	Cannabis-only
		15,541 (100%)	298 (2.41%)	164 (1.26%)	652 (3.86%)	762 (6.73%)	709 (6.08%)	4,889 (34.05%)	292 (1.95%)
Age Group									
	18 to 24	1,078 (10.68%)	55 (6.13%)	13 (1.74%)	46 (4.10%)	85 (9.89%)	62 (7.51%)	222 (23.23%)	23 (2.98%)
	25 to 34	1,842 (17.11%)	62 (4.00%)	23 (1.21%)	108 (6.38%)	151 (11.51%)	80 (6.09%)	555 (34.62%)	34 (2.26%)
	35 to 44	2,189 (16.67%)	68 (3.09%)	39 (2.18%)	110 (4.67%)	163 (8.50%)	119 (6.40%)	730 (40.06%)	35 (1.74%)
	45 to 54	2,275 (14.94%)	34 (1.50%)	17 (0.82%)	82 (3.33%)	127 (6.00%)	132 (7.77%)	740 (36.23%)	44 (2.34%)
	55 to 64	2,809 (15.70%)	52 (1.76%)	41 (1.81%)	120 (3.19%)	112 (4.82%)	138 (5.77%)	902 (36.26%)	58 (1.72%)
	65+	5,348 (24.90%)	27 (0.42%)	31 (0.41%)	186 (2.36%)	124 (2.93%)	178 (4.51%)	1,740 (31.48%)	98 (1.40%)
Sex									
	Female	8,384 (50.30%)	117 (1.80%)	66 (0.96%)	274 (2.82%)	313 (4.56%)	398 (6.07%)	2,525 (32.06%)	135 (1.73%)
	Male	7,157 (49.70%)	181 (3.03%)	98 (1.57%)	378 (4.94%)	449 (8.98%)	311 (6.08%)	2,364 (36.11%)	157 (2.18%)

Note: Unweighted N (Weighted Row % for substance use breakdown), Hawai'i BRFSS 2020-2021
Categories are mutually exclusive

All Ages - Poly -Use, Co-Use, and Single Use by Age and Sex

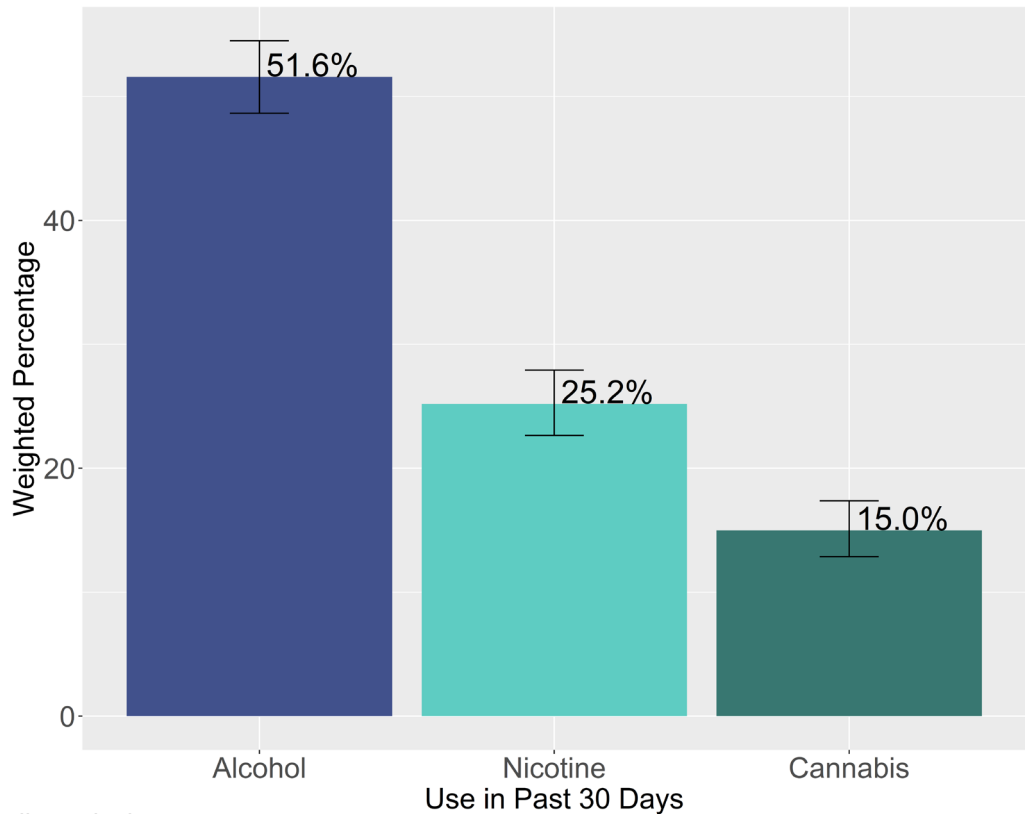
Total*			Poly-use	Nicotine & Cannabis	Alcohol & Cannabis	Alcohol & Nicotine	Nicotine-only	Alcohol-only	Cannabis-only
		15,541 (100%)	298 (2.41%)	164 (1.26%)	652 (3.86%)	762 (6.73%)	709 (6.08%)	4,889 (34.05%)	292 (1.95%)
Age Group									
	18 to 24	1,078 (10.68%)	55 (6.13%)	13 (1.74%)	46 (4.10%)	85 (9.89%)	62 (7.51%)	222 (23.23%)	23 (2.98%)
	25 to 34	1,842 (17.11%)	62 (4.00%)	23 (1.21%)	108 (6.38%)	151 (11.51%)	80 (6.09%)	555 (34.62%)	34 (2.26%)
	35 to 44	2,189 (16.67%)	68 (3.09%)	39 (2.18%)	110 (4.67%)	163 (8.50%)	119 (6.40%)	730 (40.06%)	35 (1.74%)
	45 to 54	2,275 (14.94%)	34 (1.50%)	17 (0.82%)	82 (3.33%)	127 (6.00%)	132 (7.77%)	740 (36.23%)	44 (2.34%)
	55 to 64	2,809 (15.70%)	52 (1.76%)	41 (1.81%)	120 (3.19%)	112 (4.82%)	138 (5.77%)	902 (36.26%)	58 (1.72%)
	65+	5,348 (24.90%)	27 (0.42%)	31 (0.41%)	186 (2.36%)	124 (2.93%)	178 (4.51%)	1,740 (31.48%)	98 (1.40%)
Sex									
	Female	8,384 (50.30%)	117 (1.80%)	66 (0.96%)	274 (2.82%)	313 (4.56%)	398 (6.07%)	2,525 (32.06%)	135 (1.73%)
	Male	7,157 (49.70%)	181 (3.03%)	98 (1.57%)	378 (4.94%)	449 (8.98%)	311 (6.08%)	2,364 (36.11%)	157 (2.18%)

Note: Unweighted N (Weighted Row % for substance use breakdown), Hawai'i BRFSS 2020-2021
Categories are mutually exclusive



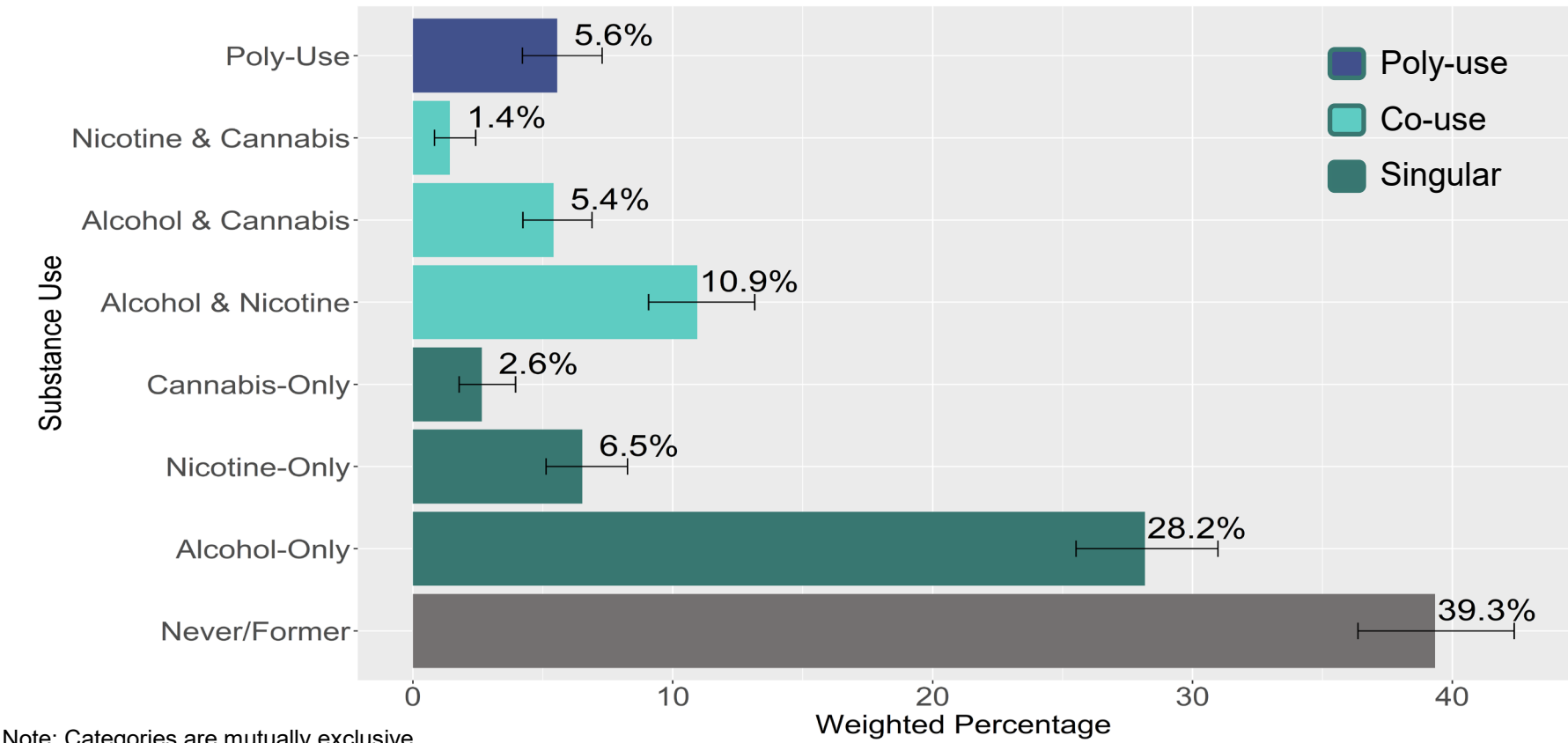
**Young Adults
18-29 years of age**

Young Adult Use of **Any** Alcohol, Nicotine or Cannabis in the Past 30 Days, HI BRFSS 2020-2021

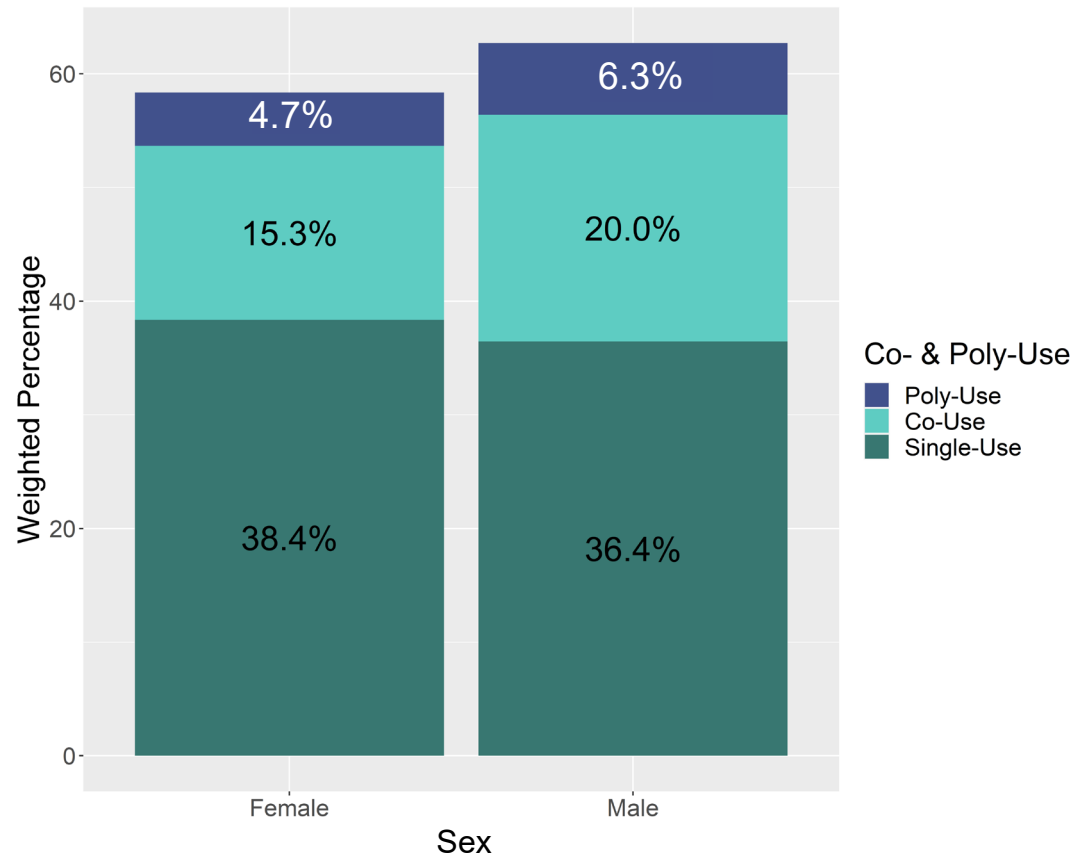


Note: Categories are **NOT** mutually exclusive

Young Adults Singular, Co- and Poly -Use in the Past 30 Days, HI BRFSS 2020-2021



Young Adults Singular, Co - and Poly -Use in the Past 30 Days by Sex, HI BRFSS 2020-2021



Total*		Poly-use	Nicotine & Cannabis	Alcohol & Cannabis	Alcohol & Nicotine	Nicotine-only	Alcohol-only	Cannabis-only
1,882 (100.00%)		78 (5.55%)	20 (1.42%)	97 (5.41%)	156 (10.94%)	94 (6.52%)	470 (28.17%)	36 (2.65%)
Sex								
Female	921 (46.21%)	30 (4.70%)	---	45 (5.29%)	59 (8.86%)	37 (4.53%)	259 (30.97%)	18 (2.85%)
Male	961 (53.79%)	48 (6.31%)	12 (1.66%)	52 (5.51%)	97 (12.80%)	57 (8.29%)	211 (25.67%)	18 (2.48%)
Depression								
No	1,629 (87.26%)	54 (4.02%)	15 (1.28%)	69 (4.37%)	131 (10.66%)	80 (6.67%)	408 (28.37%)	29 (2.27%)
Yes	248 (12.74%)	24 (15.72%)	5 (2.31%)	28 (12.27%)	25 (12.89%)	14 (5.60%)	61 (26.51%)	---
Number of Days Mental Health was Poor (past 30 days)								
None	986 (54.06%)	25 (3.29%)	---	22 (1.79%)	75 (10.96%)	56 (7.03%)	226 (26.03%)	16 (2.19%)
1 to 14 days	648 (33.15%)	37 (7.54%)	---	50 (8.42%)	58 (10.51%)	21 (3.89%)	188 (31.76%)	14 (2.59%)
15+ days	236 (12.79%)	15 (8.29%)	---	25 (12.76%)	23 (12.65%)	14 (9.53%)	55 (28.67%)	---

Note: Unweighted N (Weighted %), Hawai'i BRFSS 2020-2021
 Categories are mutually exclusive
 --- cells are suppressed below n of 10

Total*		Poly-use	Nicotine & Cannabis	Alcohol & Cannabis	Alcohol & Nicotine	Nicotine-only	Alcohol-only	Cannabis-only
1,882 (100.00%)		78 (5.55%)	20 (1.42%)	97 (5.41%)	156 (10.94%)	94 (6.52%)	470 (28.17%)	36 (2.65%)
Sex								
Female	921 (46.21%)	30 (4.70%)	---	45 (5.29%)	59 (8.86%)	37 (4.53%)	259 (30.97%)	18 (2.85%)
Male	961 (53.79%)	48 (6.31%)	12 (1.66%)	52 (5.51%)	97 (12.80%)	57 (8.29%)	211 (25.67%)	18 (2.48%)
Depression								
No	1,629 (87.26%)	54 (4.02%)	15 (1.28%)	69 (4.37%)	131 (10.66%)	80 (6.67%)	408 (28.37%)	29 (2.27%)
Yes	248 (12.74%)	24 (15.72%)	---	28 (12.27%)	25 (12.89%)	14 (5.60%)	61 (26.51%)	---
Number of Days Mental Health was Poor (past 30 days)								
None	986 (54.06%)	25 (3.29%)	---	22 (1.79%)	75 (10.96%)	56 (7.03%)	226 (26.03%)	16 (2.19%)
1 to 14 days	648 (33.15%)	37 (7.54%)	---	50 (8.42%)	58 (10.51%)	21 (3.89%)	188 (31.76%)	14 (2.59%)
15+ days	236 (12.79%)	15 (8.29%)	---	25 (12.76%)	23 (12.65%)	14 (9.53%)	55 (28.67%)	---

Note: Unweighted N (Weighted %), Hawai'i BRFSS 2020-2021
Categories are mutually exclusive
--- cells are suppressed below n of 10



Tobacco/Nicotine and Cannabis

Is type of Tobacco/Nicotine Usage predictive of Cannabis Use (past 30 days)

Tobacco/Nicotine Use	Total	Bivariable		Logistic Regression*		
		No Cannabis Use, past 30 days	Cannabis Use, past 30 days	OR ²	95% CI ²	p-value
No Use (ref)	1,396 (74.81%)	1,102 (89.36%)	133 (10.64%)	—	—	
E-cigarettes	258 (15.36%)	173 (76.93%)	55 (23.07%)	2.41	1.44, 4.05	<0.001
Combustible	82 (5.27%)	44 (68.93%)	21 (31.07%)	3.21	1.55, 6.64	0.002
Both	69 (4.55%)	36 (55.60%)	22 (44.40%)	7.2	3.54, 14.7	<0.001

Note: Unweighted N (Weighted %), Hawai'i BRFSS 2020-2021

*Multivariable logistic model adjusting for sex, preferred race, and education level

For those that use Tobacco/Nicotine, is type of usage predictive of Cannabis Use (past 30 days)

Tobacco/Nicotine Type	Total	Bivariable		Logistic Regression*		
		No Cannabis Use, past 30 days	Cannabis Use, past 30 days	OR ²	95% CI ²	p-value
E-cigarettes (ref)	258 (61.00%)	173 (76.93%)	55 (23.07%)	—	—	
Combustible	82 (20.93%)	44 (68.93%)	21 (31.07%)	1.55	0.73, 3.29	0.26
Both	69 (18.07%)	36 (55.60%)	22 (44.40%)	2.76	1.27, 6.00	0.011

Note: Unweighted N (Weighted %), Hawai'i BRFSS 2020-2021
*Multivariable logistic model adjusting for sex, preferred race, and education level

Alcohol and Cannabis



Likelihood of Alcohol Use (past 30 days) with Cannabis Use (past 30 days)

Tobacco/Nicotine Type	Total	Bivariable		Logistic Regression*		
		No Cannabis Use, past 30 days	Cannabis Use, past 30 days	OR ²	95% CI ²	p-value
No	853 (48.43%)	719 (91.84%)	56 (8.16%)	—	—	
Yes	930 (51.57%)	626 (78.12%)	175 (21.88%)	3.28	2.14, 5.01	<0.001

Note: Unweighted N (Weighted %), Hawai'i BRFSS 2020-2021

*Multivariable logistic model adjusting for sex, preferred race, and education level

A person with dark hair is shown from the back, with their head buried in their hands in a gesture of distress or despair. The image is dark and moody, with a blue and teal gradient overlay. The text 'Co/Poly - Use and Mental Health' is centered in white.

Co/Poly - Use and Mental Health

Substance Use predictive of Depression

Poly-Use Categories	Total	Bivariable – Major Depression		Logistic Regression*		
		No	Yes	OR ²	95% CI ²	p-value
Never/Former (ref)	625 (39.34%)	577 (93.50%)	47 (6.50%)	—	—	
Single Use	600 (37.34%)	517 (86.83%)	82 (13.17%)	2.32	1.43, 3.79	<0.001
Co-Use	273 (17.77%)	215 (79.69%)	58 (20.31%)	4.18	2.44, 7.17	<0.001
Poly-Use	78 (5.55%)	54 (62.78%)	24 (37.22%)	10.1	4.99, 20.3	<0.001

Note: Unweighted N (Weighted %), Hawai'i BRFSS 2020-2021

*Multivariable logistic model adjusting for sex, preferred race, and education level

Why it matters?

- Can help us think through community priorities
 - Identify high-burden (e.g., emerging and young adults) and marginalized groups
 - Co- and poly-use gets less attention
- For prevention intervention programs
 - Assess multiple substance use, create programming targeting co- and poly-use
 - Need to prevent and intervene early for co-use to stem potential harms and mental health
- For tertiary prevention and treatment services, a greater need to address multiple substance use early is imperative
 - In later adulthood, many with a Substance Use Disorder (SUD) have co-occurring SUD diagnosis or mental health disorder
- For Policy
 - Data can help drive system-wide policy discussions

Mahalo!

mphil @hawaii.edu

m4c+SEOW@hawaii.edu

Questions?



Hawaii Cares Update

Hawaii CARES (AUW 211 SUD CARES)

February 2023 Call Data

[Back to report](#)

CALLS IN

Skill Name	Handled Inbound	Avg Speed of Answer	Avg Handle Time
SUD CARES IB Call	203	0.21	14.63
ADAD Provider IB Call	4	0.16	11.61
SUD CARES VM	2	03.9	1.45
Total	209	3.93	14.45

Calls Out

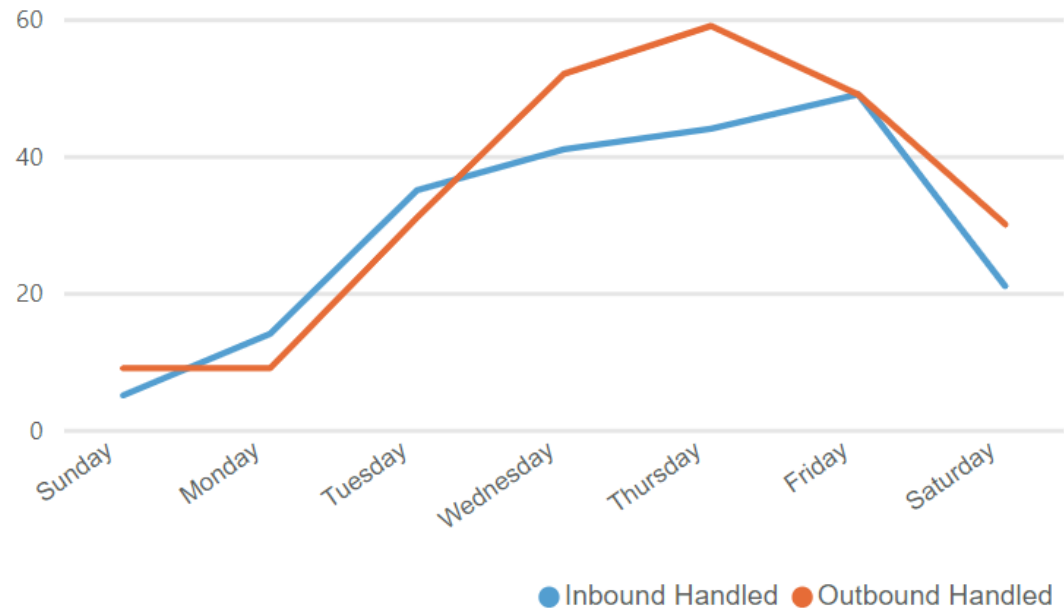
Skill Name	Outbound	Outbound Handled
ADAD Provider OB Call	31	29
SUD CARES OB Call	228	210
Total	259	239

USIS

100

Completed Forms

Calls by Day of Week



Hawaii CARES (AUW 211 SUD CARES)

February 2023 Referral Data

Referrals Out

94

Total

WITS

80

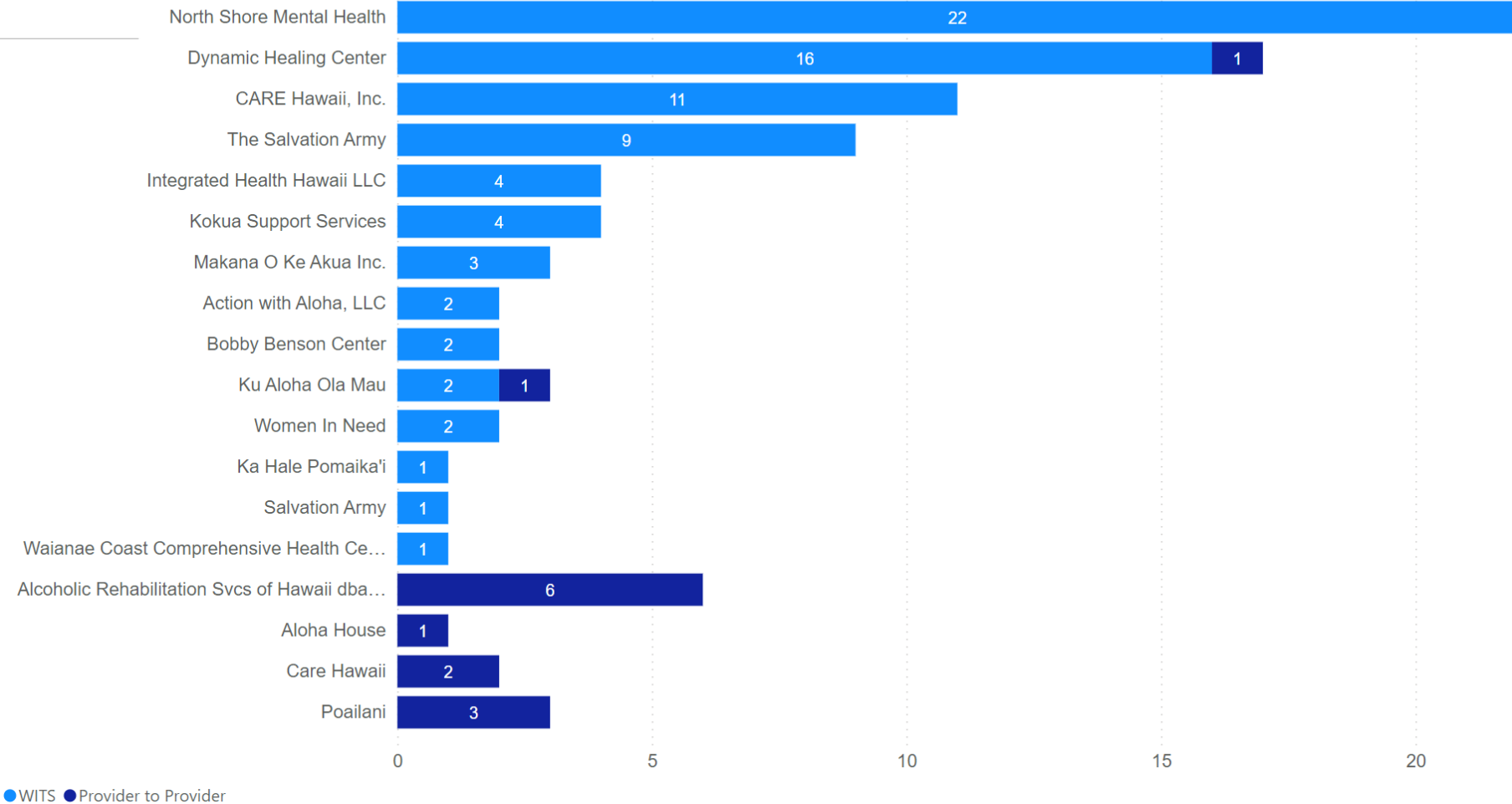
Referrals Out

Provider to Provider

14

Referrals Out

REFERRALS OUT



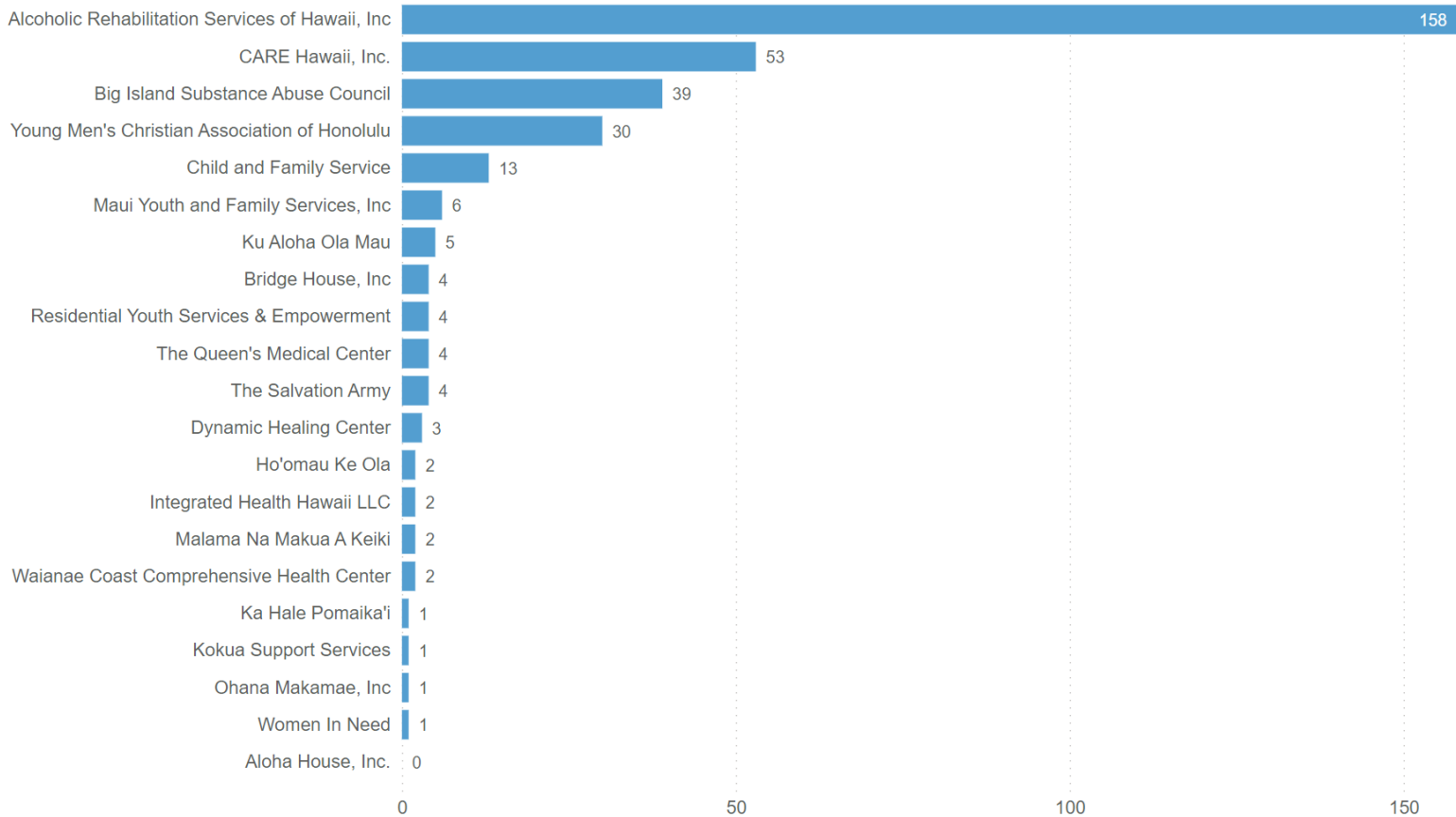
Hawaii CARES (AUW 211 SUD CARES)

February 2023 Referrals Data

Aloha United Way					
211 S.U.D. C.A.R.E.S. Dashboard					
Referrals In	ADAD-funded	Placed	0	0	
			Referral Terminated	Wait List	
374	330	335	35	4	
Total	Authorizations	Accepted	Rejected by Program	Created/Pending	
			0		
			Refused Treatment		

< Back to report

REFERRALS IN - PLACED/ACCEPTED





Together We C.A.N (Care, Aspire, Nurture)

Dona Yoshida
Akiko Uchikawa

Mission & Program Goal

CFS Mission Statement: Strengthening families and fostering the healthy development of children.

The program goal is to prevent and reduce substance misuse among youth by addressing risk and protective factors.

Community Description

HONOLULU

- Kaimuki complex (10 schools)
- Urban community
- Asian (incl. Filipino), Mixed, Caucasian, Native Hawaiian / Other Pacific Islander
- Kaimuki High School & Jarrett Middle School – Micronesian, Native Hawaiian; a lot of students reside in public housing

KAILUA

- Kailua complex (8 schools)
- Caucasian, Asian (incl. Filipino), Native Hawaiian / Other Pacific Islander, Mixed

WAHIAWA

- Leilehua complex (10 schools)
- Asian (includes Filipino) / Hispanic-Latino / Caucasian / Native Hawaiian
- Many military families
- High poverty rate

WAIALUA

- Waialua complex (3 schools)
- Asian (incl. Filipino) / Mixed / Caucasian

WAIPAHU

- Waipahu complex (7 schools)
- Asian (incl. Filipino), Native Hawaiian / Other Pacific Islander. Mixed
- More than half speak another language other than English at home

Assessment

2019 Hawai'i Health Data Warehouse Report, Youth Behavior Risk Survey (YBRS):

- Early drinking or onset of one full drink continues to be a significant public health problem in Honolulu County.
- Middle school students' lifetime use of alcohol increased to 20.9% in the 2019 report from 20.0% in 2015.
- Lifetime use among high school students was at 44.3%
- Alcohol use among 9th graders continued to be high.
- Middle school students in Honolulu County that were currently using e-cigarettes was 16.4%, an increase of 8.8% from the 2015 data.
- Students that tried e-cigarettes doubled from 12.2% in 2015 to 25.9% in 2019.

Assessment

2021 Hawai'i State Epidemiologic Profile:

Native Hawaiian, Caucasian, Filipino, and Other Pacific Islander have the highest rates of underage drinking and marijuana use.

Assessment

**Early alcohol use linked to increased risk
(Hingson et al., 2006; Hawkins, Catalano, and Miller, 1992):**

- Binge drinking in high school
- Poor academic performance
- Decreased school engagement
- Increased high risk behaviors

Influencing Factors

Advertising and media messaging on television, social media, in stores and shopping malls and product placement in television shows and movies influence teens to see alcohol and tobacco products as appealing (Bryant, Zillmann & Oliver 2002).

A study by M. Siegel et al. in 2016 found "a robust relationship between documented underage exposure to alcohol brand advertising and the prevalence of past 30-day consumption of those brands among a national sample of underage drinkers.

Young people often align themselves with values and messages they encounter from pop culture and celebrity influencers.

Tobacco use has been and has become more prominent on streaming platforms than in traditional broadcast and cable programming. Smoking has been prevalent and glamorized not only in streaming shows but also video games that young people play.

Truth Initiative reported that 79% of the shows that are most popular among young people aged 14-24 prominently depicted smoking behaviors. (truthinitiative.org; "While You Were Streaming", 3/16/18)



Capacity: Partners

Honolulu

- Dole Middle School
- Jarrett Middle School
- Kaimuki High School
- Hawaii Partnership to Prevent Underage Drinking (HPPUD)
- Kalihi Coalition

Kailua

- Kalaheo High School
- St. John Vianney School
- St. Anthony School
- Olomana School

Wahiawa

- Wheeler Middle School
- Leilehua High School

Waialua

- Waialua High & Intermediate School

Waipahu

- Waipahu Intermediate School
- Waipahu Community Coalition

Capacity: Activities

E-Cigarettes & Vape Pen 101 Presentation and other topics

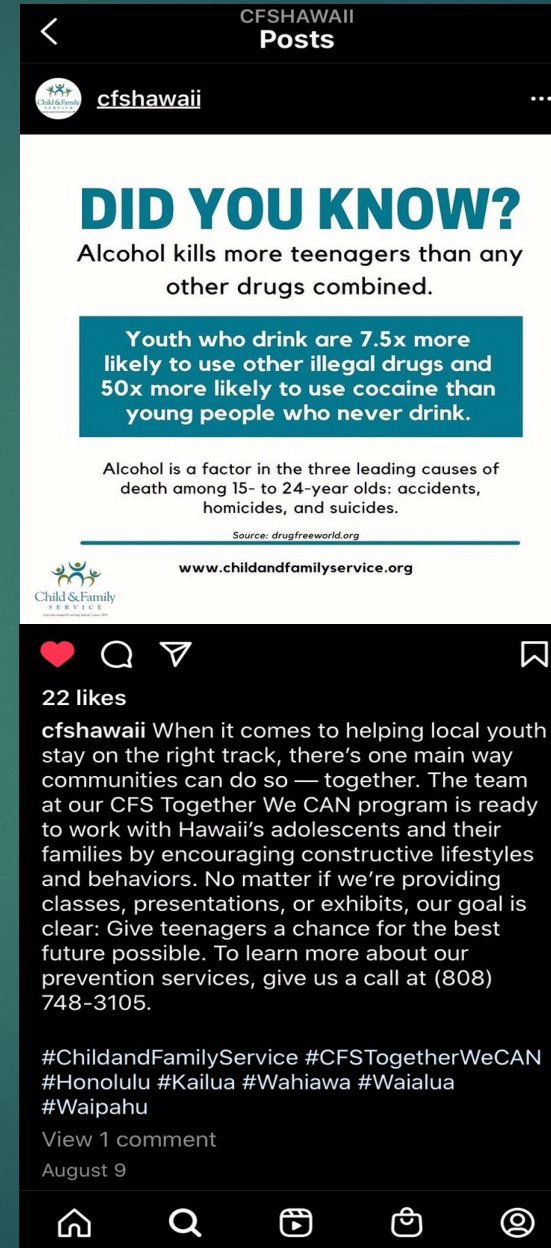
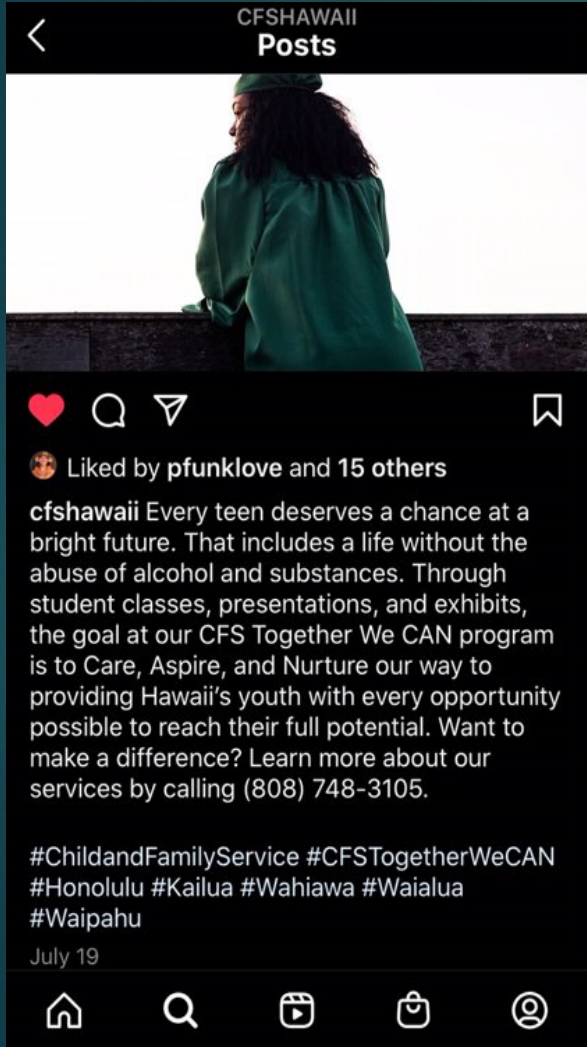
- A presentation of facts about vaping.
- Coping skills, cyberbullying, dating violence, etc.

@25: Preventing Underage Drinking Exhibit

- Interactive exhibit where participants are encouraged to delay drinking until 25 years of age when the brain is fully developed.

Social Media Posts

- Instagram, Facebook, Twitter



Planning



- Partnering with the schools, meeting them where they are at, and providing the specific prevention services that they need for their students.
- Project Towards No Tobacco Use (TNT), Project Towards No Drug Abuse (TND), Media Ready (MR), and Media Detective (MD) have a strong conceptual fit as they align with identified priority problems and risk and protective factors.
- These programs also have a strong practical fit as they are all either model or exemplary programs or are supported by research.

Implementation

Evidence-Based Prevention Curriculums

Media Detective (MD)

10 Sessions
4th-5th grade

Students discover the media world around them and apply critical thinking skills to better understand what messages are being sent to them, particularly messages that promote and glamorize the use of alcohol and tobacco products.

Emphasizes:

- Critical thinking skills
- Promotes healthy, independent decision making

Media Ready (MR)

10 Sessions
6th-8th grade

Designed to equip students with the ability to analyze media messages, recognize unhealthy behavior, and prevent substance abuse through the power of media literacy education.

Emphasizes:

- Critical thinking skills
- Methods of conducting research
- Promotes healthy, independent decision making

Towards No Tobacco (TNT)

10 Sessions
5th-8th grade

Designed to delay delay/prevent the onset of tobacco use.

Emphasizes:

- Demonstrate active listening, assertive refusal, and effective communication skills
- Build skills to counteract social pressures
- Cognitive restructuring

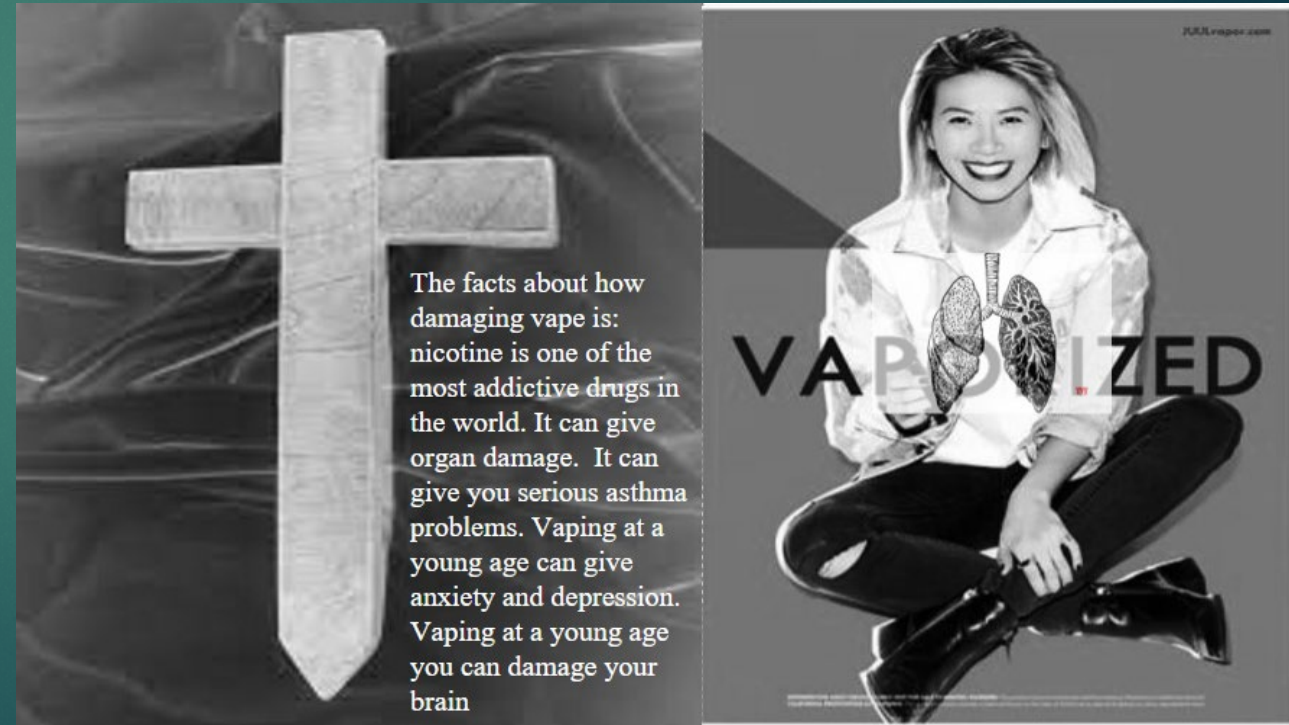
Towards No Drug Abuse (TND)

12 Sessions
9th-12th grade

Designed to delay/prevent the onset of substance abuse and address social emotional skills.

Emphasizes:

- Self-control
- Alternative methods to cope with stress & build self-esteem
- Cognitive restructuring
- The pros and cons of decision making



Viceroy's

FILTER
the Smoke!



As your Dentist,
I would recommend
VICEROYS



Viceroy's

FILTER
the DEATH!



AS THE GRIM REAPER, I
WOULD RECOMMEND
VICEROYS IF YOU WANT
LUNG CANCER, HEART
PROBLEMS, AND POSSIBLE
DEATH.

Is springtime
your time?

Enjoy it
right here

...you can't take the country out of Salem

Salem
Menthol Fresh
FILTER CIGARETTES

© 1969 R. J. REYNOLDS TOBACCO COMPANY WINSTON-SALEM, N. C.

Is springtime
your time?
TO DIE

...you know the
consequences...
you don't want to
die yet do you?
smoking can cause
lung cancer and
even worse
things.

It's not worth the risk...

Salem
Menthol Fresh
FILTER CIGARETTES



original ad.



- About 86,000 people die every year as a result of alcohol related causes.
- Some health risks of alcohol include, liver disease, cancer, heart problems, poor immune system and many others.
- Teens that binge drink do worse on tests of memory, attention and spatial skills.



Evaluation

- ▶ FY 2020-2021

(July 2020-January 2021 furlough)

- ▶ FY 2021-2022

Media Ready

Innovation Research & Training, Inc.

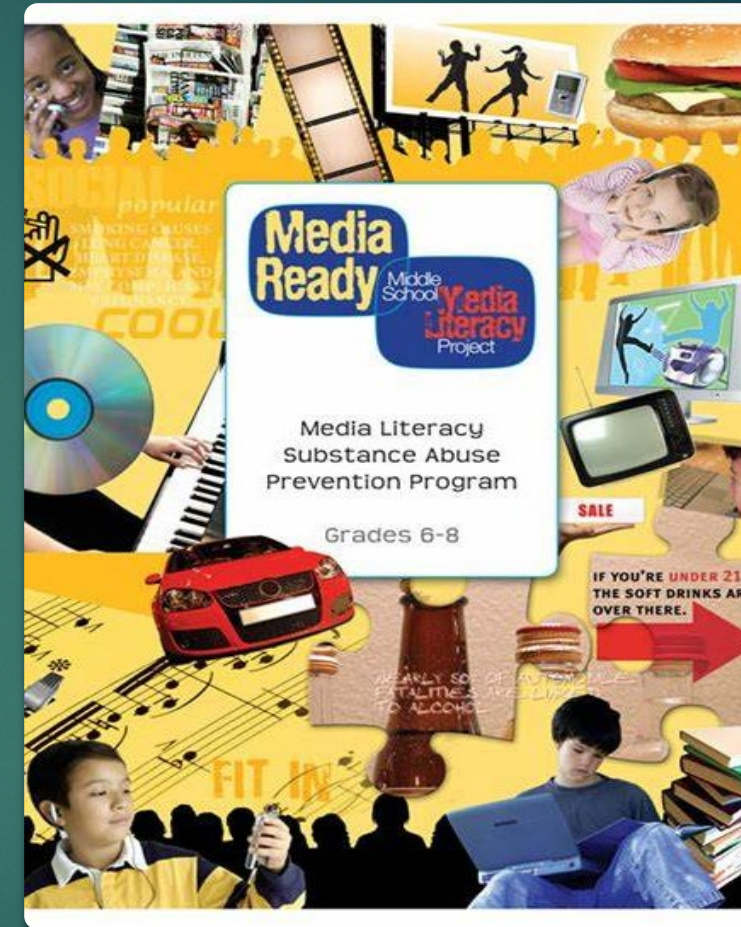
Drs. Janis Kupersmidt, Tracy Scull, and Jessica Benson

16 cycles

221 Youth Participants

Matched Pretest and Posttest data:

- ✓ Overall 10% gain in correct responses
- ✓ 60% of youth improved their score on their posttest
- ✓ Vast majority of youth reported no substance use in the 30 days prior to both the pretest and posttest.
- ✓ Youth responding to satisfaction survey indicated improving their attitudes and knowledge about substance use and its risks and protective factors.



Media Detective

Innovation Research & Training, Inc.
Drs. Janis Kupersmidt and Tracy Scull

Implemented January 2023



Project Towards No Drug Abuse (TND)

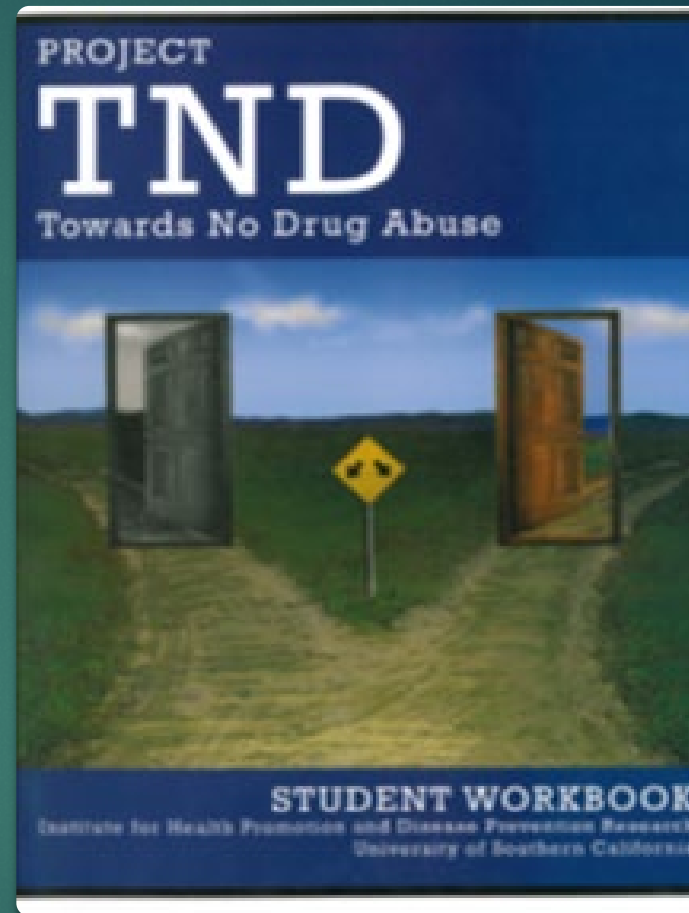
Steve Sussman, Ph.D., University of Southern California

10 cycles

215 Youth Participants

Matched Pretest and Posttest data:

- ✓ Overall 11% gain in correct responses
- ✓ 68% of youth improved their score on their posttest
- ✓ Vast majority of youth reported no substance use in the 30 days prior to both the pretest and posttest.
- ✓ Youth responding to satisfaction survey indicated an improving their attitudes and knowledge about substance use and its risks and protective factors.



Project Towards No Tobacco Use (TNT)

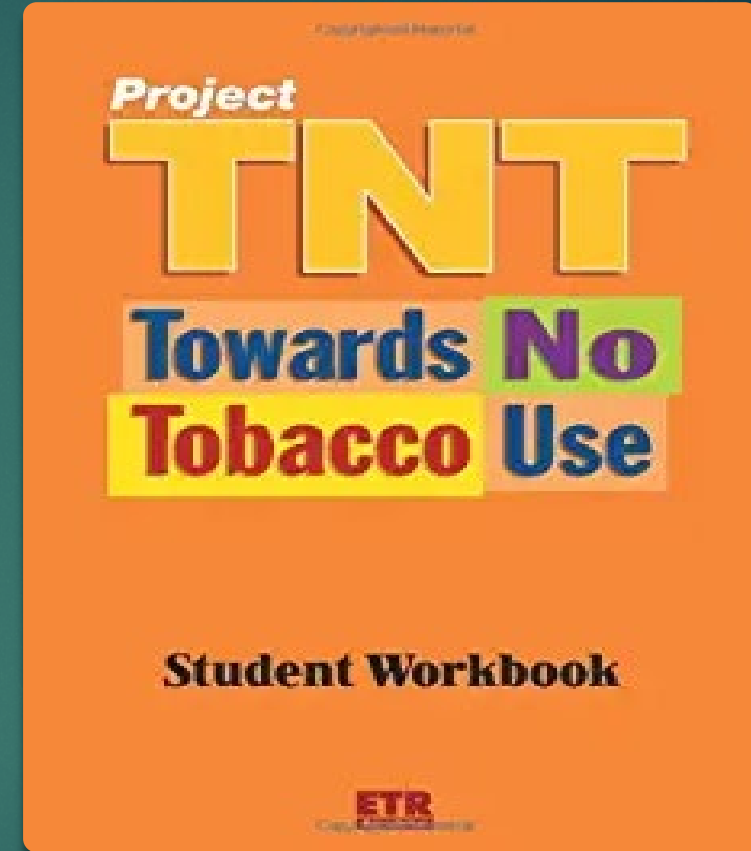
Steve Sussman, Ph.D., University of Southern California

7 cycles

102 Youth Participants

Matched Pretest and Posttest data:

- ✓ Overall 16% gain in correct responses
- ✓ 79% of youth improved their score on their posttest
- ✓ Vast majority of youth reported no substance use in the 30 days prior to both the pretest and posttest.
- ✓ Youth responding to satisfaction survey indicated an improving their attitudes and knowledge about substance use and its risks and protective factors.



Contact Information

Kenda Mohica, Program Director-Waialua

kmohica@cfs-hawaii.org

mobile: (808) 349-1300

Akiko Uchikawa, Program Director-Waipahu

auchikawa@cfs-Hawaii.org

mobile: (808)358-7797

Dona Yoshida, Program Director-
Honolulu/Kailua/Wahiawa

dyoshida@cfs-Hawaii.org

mobile: (808) 265-5569



International Certification & Reciprocity Consortium

P.O. Box 61277 Harrisburg, PA 17106-

Prevention Professional of the Year 2021 Award Information

Substance abuse prevention is one of the greatest public health challenges of our time, and its success depends on a workforce of qualified professionals trained in evidence-based practices.

Prevention professionals are working all over the world – partnering with parents, community groups, coalitions, faith-based organizations, health care professionals, law enforcement, businesses, and educators – to make a difference in their communities.

Among them are the professionals who go above and beyond, truly standing out in their dedication, intelligence, compassion, and effectiveness. It is those professionals whom IC&RC wants to recognize.

About the Award

The Prevention Professional of the Year Award seeks to honor the best of the best: the certified preventionist who best embodies the ideal of the profession and of IC&RC. The Prevention Committee of IC&RC will accept nominations from member boards, and then select the awardee from among the submissions.

About The Prevention Committee

Led by Marissa Carlton, MS, CPS and advised by Julie Stevens, MPS, ICPS, ACPS, and Sandra Del Sesto, M.Ed., ACPS, the Prevention workgroup of IC&RC leads the organization's efforts to advance the profession of substance abuse prevention. Its work includes overseeing the Prevention Specialist (PS) exam, marketing the PS credential to member boards, potential certificants, and representing IC&RC at national and international prevention events.

About IC&RC

IC&RC is an international non-profit organization that promotes public protection by developing internationally recognized credentials and examinations for prevention, substance use treatment, and recovery professionals. Quality and integrity are the foundation of IC&RC's work and all examinations are based on the latest research, evidence-based practices, and updated on a regular basis.

Prevention Professional of the Year 2021 Award Application

Board Contact Information

Nominating Board:

Name and Title of Contact:

Address:

City, State, Zip:

Country:

Phone Number:

Email:

Nominee Contact Information

Nominee:

Address:

City, State, Zip:

Phone Number:

Country: USA

Email:

Company/Agency:

Position/Title:

Nominee Career Information

Educational Background (List degrees and institutions):

Work Experience in Prevention (List job titles and projects worked on):

Certifications/Licenses/Education/Degrees Held:

Number of Years Certified as a Prevention Specialist:

What work experience/contributions/accomplishments have been made in prevention by the nominee?

What distinguishes this person regarding their character and commitment to prevention?

Why do you think this person should be considered for the IC&RC 2021 Prevention Professional of the Year?

**Submit application to
IC&RC Prevention Awards no later than February 19, 2021**

Email: angela.bolan@doh.hawaii.gov