CALL TO COMMUNITY ACTION

Preventing and Reducing Substance Abuse in Talbot County

Blue Ribbon Commission
Oversight Committee
2009 Status Report

"When I was appointed to the bench, I was amazed to learn that more than 60% of our cases involved alcohol or drugs. Drug and alcohol-related repeat offenders—adult and juvenile—burden our courts, our detention centers, and our enforcement and social agencies.

This *Blue Ribbon Commission Oversight Committee (BRCOC) Status Report,* published for the first time this spring, appears at the request of the Talbot County Council and its (now defunct) Blue Ribbon Commission (BRC) on Substance Abuse in Talbot County. Its purpose is to publish progress implementing BRC-recommended interventions, eventually ensuring evidence-based accountability to the newly appointed BRCOC, as well as to local citizenry. Compiled by a collaboration of county agencies including Talbot County government, Talbot Family Network, and the Talbot County Health Department, with staff assistance of Talbot Partnership, it is due to be updated annually.

I look forward to working with the BRCOC to analyze the data in an effort to make the Circuit Court as helpful as possible in dealing with this plague in our community."

The Honorable Broughton Earnest
Circuit Court for Talbot County

"I believe that substance abuse is one of the greatest challenges facing Talbot County. The consequences of failing to deal effectively with drug and alcohol abuse would haunt us for years; the results of meeting this challenge would benefit future generations."

Philip Carey Foster
President, Talbot County Council

For more information, see the *Blue Ribbon Commission Report to the Talbot County Council,* dated Tuesday, September 11, 2007, available at www.talbotpartnership.org.

The 2009 Status Report is the result of collaboration between many community partners, including Talbot Partnership, Talbot Family Network, Talbot County Health Department, Talbot County Council, and the Talbot County Council's Blue Ribbon Commission and Blue Ribbon Commission Oversight Committee and Just Cause Consulting, Inc. Production costs have been provided by the Talbot Family Network, with funding from the Governor's Office for Children, and Talbot Partnership.

Talbot County Population Demographics[1]

Population

Population, 2000 Census	33,812
Population, 2006 Estimate	36,062
Population percent change, 4/1/2000 to 7/1/2006	6.7%
Persons under 5 years old, 2006	1,839
Persons under 18 years old, 2006	7,068
Persons 65 years and over, 2006	7,934

Ethnic Origin

White American Persons, 2006	30,220
Black or African American Persons, 2006	5,085
American Indian and Alaskan Native Persons, 2006	72
Asian American Persons, 2006	288
Native Hawaiian and Other Pacific Islander Persons, 2006	0
Persons reporting two or more races, 2006	325
Persons of Hispanic or Latino origin, 2006	974

Talbot County Public School Population 2008-2009[2]

	Elementary	*Middle*	*Middle/High*	*High School*
Easton	1,121	809		1,205
St. Michaels	280		389	
Chapel District	320			
Tilghman	74			
White Marsh	230			

Total Enrollment: 4,428

[1] U.S. Census Bureau 2000 Census and 2006 QuickFacts Estimate

[2] Talbot County Public Schools

the problem

New Science and the Teen Brain: Teen Addiction

At the National Institute of Drug Abuse (NIDA), National Institute of Health (NIH), and in other research-based medical centers across the nation, scientists are beginning to understand the profound and long-lasting consequences the use of drugs and alcohol can have on the still-maturing adolescent brain.

Alcohol and Tobacco

Public health statistics tell us that the two drugs that cause the most illness and death are also the most available: tobacco and alcohol. Late adolescence, before the brain is fully matured, is the peak time for developing dependence on these (and other) drugs. Professionals have known for some time of the risks of underage drinking—interference with learning; development of social and other competencies; traffic fatalities, alcohol-related injuries, homicides and suicides; and early, more frequent, and less safe sexual activity. Research now indicates that alcohol is actually damaging to the brains of adolescents who drink heavily.

Impact on Brain Development

According to current research, heavy substance abuse during times of critical brain development may cause permanent changes in the way the brain works and responds to rewards and consequences. Therefore, it is important to begin to address a developing substance use problem as early as possible.

In 2007, Kenneth Moritsugu MD, MPH, the nation's former Surgeon General, issued a *Call to Action on Underage Alcohol Abuse*, noting:

"too many Americans consider underage drinking a rite of passage to adulthood,"

when in fact, "research shows that young people who start drinking before the age of 15 are *five times more likely* to have alcohol-related problems later in life."

According to Dr. Mark Willenbring, Director of Treatment and Recovery Research at the National Institute on Alcohol Abuse and Alcoholism, (NIAAA), *"Addiction is a disorder of young people."* The vast majority of people who suffer from addiction encountered the beginnings of their illness when they were teenagers. Ninety-five percent of people who are dependent on alcohol or other drugs started before they were 20 years old.

"…young people who start drinking before the age of 15 are five times more likely to have alcohol-related problems later in life."

Primary Citations:

U.S. Department of Health and Human Services. *The Surgeon General's Call to Action To Prevent and Reduce Underage Drinking* U.S. Department of Health and Human Services. Office of the Surgeon General, 2007.

U.S. Department of Health and Human Services. *Drugs, Brains and Behavior: The Science of Addiction.* National Institute on Drug Abuse, NIH. Publication no. 07-5605, April 2007.

SUBSTANCE ABUSE in Talbot County

2004 MARYLAND ADOLESCENT SURVEY (MAS) DATA

The 2004 *Maryland Adolescent Survey* conducted by the Maryland State Department of Education revealed widespread acceptability of alcohol, tobacco and other drug abuse among youth in Talbot County. Rates of substance abuse by Talbot County youth are among the highest in the state. Likewise, adolescent admissions to Maryland alcohol and addictions treatment programs for local youth are the second highest in the state. Talbot County teens confirm that it is easy to get and use tobacco, alcohol and other drugs.

"Substance abuse is a key part of every teenager's life in Talbot County. If you do not drink or use drugs, you are one of the few, and often have to explain your choice to your classmates."

—2008 graduating senior, Easton High School

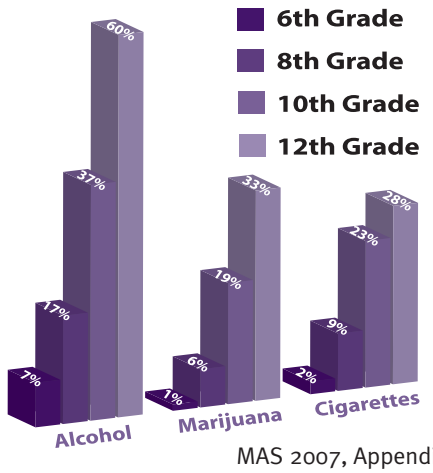
2007 MARYLAND ADOLESCENT SURVEY (MAS) DATA

The Maryland State Board of Education Maryland Adolescent Survey (MAS) asks public school students statewide every other year about their attitudes, knowledge and behavior concerning substance abuse. Overall, 90% of Talbot County 6th, 8th, 10th and 12th grade students responded to the latest survey. The following summary reports use for the last 30 days prior to the survey. Research indicates use in the past month is a meaningful indicator of actual abuse, not just experimentation. The 2007 MAS shows mixed results for Talbot County.

Numbers on the bar graphs represent percentages of students answering the survey who reported use in the last 30 days. Numbers cited in the text compare percentage changes year to year in use, as well as Talbot County usage rates with those across Maryland.

At What Rates Do Our Adolescents Abuse Substances?

Alcohol, marijuana and cigarettes are the first, second and third most abused substances. In regard to alcohol, the substance most frequently abused by adolescents, there is some good news. The 2007 MAS reports a decreased use of alcohol among 8th graders (41% less) and 10th graders (32% less) as compared to data reported in 2004. Compared to State numbers however, Talbot County still has a big adolescent alcohol abuse problem, reporting that its 8th, 10th and 12th graders' use of alcohol is 37%, 33%, and 42% higher than the state averages respectively. Seniors continue to report drinking at the same or slightly higher rates.



MAS 2007, Appendix D
Participation=90%
* Figures are rounded to nearest percentage.

Marijuana is the second substance most frequently abused substance by adolescents: Talbot County 8th graders reported abuse rates at 30% higher than the state average, 10th graders at 34% higher than the state average, and 12th graders at 59% higher than the state average.

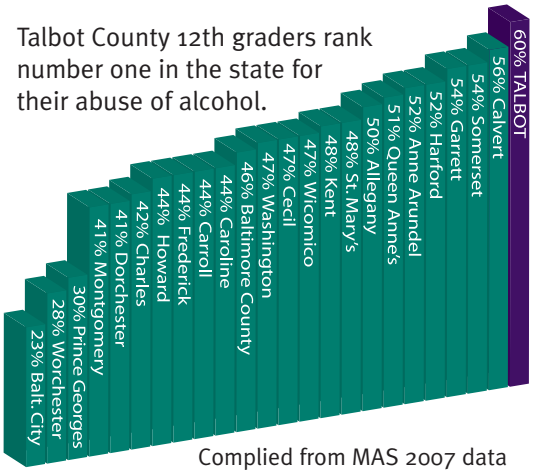
Cigarettes are the third most frequently abused substance by teenagers. Talbot County 8th and 10th graders smoke cigarettes at rates more than double the statewide average, ranking them number one in the state for the abuse of cigarettes. Talbot's seniors smoked 72% higher than the state average.

the problem

Most alarming is that new medical research indicates that these familiar substances cause measurable changes in, and in some cases, real and permanent damage to adolescent brains.

Our Seniors Abuse Alcohol at a Higher Rate than Any Other Jurisdiction in Maryland

Talbot County 12th graders rank number one in the state for their abuse of alcohol.

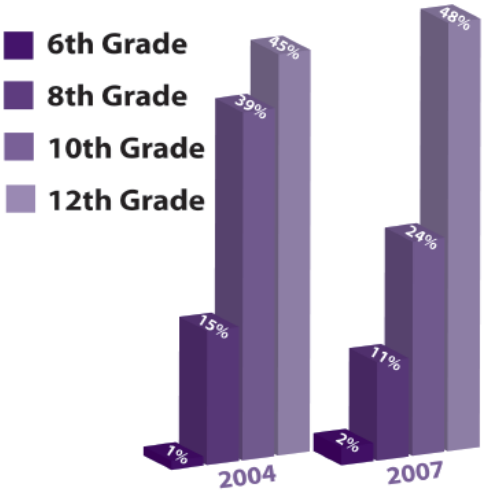


Complied from MAS 2007 data

* Figures are rounded to nearest percentage.

How Do 2007 MAS Binge Drinking Rates Compare With Those Reported in 2004?

Rates reported in 2007 for binge drinking—consuming five or more servings of alcohol on the same occasion—decreased by 34% for 8th graders and by 63% for 10th graders as compared to 2004.



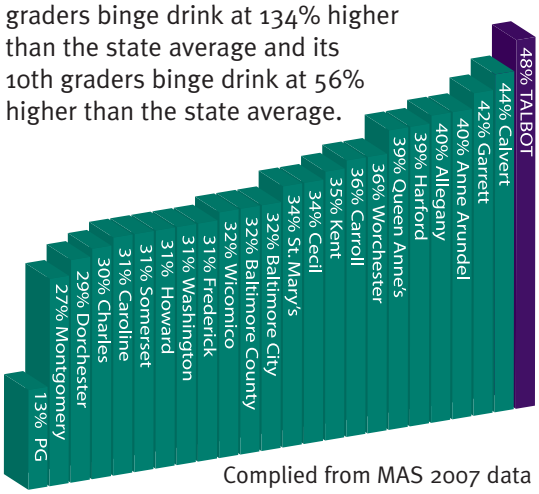
* Figures are rounded to nearest percentage. Binge drinking is defined as consuming five or more servings of alcohol on the same occasion.

MAS 2004 and 2007, Appendix D

2007 participation=90% 2004 Participation=77%

Our Seniors Binge Drink at the Highest Rate in the State

Talbot County 12th graders however binge drink at a rate 67% higher than the state average. They binge drink more than seniors in any other jurisdiction in Maryland. Talbot's 8th graders binge drink at 134% higher than the state average and its 10th graders binge drink at 56% higher than the state average.

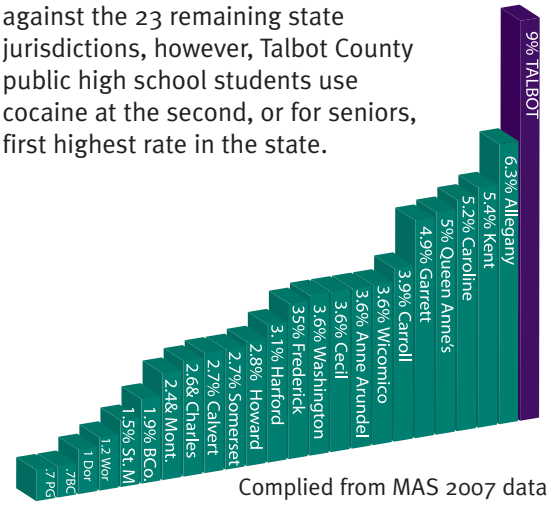


Complied from MAS 2007 data

* Figures are rounded to nearest percentage.

Our Seniors Abuse Cocaine at the Highest Rate in the State

Alcohol, marijuana and cigarettes are all considered "gateway drugs," giving young people practice in the actions and attitudes needed for the use of other more harmful drugs, such as cocaine. Adolescent use rates for cocaine are deceptively low in Maryland: averaging less than 10% in all grades. Measured against the 23 remaining state jurisdictions, however, Talbot County public high school students use cocaine at the second, or for seniors, first highest rate in the state.



Complied from MAS 2007 data

* Figures are rounded to nearest percentage.

"I have been to friends' houses where parents were present but they just go upstairs and are never seen again. I can't believe they don't know what is going on. It seems that drinking alcohol is more accepted than smoking cigarettes, and that smoking pot is not even considered [doing] a drug. More and more kids are doing ecstasy and I even hear about students doing heroin."

—2008 graduating senior, St. Michaels High School

Another risk factor for Talbot's 12th graders, in addition to recent driving licensure, is drunk driving. The MAS asks teens specific questions about drinking and driving. The results are alarming, since alcohol-related car accidents are the number one cause of teen death.

Among licensed respondents, nearly 25% of seniors report having driven after drinking one to four drinks.

Another 11% of seniors admit to driving after drinking five or more drinks. When asked if they had ever made the choice to ride with a drinking driver, 25% of seniors said yes, once or twice; approximately 13% of seniors said yes, three or more times.

For more information on the 2007 MAS Report, visit: www.marylandpublicschools.org/MSDE/search and follow two links (using 2007 MAS as the search term in the first) to the 172 page pdf survey results booklet.

While the 2004 MAS was a community wake-up call for Talbot County, the 2007 MAS data proves the continued need to act together as a community to protect our children. The question then is "how." The Talbot County Blue Ribbon Commission Action Steps, outlined next, reflect local, comprehensive answers to this complicated problem.

"Underage drinking cannot be successfully addressed by focusing on youth alone. Youth drink within the context of a society in which alcohol use is a normative behavior and images about alcohol use are pervasive. They usually obtain alcohol—either directly or indirectly—from adults. Efforts to reduce underage drinking, therefore, need to focus on adults and must engage the society at large."

Richard J. Bonnie, Chair, National Research Council and Institute of Medicine National Academies of Science

the solution

The Blue Ribbon Commission

In the spring of 2006, the Talbot County Council appointed 15 leaders representing a cross-section of the community to a panel known as the Blue Ribbon Commission (BRC). The BRC consisted of the following members:

Blenda Armistead, *Parent, Chair*
Chief Ben Blue, *Easton Police Department*
Judge Sidney Campen, *Circuit Court*
Vicki Cappa, *Saints Peter & Paul Schools*
Charlotta Denton, MD, *Pediatrician*
Buck Duncan, *Talbot Bank*
Gloria Farrare, *Talbot County Board of Education*
Steven Harris, DVM, *Parent*
The Reverend Fentress Hickman
Corey Pack, *Parole & Probation*
Sheriff Dallas Pope, *Talbot County Sheriff's Department*
Sindy Reyes, *Parent*
Joseph Ross, CEO, *Shore Health System*
Robert Schmidt, *Talbot County Public Schools*
Kathy Foster, *Health Officer, Talbot County Health Dept.*

The Commission worked with consultant Jane Callahan, executive director of the Community Anti-Drug Coalitions of America (CADCA). Monthly meetings were held from July 2006 to June 2007.

"As a parent, the Blue Ribbon Commission process opened my eyes to the growing substance abuse and addictions problem in Talbot County—a problem that is not limited to youth. This is an opportunity for us to address our attitudes and expectations, to prevent problems by intervening earlier, and to make it more difficult for youth to access alcohol and drugs at home and in the community."

Blenda Armistead

The BRC data analysis led the Commission to conclude that "Talbot County has a growing substance abuse and addictions problem" not limited to its youth. Talbot County adults are also at high risk for substance abuse, as indicated by per capita consumption of alcohol, per capita number of facilities licensed to sell alcohol, and hospital inpatient discharge rates for alcohol-related diagnoses.

The BRC reviewed data on high local rates of substance abuse and recommended a community-wide plan of action for reducing those rates.

"Substance abuse is an epidemic of crisis proportions in Talbot County. It spans all socioeconomic groups and impacts our workplaces, schools, roadways, families, and safety. How much do we value the well-being of our youth and our community and what are we willing to do about it?"

Kathy Foster, Health Officer
Talbot County Health Department

root causes/interventions

The BRC identified three **root causes** for the substance abuse problem in Talbot County:

1) the community culture accepts substance abuse;

2) interventions for substance abuse occur too late; and

3) drugs and alcohol are too easy to obtain at home and in the community.

From January to May of 2007, key stakeholders from education, health and human services, law enforcement, the judicial system, business, the Liquor Board, media and recreation met with the BRC to answer questions and present suggestions. The final BRC report was presented to the County Council in September of 2007. It listed 34 interventions to address root causes and proposed 13 with which to begin.

BRC Commission Strategies are partially funded by:

TCPS Cigarette Restitution Fund

Talbot County Parks & Recreation

Office of Highway Safety

Talbot Partnership

Talbot County Council

Talbot Family Network

Talbot County Health Department

Progress on 13 Blue Ribbon Commission Intervention Strategies

1. Increase parent education about substance abuse risks and prevention during key school transitions (entering middle and entering high school).

Back to School bags were distributed to parents of new 6th graders containing Let's Talk conversation cards, TALK mouse pad, resource list/bookmark, TipLine & TurnAround magnets, brochures, and cover letter.

2. Strengthen participation of youth and parents in signing policies about substance abuse for all extracurricular activities, school and community.

Talbot County Public Schools implemented a new policy. Talbot Partnership presented the concept of prevention to recreation and sports organizations which have agreed to implement them.

3. Increase saturation patrols to reduce impaired driving.

Local police are doing additional patrols.

4. Improve access to higher intensity treatment services.

Talbot County Addictions Program (TCAP) is seeking additional funding.

5. Expand drug courts to serve maximum capacity.

Juvenile Court, Family Recovery Court and Violation of Probation Court are operational in District Court. Mental Health Court in Circuit Court is scheduled to begin in 2009.

6. Increase Employee Assistance Programs (EAP) and drug testing at work places.

Talbot County Chamber of Commerce partnered with EAP to solicit interest in 11/19/08 workshop with Drug Free Workplace expert Judith Slaughter.

7. Increase ability of service providers to assist parents who ask for help, identify signs of substance abuse, and make referrals.

A training curriculum was created, refined and presented to a number of groups.

8. Increase ability of healthcare providers to conduct brief interventions and referrals for substance abuse.

Health Department (HD) implemented brief interventions in all HD patient programs as of 7/1/08 and held extended meetings with Shore Health System staff and administrators, providing them background research and intervention tools.

9. Increase screening and referrals for substance use during school-based mental health in-take process.

Eastern Shore Psychological Services (ESPS) uses the CRAFFT assessment tool, the standard of care for this process and will keep records to be compared over time.

10. Increase full day comprehensive program options for most troubled youth.

BRCOC continues to evaluate definition of "troubled" youth.

11. Increase targeting and dispersing of underage drug/alcohol parties.

Talbot TipLine was created and advertised in radio, movie and print ads, as well as in the *Community Resource Guide for Children and Families of Talbot County.*

12. Improve ability of businesses to recognize and report fake IDs.

Martin Johnson provided training on recognizing fake IDs 6/26/08 for businesses and law enforcement.

13. Hire Liquor Inspector and strengthen liquor laws

Liquor Inspector began work 3/1/09. Draft of proposed changes to the Liquor Code complete.

STATE LEVEL INTERVENTIONS

Advocate for license suspension, revocation or delay as a consequence of underage drinking & drug abuse;

Advocate for law to inform schools of youth substance abuse violations;

Advocate to raise the state tax on alcohol to reduce youth consumption.

Judge Earnest drafted a bill to revoke, suspend or delay underage licensure for use of fake IDs. Delegate Jeannie Haddaway-Riccio introduced House Bill 251. Gary Pearce of Talbot Partnership testified before the House Judiciary Committee on behalf of Bill 251 on 2/18/09.

ASSESSMENT RECOMMENDATIONS

Publish an annual Blue Ribbon Commission Oversight Committee Status Report;

Track student self-reported substance abuse data reported in Maryland Adolescent Surveys (MAS);

Survey youth to investigate where alcohol and other drugs are used and how they are obtained.

The Status Report was published and distributed in 2009. MAS Data (2007) report presented to Talbot County citizenry 1/13/09 and additional presentations are scheduled. Ongoing focus groups planned. Talbot Partnership Youth Coalition formed.

BLUE RIBBON COMMISSION OVERSIGHT COMMITTEE

An additional recommendation was that the Talbot County Council appoint an Oversight Committee (BRCOC) to supervise progress with the BRC initiatives. The Talbot County Council agreed. In March 2008, a group of nine community members and four non-voting agency members joined this effort to reduce substance abuse in the community. Members include:

- Hugh Dawkins, *Parent, Chair*
- Blenda Armistead, *Parent*
- Christine Clarke, *Shore Health System*
- Derrick Daly, *Community Activist*
- The Honorable Broughton Earnest, *Talbot County Circuit Court*
- Cory Fink, *Parent*
- Gloria Farrare, *Talbot County Board of Education*
- Kathy Foster, *Health Officer, Talbot County Health Department (alternate)*
- Mike Hiner, *Businessman/Community Activist*
- John LaFerla, MD, *Deputy Medical Health Officer, Talbot County Health Department*
- Glen Plutschak, *Talbot County Drug Courts, (alternate)*
- Claudia Reyes, *Shore Health System*
- Hilary Spence, *Parent*

Every other month, the BRCOC hears reports from facilitators charged with managing progress on the 13 initiatives. They discuss the status of current efforts, they applaud successes, brainstorm strategies around roadblocks and assist with efforts to carry out those strategies. Twice a year, the BRCOC reports back to its own "oversight committee," the Talbot County Council, which maintains an active interest in and supports substance abuse prevention and reduction efforts in Talbot County.

OTHER COMMUNITY COLLABORATIONS

Local Drug and Alcohol Abuse Council

The Talbot County Local Drug and Alcohol Abuse Council (LDAAC) pre-dates BRC activities by approximately two years. It is a state-mandated planning and oversight board charged with evaluating addiction prevention, intervention and treatment capacities—especially with respect to criminal justice issues. The Council is further charged with developing and submitting regular plans to the Governor regarding the County's progress, and coordinating efforts with the State Drug and Alcohol Abuse Council.

LDAAC membership offers supportive programming agencies (including the substance abuse treatment community, social services, Circuit Court Drug Courts, mental health services, family therapy providers, and job skills training providers) the special benefit of regular interaction, collaboration and communication to build and strengthen the Talbot County prevention network.

For more information, contact Chairman Gary Pearce at 410-819-8067 or gpearce@talbotpartnership.org.

Talbot Partnership for Alcohol and Other Drug Abuse Prevention

For 18 years Talbot Partnership---a 501(c)3 prevention coalition---has encouraged the community to recognize Talbot County's community substance abuse problem and effect solutions by building a positive community culture and implementing policies and early intervention programs. Through the combined efforts of many coalition partners, Talbot Partnership strives to make a difference in community norms surrounding substance abuse, with the goal of realizing a community environment where youth and adults lead healthy, safe and productive lives.

Since 2006, with other Talbot County agencies including the Health Department, Public Schools, and the Circuit Court, Talbot Partnership has worked to help initiate and support the Blue Ribbon Commission (BRC). Talbot Partnership continues to provide the BRC Oversight Committee staff assistance, as well as to engage in efforts to implement BRC-recommended and County Council-approved intervention strategies.

For more information, contact Talbot Partnership Executive Director Gary Pearce at 410-819-8067 or gpearce@talbotpartnership.org.

Talbot County Drug Courts

Nationally, drug offenses overwhelm judicial systems in record proportions; Talbot County is no different. Statistics provided in 2007 by local offices of the State of Maryland Division of Parole and Probation record over 50% of District Court criminal cases, 62% of Circuit Court criminal cases and 73% of local parole cases noting special conditions for drug and alcohol therapy.

In response, Drug Courts have been developed to help keep some addicted individuals off exploding prison rolls, safe and sober in their communities, and getting help in treatment programs to address their addictions. Non-violent substance-abuse offenders are thus diverted from incarceration into coordinated supportive programming, where they are subject to strict court monitoring and community supervision. Here, the Drug Court participant undergoes an intensive regimen of substance abuse treatment, case management, drug testing, supervision and monitoring, and immediate sanctions and incentives. At the same time, the offender reports to regularly scheduled status hearings before a judge experienced in the Drug Court model. Over time, evidence has proven that such additional services as mental health treatment, trauma and family therapy, and job skills training increase the participants' overall success.

Talbot County began using these special dockets as early as 2004, initially to handle cases involving addicted juveniles through the Juvenile Drug Court. Family and Adult Drug Courts soon followed.

For more information, contact Talbot County Drug Court Coordinator Glen Plutschak at 410-770-6823 or Glen.Plutschak@mdcourts.gov.

HOW PARENTS CAN AND DO MAKE A DIFFERENCE

Parents, most especially, are called to protect their children against substance abuse. They cannot, however, do this alone. Talbot County needs to construct a supportive scaffolding to protect its teens—its "adults under construction"—from their natural risk-taking, sensation-seeking tendencies. Through such integrated community efforts, schools, churches, community and society can complement and reinforce each other to facilitate good decision-making, to mitigate risk factors, and to buffer against potentially destructive outside influences that draw adolescents to substance abuse. This integrated, aware approach to combating underage substance abuse, *individually and environmentally,* can help children and young people to function in a more mature way as they grow and develop.

As expressed by the 2007 MAS data, parenting practices experienced by student users and student non-users can be key protective factors. Ninety percent of Talbot County public school students participating in 2007 MAS have indicated that higher levels of responsible parent involvement correlate dramatically with non-abusing students. Student answers to simple questions about parental supervision are predictive of their substance abuse. Are they at risk, or does their supportive family (a preventive asset) protect them?

A profound effect could be realized by parents asking themselves such basic questions as: Do I make sure my teen is awake in time for school? Do I worry if my teen is late coming home from school? Do I firmly enforce assigned punishments? Do I maintain parental authority and enforce limits, or does my

teen always get his or her own way? Do I have rules about who my teen spends time with, and enforce them? Am I available to talk with and listen to problems about drugs or otherwise? Am I available to eat a daily family meal? Am I available to enjoy one family activity per week?

Implied in these questions is a substantially "hands on" parenting style at odds with the widely-held notion that parents give their teens more and more freedom until at last they can leave home, essentially adults. However, in light of the highlights in this Status Report about the substance abuse risk our seniors in particular face, parents need to be more involved than they are. Talbot County adolescents need "hands on" supervision, companionship, and lessons about how to be adults, and how important it is to be happy, healthy and productive. Handicapped in a sense by their lack of world experience and their lack of developmental maturity related to the perception of risk, teens need trusted help making sense of risk-related experiences.

2007 Talbot County Public School Students Perception of Using Substances as Very Dangerous

The 2007 MAS data reveals a steady decrease in perception of risk as students age. With respect to the use of alcohol, marijuana and cigarettes—the top three abused substances of choice—Talbot youth in the 8th grade express a certain perception of danger. This perception declines considerably, in some cases by nearly half, by senior year. How shall we account for the change? It appears Talbot teens have replaced the source of the original healthy "substances are dangerous" message with beliefs they find more compelling. Are they influenced by advertising, entertainment, peer pressure? Certainly. Another likely factor may be their own experimentation or that of their friends, the school leaders, and beauties, who use and seem no worse for it. The truth is the answer is very complex, and with limited experience the adolescent is virtually unable to see the problem with substance abuse.

Finally, 2007 MAS data also tellingly notes that "substance abuse of adolescents is much like that of the adult population." In fact, alcohol is deeply entrenched in our social and cultural norms and daily adult behaviors. A sampling of measures indicates Talbot County's problem with adult abuse of alcohol:

- *Per capita adult consumption of wine (over 7 gallons per person, per year) is the highest in the state,* Maryland Alcohol and Tax Report, FY 2008;

"Parents shouldn't be surprised to see their children behave in ways the parents themselves are modeling. If parents use alcohol or drugs including steroids, or if parents themselves drink and drive, why should their children act any different? It's time for parents to take responsibility for their roles in the high rates of underage drinking and drug abuse we're experiencing in Talbot County, by modeling healthy behaviors."

Rick Towle, Executive Director, Talbot County Parks & Recreation

- *Adult binge drinking rate is the 3rd highest in Maryland,* Maryland State Department of Health and Mental Hygiene (DHMH) and the Centers for Disease Control and Prevention (CDC) 2006;
- *Adult hospital in-patient discharge rate for alcohol-related diagnoses is 20% higher than the state average,* Health Services Cost Review Commission (HSCRC) 2004; and
- *Alcohol-induced death rate leads all of Maryland's 24 jurisdictions,* Vital Statistics Administration, DHMH 2006.

Upon reviewing this and similar data, the Talbot County Blue Ribbon Commission observed that Talbot County's substance abuse problem is not limited to its children, who are simply acting out what they see at home. A trusted adult to help sort out the apparent contradictions between what *appears* to be true and what the truth is, and what the real risks of substance abuse are can make all the difference in an adolescent's life. Healthy role modeling may be the most effective protective factor of all.

Useful starting places for more information are: www.theantidrug.com; and www.timetotalk.org.

How Can You Help?

- Spend time with your kids.
- Volunteer with local youth organizations.
- Donate funds to the service organizations committed to this cause.
- Advocate for public policies affecting sale and use of alcohol.
- Call Talbot TipLine to report underage drinking and drug parties or other unsafe behaviors.

"We would make the call to keep teens safe."

Report underage drinking parties.
Call the Talbot TipLine at (410) 820-4003 or local police.

All reports are anonymous.

TALBOT FAMILY NETWORK

LOCAL SUBSTANCE ABUSE RESOURCES

TurnAround drug testing — 410-819-5900

Free, prompt drug testing, assessment and treatment of teens.

Call the Talbot County Health Department Addictions Program.

Parent education — 410-819-8067

Guiding Good Choices is a *non-remedial,* advanced four-session program for families with 4th through 8th graders.

Call the Talbot County Prevention Office at Talbot Partnership, 8 Goldsborough Street, Suite 203, Easton, to schedule a program.

Help-line — 410-770-4848

Speak with a social worker if you have a concern about a child.

Get information and referrals from the Department of Social Services.

Information and materials — 410-819-8067

Free books and pamphlets on raising drug-free youth are available from the Talbot County Prevention Office.

Visit **www.antidrug.com, www.family.samhsa.gov,** and **www.timetotalk.org** for information about drugs and advice for parents.

Encourage your children to visit **www.freevibe.com** for stories, videos, facts, games, celebrity advice, support groups and more.

Talbot TipLine — 410-820-4003

Report underage drinking/drugging parties on this anonymous tip line.

Talbot County Liquor Inspector — 410-770-8019

Report liquor law violations.

Law enforcement assistance — Call your local police to:

Report underage drinking/drugging parties/neighborhood disruptions.

Report impaired driving.

Report sales of alcohol to minors or drug transactions.

Let the police know when you will be out of town.

Easton Police Department	*410-822-1111*
Maryland State Police	*410-822-3101*
Oxford Police Department	*410-226-5650*
St. Michaels Police Department	*410-745-9500*
Talbot County Sheriff's Office	*410-822-1020*
Trappe Police Department	*410-476-5117*

Alcohol self test — www.rethinkingdrinking.niaaa.nih.gov

Check if your drinking patterns are safe, risky or harmful.
Confidential and anonymous.