North Dakota Strategic Prevention Framework State Incentive Grant (SPF SIG)

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Prevention Strategies to Address

Economic/Retail Price
**Description of strategy**

These interventions increase the price for alcohol products through municipal, state, or federal legislation that raises the excise tax on alcohol. Alcohol excise taxes affect the price of alcohol, and are intended to reduce alcohol-related harms, raise revenue, or both. Alcohol taxes are implemented at the state and federal level, and are beverage-specific (i.e., they differ for beer, wine and spirits). These taxes are usually based on the amount of beverage purchased (not on the sales price), so their effects can erode over time due to inflation if they are not adjusted regularly (Guide to Community Preventive Services, 2007). Such increases make the use of alcohol products less attractive to young people who have limited incomes and a variety of ways to spend their money (Guide to Community Preventive Services, 2007).

In North Dakota, tax rates are imposed according to the following schedule:
- Beer in bulk containers $.08 (.021 per liter) per wine gallon
- Beer in bottles and cans $.16 (.042 per liter) per wine gallon
- Wine, including sparkling wine, containing less than 17% alcohol per volume .52 (.132 per liter) per wine gallon
- Wine containing 17%-24% alcohol by volume .60 (.159 per liter) per wine gallon
- Distilled spirits 2.50 (.66 per liter) per wine gallon
- Alcohol 5.04 (1.07 per liter) per wine gallon.

(N.D.C.C. §5-03-07 - Imposition of Tax Rate, 2013)

**Discussion of effectiveness**

*Alcohol*

Evidence suggests that increasing the unit price of alcohol is effective in reducing excessive alcohol consumption, adolescent drinking, alcohol-impaired driving, and mortality from liver cirrhosis (Elder et al., 2010).

**Intervening Variable**

- Retail Pricing
- Retail availability
- Social availability
- Law Enforcement
- Community norms
- Promotion & media

**References for description of strategy**


**Evidence base**


**Further reading**


Restrictions on Alcohol Discount Promotions

Description of strategy

Drink promotions such as happy hours, Free beverages (e.g., Ladies drink free), additional servings, reduced price (e.g. 2 for 1), unlimited beverages (e.g., $10 all you can drink), increased volume, prizes, etc. may contribute to excessive and rapid consumption of alcohol. These practices include price reduction on certain drinks for a specific time period and theme nights where certain people receive free drinks. Happy hour restrictions aim to reduce alcohol availability through restriction of these promotional activities (WyPTAC, 2009).

Currently, North Dakota does not have state law restricting alcohol discount promotions, however, local ordinances restricting or prohibiting these practices can be passed at the local level.

Discussion of effectiveness

Alcohol
The limited evidence on the effectiveness of happy hour restrictions is varied. One study conducted in the Netherlands found higher levels of adolescent drinking when happy hour discounts were available (van Hoof, van Noordenburg, & Jong, 2008). Another study conducted at colleges in the United States did not find significant differences in levels of underage drinking when happy hours were restricted (Wechsler, Lee, Nelson, & Kuo, 2002). An early observational study did not find a significant difference in alcohol consumption before the happy hour ban compared to after the implementation of the happy hour ban (Smart & Adlaf, 1986).

References for description of strategy


Evidence base


Further reading

Prevention Strategies to Address Retail Availability
Description of Strategy

Employees at retail outlets that sell alcohol are responsible for checking the identification of customers who attempt to purchase alcohol. Age identification policies are written guidelines at stores, bars, and restaurants that provide employees with instructions on checking age identification of customers attempting to buy alcohol. Consistent use of these guidelines may reduce illegal sales of alcohol to underage youth by encouraging employees to refuse to sell to any customer who does not have a valid ID showing they are of age and by increasing employees detection of fake IDs (University of Minnesota Alcohol Epidemiology Program, 2009).

In North Dakota, retail employees can seize a form of identification if they have reason to believe that the ID has been altered, falsified, or is being used unlawfully to obtain alcoholic beverages.

(N.D.C.C. § 5-01-08.3, Proof of age—Seizure of false identification, 2013).

Discussion of Effectiveness

Alcohol

Evidence from studies that evaluated multicomponent college campus alcohol prevention programs found a significant reduction in alcohol access. Checking ID for alcohol sales was a part of the program (Toomey, 2001; Wagenaar, 2000). Evidence is insufficient to evaluate checking ID for alcohol sales as an independent prevention strategy.

Intervening Variables

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References for description of strategy


Evidence base


Further reading

COMPLIANCE CHECKS OF ALCOHOL RETAILERS

Description of strategy

A compliance check is a tool used to identify alcohol establishments that sell to underage youth and to increase retailer compliance with prohibitions on alcohol sales to minors. The practice of conducting compliance checks can be mandated by a local ordinance. Typically the ordinance will outline the standards for conducting the checks, the people or agencies responsible for conducting the checks, and the penalties for establishments, servers, and sellers who illegally sell or serve alcohol to underage youth. The practice also may be voluntarily implemented by law enforcement or licensing authorities. Compliance checks have two general purposes. The first is to enforce state criminal statutes and/or local administrative ordinances. The second purpose is to identify, warn, and educate alcohol establishments that serve or sell alcohol to underage youth.

Compliance checks are typically implemented by a standard procedure. For example, initially alcohol licensees are informed that compliance checks will occur at various times throughout the year and about potential penalties for selling alcohol to underage youth. During the check, an enforcement agent (police officer or other authorized person) waits outside the premises while a person under age 21 attempts to purchase or order an alcoholic beverage. If the alcohol establishment sells alcohol to the young person, the enforcement agent issues a citation either to the seller/server or to the establishment. The police officer may charge the server or seller who sold the alcohol (when compliance checks are used to enforce state laws governing servers and sellers), or the officer may issue an administrative citation, which is imposed upon the alcohol license holder rather than the individual server or seller (when compliance checks are used to enforce local administrative ordinances). Because administrative charges are easier, faster, and less expensive to prosecute, they can be the best option—and in some communities the only option—for penalizing alcohol establishments (University of Minnesota Alcohol Epidemiology Program, 2011).

Discussion of effectiveness

Alcohol

Alcohol compliance checks as part of a multicomponent intervention were generally found to be effective at reducing underage sales (Wagenaar, Toomey, & Erickson, 2005; Saltz, Welker, Paschall, Feeney, & Fabiano, 2009).

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In North Dakota, compliance check operations are permitted, and for these purposes, a person under the age of 21 can enter a licensed establishment.

(N.D.C.C. § 5-01-08, Individuals under 21 years of age prohibited from entering licensed premises, 2013).
COMPLIANCE CHECKS OF ALCOHOL RETAILERS

References for description of strategy

Evidence base
Wolfson, M., Wagoner, K., DuRant, R., Champion, H., Ip, E., Mccoy, T., ... Martin, BA. (2007). Impact of a group-randomized trial to reduce high risk drinking by college students. Alcoholism: Clinical and Experimental Research, 31(6 Suppl. 2), 115A.

Further reading
Conditional Use Permits/Land Use Ordinances for Alcohol Outlets

Description of strategy

Local regulatory authority can identify the appropriate locations within their jurisdiction where alcohol may be sold or consumed and how it may be distributed and marketed by way of conditional use permits and land use ordinances (Ashe, Jernigan, Kline, & Galaz, 2003). Conditional use permits, sometimes called “special use permits” or “special exceptions,” are a refinement of zoning powers whereby the government makes exceptions for specific uses of land otherwise prohibited by general zoning controls as long as the property owner meets certain conditions (Fulton, 1999). Limiting the number of local conditional use permits for alcohol-related events reduces the retail availability of alcohol within a community. This strategy relies on local regulatory and land use powers to decrease retail availability of alcohol (Mosher & Reynolds, 1999).

In North Dakota, local governing bodies establish rules and regulations for event permits. State law does outline minimum conditions that must be followed for persons under the age of 21 (N.D.C.C. § 5-02-01. State and local retail license required, 2013).

**Alcohol**

References for description of strategy


Evidence base


Further reading


Discussion of effectiveness

A 2003 review of land use planning literature suggests that land use regulations are an effective public health advocacy tool to lessen negative effects of alcohol retail outlets in neighborhoods but the review does not provide a quantitative assessment of the effectiveness (Ashe, Jernigan, Kline, & Galaz, 2003). A study looking at eight local alcohol policies, including conditional use permits, found that none of the local alcohol-policy ratings were associated with adolescent drinking, but overall outlet density was positively related to alcohol use and heavy drinking (Paschall, MGrube, Thomas, Cannon, & Treffers, 2012).

While there is limited evidence evaluating the effectiveness of conditional use permits and land use ordinances on alcohol-related outcomes, they can reduce the retail availability of alcohol (Mosher & Reynolds, 1999).

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WYSAC, University of Wyoming

Catalog of Environmental Prevention Strategies
COPS IN SHOPS PROGRAMS

Description of strategy
A “Cops in Shops” program places undercover law enforcement officers, or alcohol beverage control (ABC) agents or inspectors in off-premise stores that sell alcohol. Officers issue citations or make arrests for underage purchase, attempts to purchase, and related violations, including citations for adults who purchase alcohol for underage youth, according to the current law of the jurisdiction where the program is in operation. Training is provided to both law enforcement officials and retailers.

In this program, law enforcement officers and inspectors not only cite or arrest underage youth who attempt to purchase or purchase alcohol illegally, the program also emphasizes the use of publicity as a continuous deterrent to potential underage buyers. Store posters, stickers for cold case storage areas, brochures, posters on buses or in subways, buttons, and television public service announcements remind young people that if they attempt to buy alcohol illegally, they may be dealing with an undercover law enforcement officer or alcohol inspector.

“Cops in Shops” was originally developed in Delaware, but in recent years the program has been enhanced, packaged, and promoted nationwide by the Century Council, a national, not-for-profit organization dedicated to fighting drunk driving and illegal underage drinking (National Highway Traffic Safety Administration, 2001).

Discussion of effectiveness

Alcohol
No evidence regarding the effectiveness of "Cops in Shops" programs was located.

Intervening Variables

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References for description of strategy

Further reading

**Description of strategy**

Beverage servers' legal liability can be increased through implementation of dram shop liability laws. Dram shop liability laws establish a drinking establishment's potential financial liability for serving alcohol to an intoxicated or underage person who later causes injury to a third party. Examples of such harms may include death, injury, or other damages as a result of an alcohol-related car crash. These laws may apply to the owner of the establishment or the individual server. Some states impose restrictions on dram shop liability by capping the amount of compensation allowed in suits, by increasing the evidence required to demonstrate responsibility, or by imposing statutes of limitations (Guide to Community Preventive Services, 2010).

North Dakota’s Dram Shop law states, “...every spouse, child, parent, guardian, employer, or other person who is injured by an obviously intoxicated person has a claim for relief or fault...against any person who knowingly disposes, sells, barters, or gives away alcoholic beverages to a person under twenty-one years of age, an incompetent, or an obviously intoxicated person...” (N.D.C.C. § 5-01-06.1, 2013).

**Discussion of effectiveness**

**Alcohol**

Evidence generally supports increasing beverage servers' legal liability for preventing and reducing alcohol-related harms (Guide to Community Preventive Services, 2010). One study noted that increasing liability was related to lowered self-reported probability of heavy episodic drinking and drunk driving among all drinkers but did not reduce the probability of self-reported, heavy episodic drinking and drinking and driving among heavy drinkers (Stout, Sloan, Liang, & Davies, 2000).

**Intervening Variables**

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**References for description of strategy**


**Evidence base**


**Further reading**

Limit and Restrict the Location and Density of Alcohol Retail Outlets

Description of strategy
Alcohol outlet density indicates the number of physical locations where alcohol is sold per population or geographic area (such as a square mile, census tract, or city block). It is often regulated at the local level through zoning and business licensing. State alcohol control agencies can also stipulate density levels. Regulations can either reduce alcoholic beverage outlet density or limit the increase of alcoholic beverage outlet density in an area (Guide to Community Preventive Services, 2007). Regulating the number of alcohol outlets per unit of area may decrease the retail availability of alcohol, which may lead to a decrease in excessive consumption of alcohol and its related harms.

In North Dakota, current state law does not regulate alcohol outlet density however, restrictions can be implemented locally.

Discussion of effectiveness
Alcohol
Evidence strongly suggests restricting the location and density of alcohol retail outlets is an effective local policy to decrease excessive alcohol consumption, alcohol-related crashes, and hospitalizations (Guide to Community Preventive Services, 2007).

References for description of strategy

Evidence base

Further reading
The Minimum Legal Drinking Age (MLDA) specify an age below which purchase or public consumption of alcoholic beverages are illegal. In the United States the MLDA is 21 –years-old for alcoholic beverages.

Minors obtain alcohol from two major sources: retail sources and social sources, such as acquaintances, relatives, and friends. Raising the MLDA could reduce youth access to alcohol in the retail market.

**Alcohol**

Evidence supports the effectiveness of maintaining a minimum age of purchase for alcohol for reducing underage use. Evidence also found that MLDA is related to alcohol-related traffic crashes; traffic fatalities go up as the drinking age is lowered (Guide to Community Preventive Services, 2000; McCartt, Hellinga, & Kirley, 2010; Wagenaar & Toomey, 2002).

**References for description of strategy**


**Further reading**


Minimum Age of Seller/Server Requirements

Description of strategy

Age of seller/server requirements establish the minimum age necessary for servers and clerks at alcohol establishments to legally serve or sell alcohol. State laws specify this requirement. In most states, seller/servers of alcohol must be at least 18 years old but younger employees may be allowed to stock coolers with alcohol, bag purchased alcohol, or clear alcoholic beverages from tables. Minimum age of seller/server policies may reduce the likelihood that underage people will obtain alcohol from peers working at alcohol establishments. (University of Minnesota Alcohol Epidemiology Program, 2009).

In North Dakota, the minimum legal age to serve alcohol is 21 except in restaurants where 18-20 year olds may serve and collect money for alcoholic beverages (beer, wine, or spirits) if under direct supervision of an individual (manager or supervisor) who is of legal drinking age (N.D.C.C. § 5-02-06, 2013).

Discussion of effectiveness

Alcohol
Effectiveness of minimum age of seller/server requirements is unclear. Evidence is mixed for alcohol-related outcomes; two studies found that the age of server was not associated with sales of alcohol to underage youth. Another study found alcohol use and underage student binge drinking rates were significantly lower for states that have laws establishing 21 as the minimum age to sell alcohol (Britt, Toomey, Dunsmuir, & Wagenaar, 2006; Freisthler, Gruenewald, Treno, & Lee, 2003; Wechsler, Lee, Nelson, & Kuo, 2002).

Intervening Variables

- Retail Pricing
- Retail availability
- Social availability
- Law Enforcement
- Community norms
- Promotion & media

References for description of strategy


Evidence base


Further reading

**Regulations on Home Delivery of Alcohol**

**Description of strategy**

One way underage drinkers obtain alcohol is through home delivery services. Home delivery alcohol orders are not typically made in person which could allow a minor to purchase alcohol without providing identification. Home delivery policies place restrictions on liquor stores delivery of alcohol to personal residences, such as restricting the days and times of delivery. Policies may also completely ban the delivery of alcohol to residential addresses. Restricting or banning home deliveries can be part of a local ordinance or a state law (University of Minnesota Alcohol Epidemiology Program, 2011).

In North Dakota, direct sales/shipments of alcohol from producers to consumers for personal use are permitted for beer, wine, and distilled spirits (restricted quantities) provided:

1. Producer/shipper has obtained a State permit;
2. Shipping label statement requirement: “Signature of person age 21 or older required for delivery”
3. Follow specific reporting requirements for tax purposes.

However, age verification requirements are not outlined.

(N.D.C.C. §5-01-16 - Direct Sale from out-of-state person to consumer, 2013)

**Discussion of effectiveness**

**Alcohol**

There is insufficient evidence to evaluate the effects of restricting home delivery of alcohol on underage alcohol use. A single published study was found regarding home delivery of alcohol. The study identified home delivery as a potential source of alcohol for underage drinkers but did not evaluate the effectiveness of restricting home delivery (Fletcher, Toomey, Wagenaar, Short, & Willenbring, 2000).

**Intervening Variables**

- Retail Pricing
- Retail availability
- Social availability
- Law Enforcement
- Community norms
- Promotion & media

**References for description of strategy**


**Evidence base**


**Further reading**

RESponsible BEverage SERvice TRAINing

Description of strategy

Responsible Beverage Service Training programs give owners, managers, and staff of establishments that serve alcohol knowledge and skills to help them serve alcohol responsibly and fulfill the legal requirements of alcohol service. Training programs for managers and owners most often provide guidance on implementation of service policies and practices. Training programs for servers may address: checking IDs, serving practices that reduce the likelihood of excessive consumption, identifying and responding to early signs of excessive consumption (for example, rapid consumption), identifying intoxicated patrons and refusing service to them, and intervening to prevent intoxicated patrons from driving (Guide To Community Preventive Services, 2010).

In North Dakota, current state law does not require Responsible Beverage Service Training however, several communities have local ordinances mandating this type of training.

Discussion of effectiveness

Alcohol

Responsible Beverage Service Training was found to be an effective strategy for reducing alcohol consumption as part of multi-component intervention (Birdthistle & Buka, 1999; Holder et al., 2000). However, there is insufficient evidence to determine the effectiveness of Responsible Beverage Service Training at reducing excessive alcohol consumption and related harms at the community level (Guide to Community Preventive Services, 2010; Ker & Chinnock, 2008; Stockwell, 2001).

Other names/examples: TIPS (Training for Intervention Procedures)

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References for description of strategy


Evidence base


Further reading


TIPS (website). Available at: http://www.gettips.com/index.shtml

Prevention Strategies to Address

Social Availability
**Description of strategy**

Alcohol restrictions at community events include policies that control the availability and use of alcohol at public venues, such as concerts, street fairs, and sporting events. Such restrictions can be implemented voluntarily by event organizers or through local legislation. These restrictions may reduce alcohol-related problems such as traffic crashes, vandalism, fighting, and other public disturbances.

Alcohol restrictions at these events can range from a total ban on alcohol consumption to the posting of warning posters that detail the risks associated with consuming alcohol. The following is a list of policies that may be implemented to restrict the availability and use of alcohol by underage youth and obviously intoxicated attendees at community events:

**Planning and set-up:**
- establish non-drinking areas for families and youth;
- establish designated drinking areas where underage youth are not allowed;
- limit alcohol sponsorship;
- have alcohol-free days/nights; and,
- establish enforcement procedures for all policies.

**Alcohol providers and sellers:**
- require alcohol license holder to have liability insurance;
- require responsible beverage service training for alcohol sellers and event coordinators;
- require alcohol sellers to be at least 21 years old;
- require a manager to be on duty at the alcohol booth at all times;
- prohibit drinking by servers; and,
- require signs indicating the illegality of providing alcohol to minors and obviously intoxicated persons.

**Discussion of effectiveness**

**Security:**
- establish procedures for handling intoxicated drinkers;
- require that security staff be adequately trained; and,
- ban alcohol consumption in parking lots and monitor the lots.

**Food/beverage:**
- limit cup size to 12 ounces;
- use cups for alcoholic beverages that are easily distinguishable from non-alcoholic beverage cups;
- limit number of servings per person per purchase to one or two at a time;
- stop serving alcohol at least one hour before closing; and,
- sell food and non-alcohol drinks and provide free water (University of Minnesota Alcohol Epidemiology Program, 2009).

**Alcohol**

The evidence of effectiveness is varied for alcohol restrictions at community events, although there is some evidence to suggest these strategies are effective in reducing underage access to alcohol (Toomey, Erickson, Patrek, Fletcher, & Wagenaar, 2005).

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ALCOHOL RESTRICTIONS & POSSESSIONS OF ALCOHOL AT COMMUNITY EVENTS

References for description of strategy

Evidence base

Further reading
**ALTERNATIVE EVENTS FOR YOUTH**

**Description of strategy**

This strategy focuses on providing alternative alcohol-free activities on "high risk nights," such as after prom or after graduation. Examples of alternative activities include open gym and movies held at school, dances, ski trips, and other recreational activities. Youth involvement in planning alcohol-free activities may be an effective way to create well attended events, as well as prevent alcohol use among youth (Komro et al., 1996).

**Discussion of effectiveness**

*Alcohol*

The evidence of effectiveness is varied with regard to alternative events for youth and alcohol-related outcomes, although evidence suggests this strategy may be effective at reducing problematic drinking and driving after drinking as part of a multi-component program on college campuses (Hingson et al., 1996; Saltz, Welker, Paschall, Feeney, & Fabiano, 2009).

**Intervening Variables**

- Retail Pricing
- Retail availability
- Social availability
- Law Enforcement
- Community norms
- Promotion & media

**Other names/examples:** RAD; ROAD Activities; W.A.T.C.H.

**References for description of strategy**


**Evidence base**


**Further reading**


Description of strategy

Keg registration laws require wholesalers or retailers to attach a tag, sticker, or engraving with an identification number to kegs exceeding a specified capacity (two to eight gallon minimum depending on the state). At purchase, the retailer records identifying information about the purchaser (for example, name, address, telephone number, driver's license). A refundable deposit may also be collected for the keg itself, the tapper mechanism used to serve the beer, or both. The deposit is refunded when the keg and/or tapper are returned with the identification number intact. In some states, keg laws specifically prohibit destroying or altering the ID tag and provide penalties for doing so. Other states make it a crime to possess an unregistered or unlabeled keg (Alcohol Policy Information System, 2011).

According to North Dakota state law on Keg Registration:

- A keg is defined as greater than 6 gallons
- Information collected includes the date of the sale, purchaser's name and address which is verified by a government-issued ID, and registration number the keg.
- Records must be retained for a period no less than 6 months.
- Law enforcement officers are permitted to inspect the records.

State law does not require:

Discussion of effectiveness

- Warning information to purchaser
- Deposit
- Provisions addressing disposable kegs.

_N.D.C.C. §5-02-07.2 - Sale of beer in kegs—Registration and marking required, 2013_

Alcohol

The evidence of effectiveness from the literature generally does not support beer keg registration as an effective strategy to reduce beer consumption, adolescent binge drinking, or adult driving after drinking (Ringwalt & Paschall, 2011; Wechsler, Lee, Nelson, & Kuo, 2002). There is some evidence to suggest this strategy may be effective for reducing drinking after driving and alcohol-related traffic crashes when included as part of a multi-component program (Hingson et al., 1996).

Intervening Variables

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Other names/examples: Keg registration; Keg tapping laws

References for description of strategy


Evidence base


Further reading


RESPONSIBLE EVENT ASSESSMENT

**Description of strategy**

Responsible event assessment uses an assessment tool and observers to determine how controlled alcohol is at an event and how much drinking occurs in various venues of the event. By accurately tracking drinking at community events or festivals, organizers can determine what policies and controls are necessary to prevent underage drinking and illegal alcohol sales at future events.

**Discussion of effectiveness**

*Alcohol*

While findings from the literature are inconclusive regarding the effectiveness of responsible event assessment to limit the likelihood of illegal alcohol sales and the prevention of alcohol-related risks at community events, there is some evidence to suggest this strategy can promote enhanced collaboration between planners and preventionists, and may also influence the adoption of written policies to improve festival/event practices (Toomey, Erickson, Patrek, Fletcher, & Wagenaar, 2005).

**Intervening Variables**

- Retail Pricing
- Social availability
- Law Enforcement
- Community norms
- Promotion & media

**References for description of strategy**

**Evidence base**


**Further reading**

The "Shoulder Tap" is a method minors use to obtain alcohol from social sources. In this method the minor will stand outside of an alcohol establishment and ask an adult to buy them alcohol by tapping the adult’s shoulder or otherwise signaling the adult. "Shoulder Tap" enforcement programs enlist a minor decoy, under the direct supervision of law enforcement officers, to solicit adults outside of liquor stores to buy the minor decoy alcohol. Any person seen furnishing alcohol to the minor decoy is arrested (either cited or booked) for furnishing alcohol to a minor (National Association of Governors' Highway Safety Representatives, 2001).

Limited evidence suggests that "Shoulder Tap" enforcement programs are effective as part of a multi-component strategy for alcohol outcomes (Spera, Barlas, Szoc, Prabhakaran, & Cambridge, 2012). More evidence is needed to evaluate “Shoulder Tap” programs as stand-alone prevention strategy.

References for description of strategy

Evidence base


Further reading
California ABC - Shoulder Tap Program (Web page). (n.d.). Available at: http://www.abc.ca.gov/programs/Shoulder_tap.html


**SOCIAL HOST LIABILITY**

**Description of strategy**

Under social host liability laws, adults who serve or provide alcohol to minors or persons who are obviously intoxicated can be held liable if a person who is provided alcohol is killed or injured, or kills or injures another person. In some states, social host liability is covered under dram shop laws.

Dram shop liability refers to a drinking establishment’s potential financial liability for serving alcohol to an intoxicated or underage person who later causes injury to a third party. However, dram shop laws normally only cover commercial service and not private parties.

Social host laws vary from state-to-state. Some state laws may only target those who provide alcohol to underage youth and do not pertain to intoxicated persons (University of Minnesota Alcohol Epidemiology Program, 2009).

North Dakota’s Dram Shop addresses social host liability but has limitations in that injury must occur in order to pursue damages.

(N.D.C.C. §5-01-06.1 - Claim for relief for fault resulting from intoxication, 2013)

**Discussion of effectiveness**

**Alcohol**

Evidence is unclear on the effectiveness of social host liability laws. A study estimating the effect of social host laws involving minors found a reduction in drunk driving traffic fatalities (Dills, 2010). A similar study found laws allowing individuals to sue bars for the drunken behavior of their patrons were the policies most strongly associated with lower minor and adult fatality rates (Davies, Liang, Sloan, & Stout, 2000). However, a 2012 review of the research on current social host liability policies found that social host policies are variable and enforcement is not consistent. More research is required to develop a measure of policy strength (Wagoner et al., 2012).

**Intervening Variables**

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**References for description of strategy**


**Evidence base**


**Further reading**


### Description of strategy

The Texting Tipline is a method for individuals to provide information to law enforcement about youth drinking and parties. Hotlines for students, teachers, or parents concerned about underage drinking can be a valuable information source. People use a hotline to report a party location either before or during the event. Patrol officers then drive by the location to identify any problems. Providing an easy-to-remember phone number, ensuring caller anonymity, and staffing the hotline with non-police personnel increase the likelihood people will call (Johnson, 2004).

### Discussion of effectiveness

**Alcohol**

Although there is limited evidence in the literature supporting the use of hotlines/tiplines as an effective prevention strategy, no causal link between the existence of hotlines/tiplines and improved outcomes has been established. Additional evidence does not provide support for the use of hotlines/tiplines (Harwood, Fabian, Erickson, & Wagenaar, n.d.).

### Intervening Variables

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### References for description of strategy


### Evidence base


### Further reading


Prevention Strategies to Address Enforcement
**Administrative Penalties**

**Description of strategy**

A license holder penalty is a legal mechanism that allows a local governing body to penalize alcohol license holders for failing to comply with state laws or local ordinances relating to sales of alcoholic beverages. It usually involves a monetary fine or the suspension or revocation of an alcohol license. It is administered by a local governing body (city council, county board), rather than the court system. It is imposed upon the license holder (in contrast to state laws that target the behavior of individual sellers and servers of alcohol). Administrative penalties are intended to provide an alternative enforcement mechanism that is more cost-effective, timely and practical than prosecuting servers and sellers through the court system. It provides an alternative to criminal prosecution, but does not necessarily replace criminal prosecution (some communities pursue both prosecution and administrative penalties). Administrative penalties can be written and passed as a local ordinance or state law (University of Minnesota Alcohol Epidemiology Program, 2011).

Local governing bodies by ordinance or resolution may regulate or restrict the operation of licensees (N.D.C.C. §5–02-09—Local regulations, 2013).

**Discussion of effectiveness**

**Alcohol**

There is limited evidence to evaluate the effectiveness of administrative penalties as an independent prevention strategy to prevent sale of alcohol to underage youth. Evidence suggests graduated administrative penalties work as an enforcement mechanism for compliance checks and responsible beverage service training (Mosher, Toomey, Good, Harwood, & Wagenaar, 2002). However, this evidence was based on qualitative analysis and did not provide quantitative results.

**Intervening Variables**

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**References for description of strategy**


**Evidence base**


**Further reading**


Description of strategy

The majority of states have laws that prohibit minors from purchasing, possessing, and/or using alcohol products. Of those states, over 75 percent enacted laws that impose sanctions upon minors who violate the purchase, use, and/or possession laws. Penalties vary by state and range from confiscation of the product to fixed or graduated monetary fines, participation in alcohol education programs or community service, suspension of driving privileges, and/or imprisonment (National Cancer Institute, n.d.).

North Dakota law prohibits minors from possessing alcohol if they are under the age of 21 years of age. A violation results in a class B misdemeanor and alcohol and drug education (N.D.C.C. §5-01-08. —Individuals under 21 years of age prohibited from using alcoholic beverages or entering licensed premises, 2013).

Discussion of effectiveness

Alcohol

Evidence on the effectiveness of applying appropriate penalties for minors in possession of alcohol suggests the presence of such laws is associated with lower numbers of alcohol-related crashes (Fell, Fisher, Voas, Blackman, & Tippetts, 2008).

Intervening Variables

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References for description of strategy


Evidence base

Impaired driving is one of the most often committed and deadliest crimes in the United States. Impaired driving includes operating a motor vehicle while affected by alcohol, legal, or illegal drugs, being too sleepy or distracted (such as talking or texting on a cell phone), or having a medical condition which affects your driving (National Highway Traffic Safety Administration, 2012). Laws aimed at reducing alcohol-related impaired driving include blood alcohol concentration limits and open container restrictions. These laws may be enforced through sobriety checkpoints or routine traffic stops. Enforcing impaired driving laws could reduce the number of alcohol-and drug-related car crashes.

In North Dakota, sobriety checkpoints are conducted and there is an enhanced penalty BAC law. (N.D.C.C. §39—08-01—Persons under the influence of intoxicating liquor or any other drugs or substances not to operate vehicle—Penalty, 2013)

http://www.dot.nd.gov/divisions/safety/penaltiesdrinkingdriving.htm

References for description of strategy

Evidence base


Further reading


ENHANCED ENFORCEMENT

Description of strategy
Enhanced enforcement programs initiate or increase the frequency of enforcement of alcohol related regulations. One common type of enhanced enforcement is an increase in retailer compliance checks for laws against the sale of alcohol to minors in a community. Retailer compliance checks, or “sting operations,” are conducted by or coordinated with local law enforcement or alcohol beverage control agencies, and violators receive legal or administrative sanctions. In addition, enhanced enforcement programs can be conducted as part of multi-component, community-based efforts. Enhanced enforcement programs may include strategies to increase perceived risk of detection by publicizing the increased enforcement activities and cautioning proprietors against selling alcohol to minors. For example, a media campaign may publicize the presence of a mobile alcohol command unit to deter drunk driving (Guide to Community Preventive Services, 2006).

Discussion of effectiveness
Alcohol
Evidence supports enhanced enforcement as an effective strategy for limiting underage alcohol purchases but further research is need to determine the effect on underage drinking (Guide to Community Preventive Services, 2006). A 2012 study found that a multi-component intervention that included enhanced enforcement did not reduce adolescents’ odds to initiate weekly drinking but did reduce risk to initiate drunkenness among adolescents who were already weekly drinkers (Schelleman-Offermans, Knibbe, Kuntsche, & Casswell, 2012). Evidence suggests enhanced enforcement is effective as part of a multi-component college campus strategy to reduce underage drinking (Saltz, Welker, Paschall, Feeney, & Fabiano, 2009; Weitzman, Nelson, Hang, & Wechsler, 2004).

Intervening Variables
Retail Pricing
Retail availability
Social availability
Law Enforcement
Community norms
Promotion & media

References for description of strategy

Evidence base

Further reading
Graduated driver licensing (GDL) regulations require new young drivers to advance through restrictive beginner and intermediate phases before they can achieve full licensure. The fundamental intent of these programs is to encourage new drivers to acquire critical driving skills and experience in low-risk and monitored settings. In 1996, the state of Florida implemented the first GDL program in the United States. Within just 6 years, 38 states had introduced similar policies (Dee, Grabowski, & Morrisey, 2005).


### Discussion of effectiveness

#### Alcohol

The evidence generally supports the effectiveness of graduated license policies as a prevention strategy to reduce alcohol-related outcomes. A 2012 study found restrictive GDL laws were associated with decreased driving after drinking alcohol and riding in a car with a driver who had been drinking alcohol among high school youth (Cavazos-Rehg et al., 2012). A Canadian study evaluated the effectiveness of a graduated drivers license law with a legal blood alcohol threshold at zero for new drivers on youth drunk driving rates. The study found a decrease in drunk driving rates for 16 to 17 year olds but the decrease was not significantly associated with implementation of the new law (Carpenter, 2006).

GDL regulations are strongly associated with a decrease in overall traffic crashes. A 2007 systematic review of studies on graduated license policies found that implementation of GDL regulations can reduce youngest drivers’ crash rates 20-40 percent (Shope, 2007).
GRADUATED DRIVER’S LICENSE POLICIES

References for description of strategy

Evidence base


Further reading


LOWER (<.08) BLOOD ALCOHOL CONCENTRATION LIMITS

Description of strategy
Currently all fifty states and the District of Columbia have per se laws stating that it is a crime to drive with a blood alcohol concentration (BAC) of .08 percent or higher. A per se impaired driving law indicates that drivers with a BAC of .08 percent or higher are intoxicated in the eyes of the law and no additional proof of impairment is necessary to obtain a conviction. Other countries, Australia for example, have implemented lower (.05 percent) BAC limits for adult drivers. In the United States, lower BAC laws only apply to drivers under the age of 21. The illegal BAC level for drivers under the age of 21 ranges from any detectable BAC to .02 percent. (Guide to Community Preventive Services, 2000).

North Dakota, the legal BAC for drivers over 21 is <.08 percent. There is a zero tolerance law (BAC measures .02 and above) for driver’s under the age of 21. (N.D.C.C. §39—08-01—Persons under the influence of intoxicating liquor or any other drugs or substance not to operated a motor vehicle, 2013)

Discussion of effectiveness
Alcohol
Evidence provides strong support for the effectiveness of lower blood alcohol concentration limits for reducing the rate of drunk driving and alcohol-related crashes, fatalities, and injuries (Fell & Voas, 2006). Five studies in a 2006 review by Fell & Voas found that lowering the BAC limit to .05 percent reduced the percentage of drivers with a BAC greater than .05 percent at roadside stops, decreased alcohol-related traffic crashes and fatalities, and reduced single nighttime vehicle crashes. Evidence also supports lowering the BAC limit for youth and inexperienced drivers to .02 percent or lower for reducing driving after drinking and alcohol-related crashes (Guide to Community Preventive Services, 2000).

Intervening Variables
| Retail Pricing |
| Retail availability |
| Social availability |
| Law Enforcement |
| Community norms |
| Promotion & media |

Further reading

References for description of strategy

Evidence base


Description of strategy

In recent decades, numerous states have implemented statutory provisions providing for the suspension and eventual revocation of drivers' licenses of those caught driving while impaired (DWI), in an attempt to reduce alcohol-impaired driving. While a suspension is temporary, a revocation cancels the driver's license. The driver may be required to go through an investigation to be re-licensed once the revocation is over.

Such laws have two primary goals: 1) deter the general population from DWI with the threat of a penalty—temporary or permanent loss of one's drivers' license; and 2) incapacitate drivers caught DWI from further DWI offenses by suspending their driver's license (Wagenaar & Maldonado-Molina, 2007). This strategy relies on the driver's compliance with driver's license laws and does not immobilize the driver's vehicle.

In North Dakota, drivers license suspensions times are dependent on BAC level. Refusal to submit to blood, breath, urine, or on-site test is a crime and will result in a minimum of 180 days up to three years revocation of driving privileges. (N.D.C.C. §39-08-01, 2013)

Discussion of effectiveness

Alcohol

Evidence remains unclear on the effectiveness of revoking the licenses of impaired drivers. A 2000 study found that license revocation policies were effective in significantly reducing alcohol-related fatal crashes (Whetten-Goldstein, Sloan, Stout, & Liang, 2000). A 2011 study found that license suspension was only effective if the suspension happened immediately (as an administrative penalty or pre-conviction) (Wagenaar & Maldonado-Molina, 2007). However, a final study found that all offenders with a prior DWI remain at high risk of recidivating regardless of type of sanction, including license revocation (Ahlin et al., 2011).

Intervening Variables

| Retail Pricing | Social availability | Law Enforcement | Community norms | Promotion & media |

References for description of strategy


Evidence base


Further reading

Sanctions and Monitoring for Convicted Drunk Drivers

Description of strategy

Legal sanctions, whether administered by the courts or by state licensing agencies, are central to deterrence-based policies for reducing alcohol-impaired driving. Examples are fines, license actions such as suspension and revocation, immobilization or impoundment of the vehicle, ignition locks, jail sentences and alternatives such as community service (Nichols & Ross, 1988).

Legislation can empower law enforcement agencies to immobilize or impound the vehicles of those convicted of impaired driving. This legislation falls primarily into three broad categories: (1) programs that require special plates on the vehicles of driving-while-intoxicated offenders and/or confiscating the vehicle plates and vehicle registration; (2) programs that require installation of devices in the vehicle that prevent it from operating if the driver has been drinking (alcohol ignition interlocks); and, (3) programs that impound, immobilize, confiscate, or forfeit the vehicles.

A 2008 document commissioned by the National Highway Traffic Safety Administration (NHTSA) reported alcohol ignition interlock laws are most common (43 states), followed by vehicle forfeiture laws (31 states). (National Highway Traffic Safety Administration, 2008).

In North Dakota, if convicted of a DUI, state law mandates an addiction evaluation for the first offense. On the second or subsequent offenses, an addiction evaluation and participation in the 24/7 monitoring program is required.

(N.D.C.C. §39-08-01, 2013)

Discussion of effectiveness

Alcohol

Evidence remains varied regarding the effectiveness of sanctions and monitoring for convicted drunk drivers as a prevention strategy. The effectiveness of sanctions and monitoring depends on the type of sanction implemented. Evidence suggests ignition locks are effective in reducing re-arrest rates (Guide to Community Preventive Services, 2006; Raub, Lucke, & Wark, 2003). Evidence also supports the effectiveness of immobilization or impoundment of vehicles of those convicted of impaired driving for reducing recidivism (the tendency to relapse and commit the offence again), traffic convictions, and crashes. The evidence on licensing sanctions and mandatory fine/jail policies remains unclear (Voas & DeYoung, 2002; Wagenaar et al., 2007).

Intervening Variables

| Retail Pricing |
| Social availability |
| Law Enforcement |
| Community norms |
| Promotion & media |
SANCTIONS AND MONITORING FOR CONVICTED DRUNK DRIVERS

Other names/examples: None

References for description of strategy

Evidence base
DeYoung, D. J. (1999). An evaluation of the specific deterrent effects of vehicle impoundment on suspended, revoked, and unlicensed drivers in California. Accident Analysis & Prevention, 31(1–2), 45–53. doi:10.1016/S0001-4575(98)00043-8


Further reading
Cooper, D., Chira-Chavala, T., & Gillen, D. (2000). Safety and other impacts of vehicle impound enforcement. Available at: http://escholarship.org/uc/item/3pm078s7
**Sobriety Checkpoints**

**Description of strategy**

At sobriety checkpoints, law enforcement officers use a system to stop drivers to assess their level of alcohol impairment. There are two types of sobriety checkpoints: (1) random breath-testing checkpoints where officers randomly select and test drivers for blood alcohol levels; and (2) selective breath-testing (SBT) checkpoints where officers must have reason to suspect a driver has been drinking before testing. SBT is the only type of sobriety checkpoint used in the United States (Guide to Community Preventive Services, 2012).

One tool used in conjunction with sobriety checkpoints is the passive breath sensor. Passive breath sensors or passive alcohol sensors are small electronic devices, usually built into police flashlights or clipboards that can detect alcohol in the ambient air of a vehicle. The sensors are quick, objective, and provide another source of detection to the officer which may aid in the identification of drunken drivers (Voas & Fell, 2011). Currently the sensors can only detect the presence of alcohol, not the level of alcohol present.

**Discussion of effectiveness**

**Alcohol**

Evidence supports the use of sobriety checkpoints in reducing alcohol-impaired driving, alcohol-related crashes, and associated fatal and non-fatal injuries (Guide to Community Preventive Services, 2012). Evidence supports effectiveness of sobriety checkpoints as an individual prevention strategy as well as a part of a multi-component strategy (Clapp et al., 2005).

Sobriety checkpoints are permitted and conducted in North Dakota.

**Evidence base**


**Intervening Variables**

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**Further reading**

**TEEN PARTY ORDINANCES**

**Description of strategy**

Teen parties are one of the highest risk settings for underage drinking. Young people report their heaviest drinking at large parties with peers, most of whom are underage, in private homes. Teen parties frequently lack adult supervision and can lead to alcohol poisoning, drinking and driving, sexual assaults, other violence, vandalism, and property damage. Despite the seriousness of the potential problems, communities tend to be tolerant of these parties and this tolerance is compounded by legal obstacles to law enforcement. Many states do not prohibit youth possession in private residences. Further, parents may also supply alcohol to their minor children. In some states police detecting a teen party may not have legal grounds to enter the premises, be unable to confiscate the alcohol, trace its original purchase, or hold the adult householder responsible for allowing the party on the premises (Prevention Resource Center, 2004).

Teen party ordinances function similarly to social host liability laws. The ordinances target the location where underage drinking occurs. The ordinances hold the individual responsible for underage drinking events on noncommercial property they own, lease, or otherwise control. The purpose of a teen party ordinance is to discourage underage drinking parties by creating a legal means to sanction the host and party attendees (Higher Education Center, 2011).

**Discussion of effectiveness**

**Alcohol**

Evidence suggests varied results for the effectiveness of teen party ordinances as a prevention strategy. Enforced teen party ordinances were found to be effective as part of a multi-component strategy to reduce incidence and likelihood of youth drinking, as well as off-premise underage alcohol sales (Saltz, Paschall, McGaffigan, & Nygaard, 2010; Saltz, Welker, Paschall, Feeney, & Fabiano, 2009). However, the evidence did not support the effectiveness of teen party ordinances for reducing binge drinking or perceived availability outcomes (Flewelling et al., 2012).

**Intervening Variables**

- Retail Pricing
- Retail availability
- Social availability
- Law Enforcement
- Community norms
- Promotion & media

**Other names/examples:** Party patrols, Noisy Assembly Ordinance
TEEN PARTY ORDINANCES

References for description of strategy


Evidence base


Further reading


Prevention Strategies to Address

Community Norms
APPROPRIATELY USE MASS MEDIA

Description of strategy
Mass media campaigns employ brief, recurring messages over time (weeks to years) to provide information or motivation to children and adolescents with the goal of increasing or improving health behaviors. Mass media techniques primarily include broadcast messages on television and radio, although other formats such as billboards, print, and movies have been used. Campaigns can focus on messages targeting children and adolescents or can include such messages as part of an overall anti-alcohol effort (Task Force on Community Preventive Services, 2005).

Discussion of effectiveness
Alcohol
Evidence suggests that use of mass media appropriately is an effective strategy for alcohol (Elder et al., 2004; Farrelly, Niederdeppe, & Yarsevich, 2003).

Intervening Variables
- Retail Pricing
- Retail availability
- Social availability
- Law Enforcement
- Community norms
- Promotion & media

References for description of strategy

Evidence base


Further reading
**Description of strategy**

A coalition is a group of individuals who align in a formal, organized way to address issues of shared concern over time. Coalitions often include local government officials, nonprofit agency and business leaders, and interested citizens (Zakocs & Edwards, 2006). Coalitions offer a unique opportunity for community members to define, identify, and implement solutions for local substance abuse problems. One example of an effective coalition from the traffic safety community is Mothers Against Drunk Driving (MADD). This coalition has actively worked to reduce impaired driving since the 1980s (National Association of Governors’ Highway Safety Representatives, 2001).

**Discussion of effectiveness**

**Alcohol**

The evidence is unclear on the effectiveness of coalition building as a solo strategy for preventing alcohol abuse. Findings are supportive for alcohol outcomes when coalition building is part of a multi-component strategy with many environmental prevention programs (Guide to Community Preventive Services, 2010; Weitzman, Nelson, Lee, & Wechsler, 2004). However, a systematic review evaluating the components of an effective coalition cautioned against drawing conclusions about associations between coalitions and population-level outcomes because of the wide variations in indicators of coalition effectiveness and coalition-building factors examined across relatively few studies, discrepancies in how these variables were measured, and the studies’ reliance on cross-sectional designs (Zakocs & Edwards, 2006).

**Intervening Variables**

- Retail Pricing
- Retail availability
- Social availability
- Law Enforcement
- Community norms
- Promotion & media

**Other names/examples:** Youth Empowerment, Tobacco coalition, Tobacco prevention coalition
COALITION BUILDING

References for description of strategy

Evidence base

Further reading
Description of strategy

A significant amount of research has been conducted on the prevalence and effects of single programs and policies on college campuses related to alcohol treatment, intervention, and prevention. These programs include policies such as substance-free dorms, letters to parents regarding alcohol violations, Friday and Saturday class requirements, and prohibition of alcohol sales on campus. To be effective at reaching the entire continuum of students who may experience alcohol-related problems, campuses must do more than implement single policies or programs. Components of a comprehensive campus alcohol system include alcohol screening, intervention, treatment, prevention policies mentioned above, and enforcement. Recent research suggests that making multiple changes to the campus and community alcohol environment can be effective in reducing alcohol use and related problems among college students; however, the ideal combination of programs, policies and other systems changes has not been identified (University of Minnesota Alcohol Epidemiology Program, 2009).

Discussion of effectiveness

Alcohol

Evidence is varied for the effectiveness of college campus policies regarding underage drinking and other alcohol related outcomes. Multi-component programs were typically found to be effective (Newman, Shell, Major, & Workman, 2006; Saltz, Welker, Paschall, Feeney, & Fabiano, 2009; Wolfson et al., 2012). The degree of effectiveness depended on the level of policy implementation and the specific components of the college campus program (Toomey & Wagenaar, 2002; Weitzman, Nelson, Hang, & Wechsler, 2004).

Intervening Variables

- Retail Pricing
- Retail availability
- Social availability
- Law Enforcement
- Community norms
- Promotion & media
References for description of strategy

Evidence base


Further reading


Description of strategy
Communities Mobilizing for Change on Alcohol (CMCA) is a community-organizing program designed to reduce teens’ (13 to 20 years of age) access to alcohol by changing community policies and practices. CMCA seeks both to limit youths’ access to alcohol and to communicate a clear message to the community that underage drinking is inappropriate and unacceptable. It employs a range of social-organizing techniques to address legal, institutional, social, and health issues related to underage drinking. The goals of these organizing efforts are to eliminate illegal alcohol sales to minors, obstruct the provision of alcohol to youth, and ultimately reduce alcohol use by teens. The program involves community members in seeking and achieving changes in local public policies and the practices of community institutions that can affect youths’ access to alcohol (National Registry of Evidence-based Programs and Practices, 2012).

Discussion of effectiveness
Alcohol
The current literature provides varied evidence on the effectiveness of CMCA. The National Registry of Evidence-based Programs and Practices systematic review found a significant decrease in alcohol access at on-site retail outlets (bars and restaurants), but not for off-site retail outlets (liquor stores) (National Registry of Evidence-based Programs and Practices, 2012). Evidence generally supports the effectiveness of CMCA for youth age 18-20 years old; however, evidence is not supportive of the effectiveness of CMCA for youth age 15-17 years old (National Registry of Evidence-based Programs and Practices, 2012; Wagenaar, Murray, & Toomey, 2000; Wagenaar et al., 2000).

Intervening Variables
- Retail Pricing
- Retail availability
- Social availability
- Law Enforcement
- Community norms
- Promotion & media

References for description of strategy

Evidence base

Further reading
**GET TO KNOW STATE LEGISLATORS-GENERAL**

**POLICY DEVELOPMENT**

**Description of strategy**
Numerous communities have implemented laws and policies to effect population health and reduce long-term medical and other costs. One way to influence the laws and policies that relate to substance abuse is through legislative advocacy. Legislative advocacy can involve anything from working personally with a legislator on the wording of a bill to mobilizing hundreds or even thousands of supporters to voice their opinions to the legislature with phone calls about an issue. Advocacy can require educating legislators, supporters, and the public about the issue; working with the media; continuously seeking out allies; and being persistent over long periods of time. Law makers can support substance abuse prevention by promoting a bill related to prevention, creating a local ordinance that supports prevention, advocating for budget reforms, gaining political support for a project/campaign, or creating networking connections for support of a program/campaign. In substance abuse prevention, policy development at the local ordinance level is common.

**Discussion of effectiveness**

**Alcohol**
There is limited literature that evaluates the effectiveness of policy change through campaigns to influence the state legislature on alcohol related outcomes. One study that evaluated policy development found that, in general, regulatory policies where youth were included in the development of the policy did not have significant results for alcohol consumption (Pentz, 2000). Policy development is often used in conjunction with other prevention measures and can be the byproduct of successful coalition building (Stevenson & Mitchell, 2003).

**Intervening Variables**
- Retail Pricing
- Retail availability
- Social availability
- Law Enforcement
- Community norms
- Promotion & media
GET TO KNOW STATE LEGISLATORS—GENERAL POLICY DEVELOPMENT

**References for description of strategy**


**Evidence base**


**Further reading**


Healthcare Initiatives

Description of strategy
Health care employees are uniquely positioned to assist their patients and families with prevention, detection, and treatment of substance abuse. Clinicians have repeated contact with patients over the course of the year and have an opportunity at each visit to communicate with the patient regarding substance abuse. Furthermore, primary care clinicians commonly see patients with a range of alcohol-related risks and problems (Whitlock, Polen, Green, Orleans, & Klein, 2004). A brief intervention with high-risk patients may prevent future substance abuse.

Discussion of effectiveness
Alcohol
Evidence generally supports effectiveness of brief, multi-contact interventions with primary care providers for reducing alcohol consumption (Kaner et al., 2009; Whitlock, Polen, Green, Orleans, & Klein, 2004).

Intervening Variables
- Retail Pricing
- Retail availability
- Social availability
- Law Enforcement
- Community norms
- Promotion & media
References for description of strategy

Evidence base

Further reading
Media advocacy is defined as the strategic use of mass media and community advocacy to advance environmental change or a public policy initiatives (Centers for Disease Control and Prevention, 2003). This strategy is typically employed to promote an issue in order to influence policy-makers and encourage social change (American Public Health Association, 2000). Unlike specifically designed public information campaigns, media advocacy works directly with local news outlets (radio, television, newspapers and magazines) to increase local attention to a specific public health problem and solutions (Niederdeppe, Farrelly, & Wenter, 2007). One key application is as a response to issues involving well-financed opponents who use money to shape the political and social environment. Compared with public relations, media advocacy is more focused on a particular policy goal, resulting in social change. It’s also more decentralized, community based, and community owned (Centers for Disease Control and Prevention, 2003).

**Alcohol**

Media advocacy efforts focused on alcohol have been found to be effective as part of a multi-component prevention program to reduce alcohol-related fatal crashes and drunk driving among adolescent and college populations (Hingson et al., 1996; Clapp et al., 2005).

### Intervening Variables

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### References for description of strategy


### Evidence base


### Further reading


Open Container Laws

Description of strategy
Open container laws refer to any statute regulating open alcohol containers in public or in vehicles. These laws are determined by individual states and local municipalities. While the federal government cannot directly legislate open container laws, they can create incentives for states to implement these laws on their own. The Transportation Equity Act for the 21st Century sets out certain guidelines for states to follow in order to receive roadway funding. If the state fails to comply, a portion of the funding will go to alcohol awareness (Stuster, Burns, & Fiorentino, 2002).

North Dakota law prohibits possession of an open container by the driver or any vehicular passenger but does not apply to a public conveyance that has been commercially chartered for group use.

References for description of strategy

Discussion of effectiveness
Alcohol
Evidence suggests that open container laws that regulate all vehicular passengers are effective for reducing alcohol-related fatal crashes (Eisenberg, 2003; Stuster, Burns, & Fiorentino, 2002; Whetten-Goldstein, Sloan, Stout, & Liang, 2000).

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Evidence base


Further reading
### Prohibiting Minors from Bars

**Description of strategy**

While all states have established a minimum drinking age of 21, few prohibit all aspects of the purchase, possession, or consumption of alcohol by those under age 21. In many states throughout the country, minors are permitted in bars unaccompanied by an adult. State and local regulations vary widely in the extent to which they permit minors to enter on-sale retail alcohol outlets (Inspector General, 1991). While states may restrict minors' access to bars and nightclubs, they may allow minors into restaurants that serve alcohol. Other states may prohibit minors from entering any establishment licensed to sell alcoholic beverages. One of the key ways to reduce minors' access to alcohol is to prohibit minors from entering bars. Implementing age identification checks at the door by trained employees using proper tools and lighting greatly reduces the ability of minors to obtain alcohol on the premises (Pacific Institute for Research and Evaluation, 2011). In North Dakota, no person under the age of 21 is permitted in licensed premises except under certain circumstances as outlined in the law (N.D.C.C. §5—01—8, 2013).

**Discussion of effectiveness**

**Alcohol**

No evidence regarding the effectiveness of prohibiting minors from bars for alcohol-related outcomes was located.

### Intervening Variables

| Retail Pricing |
| Retail availability |
| Social availability |
| Law Enforcement |
| Community norms |
| Promotion & media |

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**References for description of strategy**


**Evidence base**

No published literature located

**Further reading**

**Social Norms Campaign**

**Description of strategy**

The social norms approach to prevention is to gather credible data from a target population and then, using various health communication strategies, consistently tell that population the truth about actual norms of health, protection, and the avoidance of risk behaviors. With repeated exposure to a variety of positive, data-based messages, the misperceptions that help to sustain problem behavior are reduced, and a greater proportion of the population begins to act in accord with the more accurately perceived norms of health, protection, and safety. As the percentage of the target population that misperceives the level of peer substance use declines, the level of actual substance use in the population declines as well, even though overestimation of peer substance use will likely continue (Haines, Perkins, Rice, & Barker, 2005).

**Discussion of effectiveness**

**Alcohol**

Evidence of effectiveness is not conclusive for social norms campaigns targeting alcohol. Two studies (Glider, Midyett, Mills-Novoa, Johannesen, & Collins, 2001; Mattern & Neighbors, 2004) support the use of social norms campaigns targeting alcohol in college populations, while two other studies (Thombs, Dotterer, Olds, Sharp, & Raub, 2004; Wechsler, Nelson, Lee, Seibring, Lewis, & Keeling, 2003) do not support the use of social norms campaigns for alcohol in college populations. One study (Schmidt, Kiss, & Lokanc-Diluzio, 2009) supports the effectiveness of social norms campaigns targeting alcohol to increase retention of prevention messages, but does not analyze the effectiveness of this strategy to change attitudes or behavior. Finally, a recent study evaluating a statewide campaign for young adults found the social norms marketing campaign to be effective at reducing drinking and driving (Perkins, Linkenback, Lewis, & Neighbors, 2010).

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**References for description of strategy**


**Evidence base**


**Further reading**

Prevention Strategies to Address

Promotions of Alcohol
ALCOHOL ADVERTISING RESTRICTIONS IN PUBLIC PLACES

Description of strategy
Restrictions on alcohol advertising include any policies that limit advertising of alcoholic beverages, particularly advertising that exposes young people to pro-alcohol messages. Restrictions can be in the form of a local ordinance or state law, or can be implemented voluntarily by a business, event, or organization and can include:

- banning ads on buses, trains, kiosks, billboards and supermarket carts, and in bus shelters, schools, and theme parks;
- banning or limiting advertising and sponsorship at community events such as festivals, parties, rodeos, concerts, and sporting events;
- banning advertising in areas surrounding schools, residential areas, faith organizations, etc.;
- restricting or banning TV and/or radio alcohol commercials;
- restricting alcohol advertising in newspapers and/or on the Internet;
- counteracting alcohol ads with public service announcements;
- restricting the size and placement of window advertisements in liquor and convenience stores;
- requiring all alcohol ads in the local media to include warnings about the health risks of alcohol consumption;
- setting a maximum for the percentage of total print advertising space that alcohol ads can cover;
- reducing the disproportionately high number of alcohol billboards in low-income neighborhoods;
- prohibiting images and statements that portray or encourage intoxication; and,
- enforcing existing restrictions on alcohol advertising (University of Minnesota Alcohol Epidemiology Program, 2009).

Discussion of effectiveness
Alcohol
Although results are varied for advertising restrictions for alcohol, they are generally supportive and suggest advertising restrictions may be most effective when employed as part of a multi-component effort (Weitzman, Nelson, Lee, & Wechsler, 2004).

Intervening Variables
- Retail Pricing
- Retail availability
- Social availability
- Law Enforcement
- Community norms
- Promotion & media

Other names/examples: Billboard bans


**Further reading**

Alcohol Warning Posters

Description of strategy
Alcohol, warning posters are notices or signs located in retail establishments that provide information related to the legal, social, and health consequences of alcohol substance use.

Posters may be required by state or local law, or used voluntarily by retail establishments. Posters may include information on:

- the legal penalties and consequences of providing/selling to underage or intoxicated persons;
- the legal penalties of underage possession of alcohol;
- the establishment’s policies and practices on checking customers’ age identification and refusing sales to intoxicated persons;
- risks associated with alcohol consumption during pregnancy; and,
- risks of consuming alcohol, while taking certain medications and/or prior to driving motor vehicles and operating heavy machinery (University of Minnesota Alcohol Epidemiology Program, 2011).

Discussion of effectiveness

Alcohol
The evidence of effectiveness is generally supportive of warning posters for alcohol, although one study (Wolfson, Toomey, Forster, Wagnenar, McGovern, & Perry, 1996) found that the presence of alcohol warning posters was associated with increased youth access.

Intervening Variables
- Retail Pricing
- Retail availability
- Social availability
- Law Enforcement
- Community norms
- Promotion & media

References for description of strategy

Evidence base


Further reading
COUNTER-MARKETING & COUNTER-ADVERTISING CAMPAIGNS

Description of strategy

Counter-marketing refers to the use of commercial marketing tactics to reduce the prevalence of substance use. Counter-marketing attempts to counter pro-substance influences and increase pro-health messages and influences throughout a state, region, or community (Centers for Disease Control and Prevention, 2003; Centers for Disease Control and Prevention, 2000).

Discussion of effectiveness

Alcohol

Results of a review article indicate varied evidence of effectiveness for counter-marketing efforts targeting alcohol consumption (Agostinelli & Grube, 2002).

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Other names/examples: Denormalisation; National “truth” campaign; The Line Social Marketing Campaign; Campaign against underage drinking

References for description of strategy

Evidence base


Further reading

Media Literacy

**Description of strategy**

Media literacy helps people ask questions about what they watch, see, hear, and read. It helps them critically assess how the mass media normalize, glamorize, and create role models for unhealthy lifestyles and behaviors, such as binge drinking. Media literacy involves examining the techniques, technologies, and institutions involved in media production; critically analyzing media messages; and recognizing the role that audiences play in attaching a meaning to those messages. The idea is that teaching people to recognize how a message tries to influence them will lessen the impact of that message. On a broader level, media literacy can be viewed as a form of protection or "inoculation" against unhealthy behaviors shown in the media (Centers for Disease Control and Prevention, 2003).

**Discussion of effectiveness**

**Alcohol**

Evidence of effectiveness suggests that media literacy is an effective strategy for alcohol-related behaviors (Jeong, Cho, & Hwang, 2012).

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**References for description of strategy**

**Evidence base**


**Further reading**

Center for Media Literacy. Available at: http://www.medialit.org/

PROHIBITION OF ALCOHOL SPONSORSHIP OF EVENTS AND OTHER PROMOTIONS

Description of strategy
Restrictions on alcohol sponsorship refer to the control of alcohol-related sponsors at community events. Sponsors can include large alcohol producers/companies, local breweries/wineries, or retailers such as bars or restaurants. Sponsors provide financial support for the event in return for promotions and advertisements at the event. Sponsorship may take different forms, including: (1) use of the sponsor’s name in conjunction with the event; and/or (2) promotional items (such as t-shirts, flashlights, etc.) with the sponsor’s logo. Restrictions on sponsorship can be instituted through a local ordinance or state law, or can be implemented voluntarily by a business, event or organization. Examples include:
- prohibiting alcohol sponsorship of sporting events and community events;
- prohibiting the distribution of alcohol promotional items;
- prohibiting alcohol producer’s or retailer’s name from being associated with an event, particularly if youth are in attendance; and,
- prohibiting signs with an alcohol or sponsor’s name from being displayed at an event, particularly if youth are in attendance (University of Minnesota Alcohol Epidemiology Program, 2009).

Discussion of effectiveness
No evidence regarding the effectiveness of the prohibition of alcohol sponsorship of events and other promotions was located.

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References for description of strategy

Evidence base
No evidence found

Further reading