



*Effective Substance Abuse and
Mental Health Programs
for Every Community*

Communities Mobilizing for Change on Alcohol

Communities Mobilizing for Change on Alcohol (CMCA) is a community-organizing program designed to reduce adolescent (13 to 20 years old) access to alcohol by changing community policies and practices. Initiated in 1991, CMCA has proven that effectively limiting the access to alcohol of people under the legal drinking age not only directly reduces teen drinking, but also communicates a clear message to the community that underage drinking is inappropriate and unacceptable.

CMCA employs a range of social organizing techniques to address legal, institutional, social, and health issues in order to reduce youth alcohol use by eliminating illegal alcohol sales to youth by retailers and obstructing the provision of alcohol to youth by adults.

INTENDED POPULATION

CMCA can be implemented in virtually any rural, suburban, or urban community. The program's interventions are designed to affect all members of a community. Communities from Minnesota and Wisconsin participated in the initial program evaluation.

BENEFITS

The CMCA project—

- Mobilizes communities to make institutional and policy changes
- Limits youth access to alcohol
- Improves the health of the community

Proven Results

- Alcohol merchants increased age checks and reduced alcohol sales to minors
- Youths 18 to 20 years old reduced the practice of providing alcohol to younger teenagers
- Youths 18 to 20 years old were less likely to try to buy alcohol, drink in a bar, or consume alcohol
- Arrests for driving under the influence of alcohol declined significantly among 18- to 20-year-olds

INTERVENTION

Universal

Selective

Indicated



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Substance Abuse and Mental Health Services Administration
Center for Substance Abuse Prevention
www.samhsa.gov

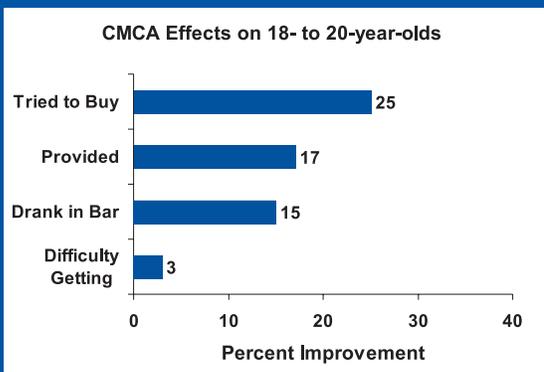
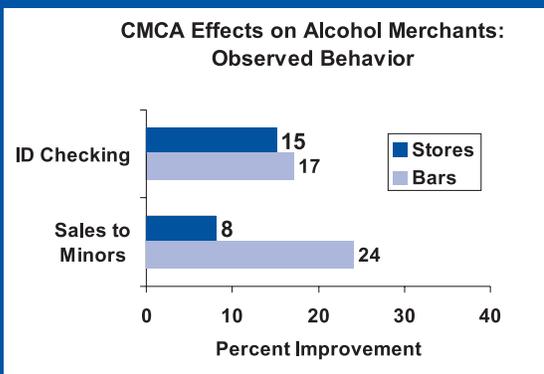
OUTCOMES

Results show that the CMCA intervention:

- Significantly and favorably affected the drinking behavior of 18- to 20-year-olds
- Significantly and favorably affected the practices of establishments serving alcohol
- May have favorably affected the practices of alcohol package sales establishments

Other outcomes include:

- Alcohol merchants increased age-identification checking and reduced propensity to sell to minors
- Older teenagers (18 to 20 years old) reduced provision of alcohol to other teens and the likelihood to try to buy alcohol or drink in a bar
- Significant decline in arrests for driving under the influence of alcohol among 18- to 20-year-olds



HOW IT WORKS

CMCA involves motivating community members to seek and achieve changes in local public policies and in the practices of community institutions that can affect youth's access to alcohol. CMCA offers resource materials to help communities organize these efforts, for example:

- **Civic Groups** can adopt policies to prevent underage drinking at organization-sponsored events and initiate and participate in community-wide efforts to prevent underage alcohol use.
- **Faith Organizations** can provide a link between prevention organizations, youth, parents, and the community. They can also offer education, develop internal policies to prevent teens from accessing alcohol at their events, and participate in efforts to keep alcohol away from youth.
- **Schools** can teach alcohol refusal skills and create and enforce policies restricting alcohol use and access, both on school property and in the surrounding community.
- **Community Groups** can voluntarily control the availability and use of alcohol at public events such as music concerts, street fairs, and sporting events.
- **Law Enforcement** can mandate compliance checks or encourage voluntary compliance checks by law enforcement or licensing authorities. Police can also encourage and support the use of administrative penalties for failure to comply with State or local laws relating to the sale of alcohol to minors.
- **Liquor Licensing Agencies** can offer and promote mandatory or voluntary programs that train managers, owners, servers, and sellers at alcohol outlets how to avoid selling to underage youth and intoxicated patrons.
- **Advertising Outlets** can be influenced to remove alcohol advertising from public places or wherever youth are exposed to these messages. Communities can also restrict alcohol companies' sponsorship of community events.

IMPLEMENTATION ESSENTIALS

CMCA is a community-based program that can be implemented by a range of groups, from all-volunteer grassroots activists to nonprofit organizations or public agencies of any size. In order to successfully replicate CMCA, organizations need to be able to—

- Assess community norms, public and institutional policies, and resources
- Identify, from inception, a small group of passionate and committed citizens to lead efforts to advocate for change
- Create a core leadership group that can build a broad citizen movement to support policy change

- Develop and implement an action plan
- Build a mass support base
- Maintain an organization and institutionalize changes
- Evaluate changes on an ongoing basis
- Manage widely variable program costs

PROGRAM MATERIALS

Free materials on reducing youth access to alcohol are available to assist in the implementation of CMCA, including a series of papers written by alcohol epidemiology experts. These include:

- **Alcohol Compliance Checks:** *A Procedures Manual for Enforcing Alcohol Age-of-Sale Laws*—This user-friendly manual is designed for public officials, law enforcement officers, and community groups; it is a practical guide for developing and implementing a compliance check system for establishments that sell or serve alcohol.
- **Model Ordinances:** This material provides information on and samples of specific local laws that regulate alcohol use in the community, designed to reduce the supply of alcohol to youth under age 21.
- **Model Public Policies:** These are sample alcohol control policies aimed at limiting social and commercial access to alcohol, including beer keg registration; restricting alcohol use in public places and at community events; restricting alcohol advertising; developing social host liability laws; initiating responsible beverage sales, service training, and compliance checks; banning alcohol home delivery; and restricting alcohol companies' sponsorship of community events.
- **Model Institutional Policies:** Sample policies are available that describe actions that can reduce youth access to alcohol and can be used by community institutions, including civic groups, colleges and universities, faith organizations, hotels, police, schools, employers, and parents.
- **Reprints of Papers:** Papers published in scientific journals on subjects related to CMCA are also available. Citations are listed on the program's Web site and copies of the papers are available by request.

The above-listed materials can be downloaded and reproduced, free of charge, from the University of Minnesota's Alcohol Epidemiology Program Web site at www.epi.umn.edu/alcohol. The University requests:

- **Source citation** in any publications where the information is used
- **Notification** if the program or any portion of it is implemented, sent to NREPP@intercom.com

PROGRAM BACKGROUND

The CMCA intervention was based on established research that showed the importance of the social and policy environment in facilitating or impeding drinking among youth. CMCA community organizing methods drew on a range of traditions in organizing efforts to deal with the social and health consequences of alcohol consumption.

EVALUATION DESIGN

CMCA was evaluated in a fully randomized 5-year research trial across 15 communities. Data were collected at baseline before random assignment of communities to the intervention or control condition and again at followup after a 2.5-year intervention period. Data collection included in-school surveys of 9th and 12th graders, telephone surveys of 18- to 20-year-olds and alcohol merchants, direct testing (using underage youth to attempt purchases) of the likelihood of alcohol sales to youth, and monitoring changes in relevant practices of community institutions. Analyses were based on mixed-model regression, used the community as the unit of assignment, took into account the nesting of individual respondents or alcohol outlets within each community, and controlled for relevant covariates.

PROGRAM DEVELOPER

Alexander C. Wagenaar, Ph.D.

Dr. Alexander C. Wagenaar, professor of Epidemiology and director of the Alcohol Epidemiology Program at the University of Minnesota, developed the CMCA project. The Alcohol Epidemiology Program (AEP) is a research program within the School of Public Health, University of Minnesota in Minneapolis. The AEP conducts policy-evaluation research on specific initiatives to prevent alcohol-related problems and studies community coalitions and other efforts to change the social and policy environment around alcohol. In recent years, AEP has studied adolescent drinking, community organizing efforts, randomized community trials, alcohol-involved traffic crashes, effects of macroeconomic conditions on drinking rates, training for alcohol outlet managers and servers, natural experiments with changes in alcohol policies, and public opinion surveys.

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RECOGNITION

Model Program—Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services