

THE OFFICIAL PUBLICATION OF THE DRUG AND ALCOHOL TESTING INDUSTRY ASSOCIATION

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PRESIDENT'S NOTE



There are so many exciting things happening with DATIA. We are improving members' experience, developing new ways for members to connect and expanding our advocacy efforts.

One way we are improving the member experience was by launching the new and improved website and membership database! The new system is highly automated and user friendly allowing us to better serve you.

We were thrilled to connect with members in person again at DATIA's Annual Conference in Louisville, KY! In person education courses that were previously unavailable due to COVID-19 will be back at the Annual Conference. This includes the highly in-demand Certified Professional Collector Trainer Course. Preliminary survey results are great, thank you to all that attended this year, we look forward to seeing you in Las Vegas next year!

On the government affairs front, DATIA's partner The Vogel Group, has been working non-stop on behalf of DATIA and its members to advocate on issues related to drug and alcohol testing. As the "voice" of the Drug & Alcohol industry, we are the experts

that officials go to when creating policies related to drug and alcohol testing.

Remember, this is YOUR DATIA. You are our priority. More Member Forums, Webinars and Course updates are to come, so please watch your inbox and check the website.

We encourage you to attend and engage as we move DATIA forward.

Be a part of this movement! If you have not renewed your membership yet, please visit the DATIA website www.DATIA.org.

Let's keep the momentum going!

Anthony Washington



Pacific Human Resource Services in Guam

By DATIA Board Member: Kelly Dobbins

Pacific Human Resource Services, Inc. (PHRS) has been in business in Guam since 1997. PHRS started primarily as a human resource consulting company and in 2010 added drug and alcohol testing to its corporate set of services to provide service to the Port Authority.

In the fall of 2021, Vince Leon Guerrero, Vice-President, and COO, contacted me and asked me to do urine mock collections via web cam for five of his collectors. Through this relationship, I began consulting work regarding the business of drug testing as well as urine collector and evidential breath alcohol training with PHRS. In March 2022, my husband and I flew to Guam and spent a week helping PHRS celebrate their 25th year in business and to consult face-to-face on business practices.

When I first started communicating with Vince and PHRS, I knew very little about Guam. I knew that Guam was a United States Territory; I knew

that Guam was in the middle of the Pacific Ocean; and I knew that Guam was somewhere between Hawaii and Japan. Through this partnership, I have learned a lot about Guam and the people that live there. According to Wikipedia, approximately 3500 years ago, the Chamorro people settled the island. In 1668, Guam was colonized by Spain and during the Spanish-American War the US captured Guam and Spain ceded Guam to the US in 1899.



Through our many outings and visits to museums (Pacific War Museum) we learned that on December 8, 1941, hours after the attack on Pearl Harbor, Guam was captured by the Japanese. The Japanese occupied the Island for two and a half years and American troops recaptured Guam on July 21, 1944. During Japan's two-and-a-half-year occupation, the people of Guam were incarcerated, tortured, and executed. We saw a memorial in which Vince was able to personally show us many family members that were harmed or executed during the Japanese occupation.

We were also able to visit the spot where the American soldiers were climbing up the hill to rescue the occupants and we saw several caves that



were built into the mountain that were used by the Japanese. In Guam, July 21 is celebrated as Liberation Day.

Guam is the largest and most southern of the Mariana Islands and is in the Micronesian subregion of the western Pacific Ocean.

In 1950, Guam became a territory of the United States and the people are US citizens. Since Guam is not a State, the people of Guam do not vote for the President and their representative for Congress is a non-voting member.

Guam is 212 square miles – 30 miles long and 4

to 12 miles wide and is divided into 19 villages. We were in Hagatna during most of our visit but also visited Tamuning and Agana Heights. The island has a tropical rain forest climate, and the temperature is between 86 degrees Fahrenheit – 76 degrees Fahrenheit year-round. There are two distinct seasons: wet and dry. The dry season runs January – May and the wet season is typically July through November. We visited in March during the dry season and could not have asked for better weather.

The people of Guam speak English and Chamorro. Filipino is also commonly spoken. Although Chamorro is the native language, according to Vince, it is a “struggling to survive” language.

None of the young people speak the native language anymore. The predominant religion is Christianity with 75% being Catholic. Guam is a popular tourist destination for Japanese and is home to the world's largest Kmart.

While visiting Guam, we met with the Lt Governor, Josh Tenorio, we were guests on a local talk radio show, interviewed with a newspaper reporter, and met with an attorney, Jon Ramos, from the local bar association. We visited many historical and local sights including the famous

Two Lovers Point; we drank coconut juice from a young coconut, talked to local villagers and learned about the latte stones upon which they Chamorro people built their homes. The latte stones were particularly interesting like the moai of Eastern Island but much smaller and in two separate pieces. We visited a park where there are several still standing.

I enjoyed spending time with Vince, Anna Marie Toves, President; Jesse Toves, VP Client Relations; and Jessie Marie Toves, CPCT, Compliance Officer and many others I met along the way. I really appreciate the hospitality of all the staff including Stephanie, Michelle, Ariza, Ericka, Jeremy,

and James. Not only was I able to train them on their CPC mocks, but I also trained the staff on the ASVXL breath alcohol instrument through Intoximeters with mocks as well. With all the collectors being CPC and BAT trained, PHRS can further pursue drug and alcohol testing as the only certified and accredited drug and alcohol testing facility on Guam. In preparation and celebration of PHRS 25th year in business, one of the highlights of the week was presenting them with a letter from the President of DATIA, Anthony Washington, congratulating them on their achievement of Accredited Collection Facility status.

To achieve the ACF status, the collection supervisor attends DATIA train the trainer course (CPCT), and upon completion of this course, trains the rest of the staff. DATIA administers the collector certification exam and upon passing, the staff are awarded the CPC designation. The Accredited Collection Facility designation also requires standard operating procedures, DOT/NHTSA evidential breath equipment as well as maintaining at least \$1,000,000 in Professional Liability Insurance.

On our final night in Guam, the management, and staff of PHRS surprised me and my husband with a family barbecue outing at a restaurant, by the ocean, overlooking the sunset. We left for home with lots of memories and left behind us lots of training examples.

Guam <i>Guåhan</i>	
Unincorporated and organized U.S. territory	
 Flag	 Seal
Nickname(s): <i>Tânó y CHamoru</i> (Chamorro) (English: "Land of the CHamoru") Motto: <i>Tânó l' Man CHamoru</i> (Chamorro) (English: "Land of the CHamorus") Anthem: "Stand Ye Guamanians"	
 Location of Guam (circled in red)	
Sovereign state	 United States ^[a]
Before annexation	Spanish East Indies
Cession from Spain	April 11, 1899
Capital	Hagåtña
Largest city	Dededo
Official languages	English · Chamorro
Ethnic groups (2010) ^[1]	49.3% Pacific Islander 36.6% Asian 9.4% Multiracial 7.1% White 0.6% Other
Religion (2010) ^[2]	94.1% Christianity 1.7% No religion 1.5% Folk religions 1.1% Buddhism 1.6% Other



COLORADO & CANNABIS

DATIA recently sat down with Senator John Hickenlooper's staff to discuss his recent efforts to push cannabis related legislation and work on industry regulations. Senator Hickenlooper is a democratic Senator from Colorado. Throughout his career, Senator Hickenlooper's advocacy for the cannabis industry has been crucial to the movement of legislation both at the State and Federal Level.

About Senator Hickenlooper

Hickenlooper began his career as a geologist before he became involved in politics as Mayor of Denver in 2003. Before assuming office in the Senate, Hickenlooper served as the 42nd governor of Colorado. During his term as Governor, he was instrumental in legalizing marijuana in the state of Colorado in 2012. His legislation for Colorado cannabis legalization set the gold standard for other states that sought to legal-

ize marijuana in the years that followed. His success in passing cannabis legislation in Colorado and crafting state regulation of a new industry gave the Senator ample experience to navigate the future of cannabis policy on the federal stage.

During his presidential run in 2020, Senator Hickenlooper pledged to decriminalize cannabis at the federal level if he became president. Though his presidential campaign wasn't successful, the Senator has not stopped advocating for various pieces of legislation relating to the cannabis industry.

Recent Infrastructure Amendment on Cannabis Research

On November 15, 2021, the Infrastructure Investment and Jobs Act was signed into law after months of historic bipartisan negotia-

tions. Senator Hickenlooper successfully included his amendment in the final version of the funding package. Senator Hickenlooper's amendment, which will ease barriers to study marijuana-impaired driving, passed unanimously as part of the bipartisan Surface Transportation and Investment Act included within the spending package.

The amendment would require the Department of Transportation to issue a public report with three main recommendations. The first would make it easier for scientific researchers studying impairment for drivers under the influence of marijuana to access samples, including strains of marijuana and products containing marijuana that are sold on a retail basis.

The second would establish a national clearinghouse to collect and distribute samples and strains of marijuana that are sold in a state on a retail basis for scientific research. The third rec-

ommendation would facilitate access through a clearinghouse to samples and strains of marijuana products for researchers in states that have not legalized marijuana for medical or recreational use.

With the passage of this amendment in the infrastructure package, DATIA now has the opportunity work with senator Hickenlooper and DOT to provide critical research around marijuana impairment to promote roadside safety. The DATIA team in Washington will reach out to members and agency officials in coming months to find ways to engage, provide research and position DATIA as a valuable research moving forward.



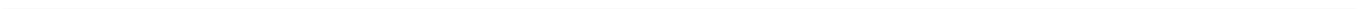
“Colorado led the way on marijuana legalization. The federal government needs to catch up by lifting outdated restrictions on the scientific study of cannabis so we can prevent driving while high” - Sen. (D) John Hickenlooper



ACCENTUATE THE NEGATIVE DETER THE POSITIVE

Why a negative cannabis test result might be
more important than a positive result

by DATIA Board Member Nina M. French,
President of Employer + Law Enforcement Solutions, [Hound Labs, Inc.](#)





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Post-accident
cannabis positives
occurred 63.4%
more often when
compared to pre-
employment
cannabis positives
”

Nearly 185 million adults in the United States can legally use cannabis. That means, on any given day, gainfully employed people are reporting to work having, at some point, consumed cannabis. The problem is zero-tolerance drug testing policies, and the conventional cannabis tests upon which these policies often rely, don't account for this new legal cannabis landscape. They also don't distinguish between recent use and long-term use.

The result is valued employees are “failing” cannabis tests, even if they have not recently used cannabis. How is this happening? Because conventional cannabis tests like urine, oral fluid, and hair will provide positive results for days, weeks, and months after use depending on the type of specimen. So, these positive results may merely reflect employees' or candidates' legal choices during their personal time, with no correlation to cannabis use immediately before or during work or correlation with an ensuing workplace incident.

WHAT THE DATA REVEALS

Recent data shows post-accident versus pre-employment cannabis positivity increased nearly two times from 2013 to 2021 in the general U.S. workforce and more than five times for the federally mandated safety-sensitive workforce.

Additionally, there was an increase in cannabis positivity across all employee testing categories using oral fluid (over 14% positive) and urine (10% positivity). And post-accident cannabis positives occurred 63.4% more often when compared to pre-employment cannabis positives.

However, interpreting this data is no longer as straightforward as it used to be. This is because employers cannot isolate when employees used THC based on positive test results from conventional cannabis tests of urine, oral fluid, and hair. The inability to identify when an employee used cannabis prevents employers from understanding

whether the positive results may have impacted the workday and a potential workplace incident. Positive results reflecting cannabis use that occurred 24 hours to 67 days before the test present a challenge to employers now that most employees can legally use cannabis.

WHY RECENT USE MATTERS

Policies based on positive results from conventional tests do not provide employers with a complete, objective story of the result. In the case of a urine test, it is impossible to change a level or further test a positive result to determine if an employee used cannabis within a few hours preceding or during the workday. For example, should an employee be disciplined for using cannabis legally over the weekend or following their shift? Employers wouldn't

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Should an employee who legally uses cannabis on a Saturday night be penalized for it on Monday morning?
”



act on positive test results for alcohol if an employee consumed two martinis two days prior to testing. Should an employee who legally uses cannabis on a Saturday night be penalized for it on Monday morning? Now that most adults have legal access to cannabis, employers should consider taking a similar position on legal cannabis use – prevention during the workday, not punishment for off-hours use.

In the era of legalization, employers need to re-evaluate methods and policies to ensure they are fair, objective, and support the overall goal of creating a safe workplace and reducing the cost of drug use at work. And, before making any changes to drug testing policies, employers should consult federal regulations and state laws or consult with a qualified employment lawyer.

MODERN POLICIES FOR A MODERN PROBLEM

Prior to legalization, employers could perform pre-employment tests to eliminate candidates who tested positive for THC. This was often a cut-and-dried decision as cannabis use was uniformly illegal. But as the legal landscape continues to evolve and employers continue to grapple with a tight labor market, organizations need and want clear and comprehensive drug testing policies that specifically address legal cannabis use outside of work. Zero-tolerance policies are increasingly impractical.

If an employer fires an employee who legally uses cannabis and follows company policies, this can become a costly action for both employees and employers. The employee is denied a position or loses a job based on legal use outside of the workplace, while the employer incurs recruiting, training, and other employee replacement costs. In addition, the employer loses goodwill with other employees who observe un-

fair treatment.

So, how can employers create holistic cannabis policies balancing fairness for employee choices outside of the workplace while maintaining a safe workplace in the era of legalization? The answer may lie in a combination of two important steps – first, updating drug testing policies; and second, embracing new technology that can detect and isolate recent use of THC. Only THC breath testing technology is capable of distinguishing between use that has occurred in the past few hours versus the past few days. This allows employers to make an objective decision about whether an employee violated company workday cannabis policies.

A cannabis breathalyzer measures THC in breath and allows for fast, accurate, and on-location results. Automated processing and instrument-read results eliminate the possibility of biased interpretation and reduce human error while administering the test. Instrument-read results are available in minutes at an employer's workplace, eliminating the burden of supervisors interpreting "the line" on a point-of-care test to determine if it is positive or negative. Some cannabis breathalyzers preserve test results which are automatically and electronically recorded to provide employers with a recoverable log for accurate record-keeping. Finally, the ability to confirm and record the few non-negative tests via LC/MS confirmation and chain of custody protocols, mirrors the forensic defensibility workplace testing standards that are universally considered best practice.

As with any workplace drug testing policies, employers should discuss the incorporation of THC breath testing with legal counsel to review potential options. But the re-evaluation of testing methods to include a cannabis breathalyzer allows employers to continue workplace drug testing (post-hire, random, post-incident, reasonable suspicion, etc.) while attracting highly qualified candidates and retaining valued employees.

Incorporating technology to determine recent cannabis use also allows employers to rethink their return on investment (ROI) model for workplace drug testing. Historically, this model has been driven by the 2-3% of [positive test results](#) resulting from the number of drug users – and their associated [costs and risks](#) – that a company excludes from the workplace. However, a different ROI model can be used when deploying a breath testing technology. Now that most employees have legal access to cannabis, the model can consider the negative test results as well as the positive ones. It's no longer just the cost savings of deterrence and risk mitigation; it's retaining valuable employees and reducing the cost of re-hiring employees who were terminated for cannabis use that occurred days, weeks, or months before the test.

Employers should now recognize that legal cannabis is



widely available to their candidates and employees. Those who re-evaluate how they test, embrace new technology, and focus policies on isolating recent use of THC will be better able to maintain safe workplaces, fairly address their employees' legal cannabis use, and increase their candidate pools.

About the Author

Nina M. French is President of Employer + Law Enforcement Solutions at Hound Labs, Inc. She has over 30 years of experience in the employee screening industry and a deep understanding of drug testing program design, policies, state laws and federal regulations, and technologies. In addition to working directly for one of the leading drug testing service providers, Nina co-founded a consulting firm specializing in the drug testing and screening industries, which provided guidance to hundreds of clients. Nina is a DATIA Board member who frequently speaks at conferences and regularly contributes to the Hound Labs blog as well as other industry publications.

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Paula D. Layton
770-838-7314
pdlayton@McGriff.com
1825 Barrett Lakes Blvd. NW, Suite 320, Kennesaw, GA



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DRUG SCREENING MARKET TO REFLECT IMPRESSIVE GROWTH RATE BY 2028

By: theinsightpartners | Published May 16, 2022



The latest Drug Screening Market study offers an all-inclusive analysis of the major strategies, corporate models, and market shares of the most noticeable players in this market. The study offers a thorough analysis of the key persuading factors, market figures in terms of revenues, segmental data, regional data, and country-wise data. This study can be described as most wide-ranging documentation that comprises all the aspects of the evolving Drug Screening Market.

Drug screening is a technical process, performed for analyzing specimens such as hair, urine, oral fluids, breath and other samples. Drug screening aids in detection of drug or a chemical compound in the body. This process is applied in hospitals, drug testing centers, pain management centers as well as law enforcement agencies. Drug screening tests are also performed by companies and organizations on employees and athletes to check for drug abuse.

The research report provides deep insights into the global market revenue, parent market trends, macro-economic indicators, and

governing factors, along with market attractiveness per market segment. The report provides an overview of the growth rate of Drug Screening Market during the forecast period, i.e., 2022–2028.

Most importantly, the report further identifies the qualitative impact of various market factors on market segments and geographies. The research segments the market on the basis of product type, application, technology, and region. To offer more clarity regarding the industry, the report takes a closer look at the current status of various factors including but not limited to supply chain management, niche markets, distribution channel, trade, supply, and demand and production capability across different countries.

Sample PDF showcases the content structure and the nature of the information included in the report which presents a qualitative and quantitative analysis – <https://www.theinsightpartners.com/sample/TIPHE100000970/>

Leading Drug Screening Market market Players:

- Abbott
- Omega Laboratories, Inc.
- Roche Monitoring Services.
- Siemens Healthcare GmbH
- Thermo Fisher Scientific Inc.
- Quest Diagnostics Incorporated
- Premier Biotech, Inc.
- OraSure Technologies, Inc.
- Psychomedics Corporation
- Laboratory Corporation of America Holdings

SEGMENTATION

- Based on product type, the market is segmented as analytical instruments, rapid testing devices and consumables.
- On the basis of sample, the global drug screening market is segmented into breath, hair, oral fluid, urine and others.
- Based on end user, the market is bifurcated into drug testing laboratories, drug treatment centers, criminal justice systems & law enforcement agencies, pain management centers, hospitals, individuals and others



The research provides answers to the following key questions:

1. What is the estimated growth rate of the market for the forecast period 2021–2028? What will be the market size during the estimated period?
2. What are the key driving forces responsible for shaping the fate of the Drug Screening Market during the forecast period?
3. Who are the major market vendors and what are the winning strategies that have helped them occupy a strong foothold in the Drug Screening Market?
4. What are the prominent market trends influencing the development of the Drug Screening Market across different regions?
5. What are the major threats and challenges likely to act as a barrier in the growth of the Drug Screening Market?
6. What are the major opportunities the market leaders can rely on to gain success and profitability?

The study conducts SWOT analysis to evaluate strengths and weaknesses of the key players in the Drug Screening Market. Further, the report conducts an intricate examination of drivers and restraints operating in the market. The report also evaluates the trends observed in the parent market, along with the macro-economic indicators, prevailing factors, and market appeal according to different segments. The report also predicts the influence of different industry aspects on the Drug Screening Market segments and regions.

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Our Reports Will Help Clients Solve The Following Issues: –

Insecurity About The Future:

Our research and insights help our clients anticipate upcoming revenue compartments and growth ranges. This will help our clients invest or divest their assets.

Understanding Market Opinions:

It is extremely vital to have an impartial understanding of market opinions for a strategy. Our insights provide a keen view on the market sentiment. We keep this reconnaissance by engaging with Key Opinion Leaders of a value chain of each industry we track.

Understanding The Most Reliable Investment Centers:

Our research ranks investment centers of market by considering their future demands, returns, and profit margins. Our clients can focus on most prominent investment centers by procuring our market research.

Evaluating Potential Business Partners:

Our research and insights help our clients identify compatible business partners.

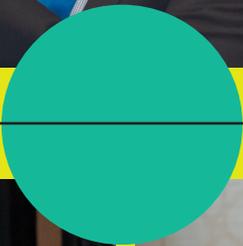
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Drug Screening Market Segmented by Region/Country: North America, Europe, AsiaPacific, Middle East & Africa, and Central & South America.





2022 ANNUAL CONFERENCE GALLERY





Need space?

**Collect anytime, anywhere
with oral fluid drug and
alcohol testing**

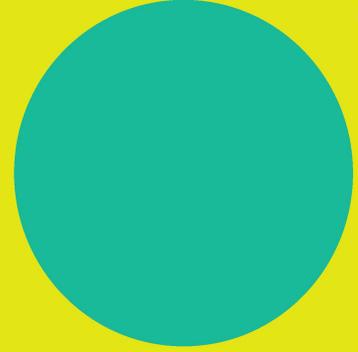
- Recent use detection
- Minimal contact
- Accurate and defensible
- Difficult to cheat
- FDA cleared



OraSure Technologies, Inc.

www.ChooseIntercept.com







Talking to your young adult about Underage Drinking

Published by SAMHSA (Substance Abuse and Mental Health Services Administration) March, 2021

PROM SEASON IS HERE! Have you talked to your young adult yet?

THEIR NEXT PHASE OF LIFE

While they're wrapping up high school studies and obligations, high school seniors make important decisions about the rest of their lives. Some choose to pursue a college degree immediately, and others may decide to join the workforce or military or delay college enrollment. The quest for independence and self-reliance can be exciting.

But it also can increase stress levels and lead to a variety of unhealthy behaviors—like underage drinking.^{1,2} Research shows that the brain continues to develop into the 20s, so alcohol use can damage young adults' maturing brains—just as they're starting the next phase of their lives.^{3,4}

UNDERAGE DRINKING AFTER HIGH SCHOOL

Underage drinking is prevalent after seniors graduate from high school. After graduating from high school young adults tend to drink more each year—even before they turn 21 and are legally allowed to drink. In fact, drinking increases between the ages of 18 and 22 for those who go to college full-time and for those who don't.⁵

Binge drinking at any age is associated with

short- and long-term consequences, such as:

- Unintentional injuries (e.g., car crashes, falls, burns, drowning);
- Intentional injuries (e.g., firearm injuries, sexual assault, domestic violence);
- Alcohol poisoning;
- Sexually transmitted diseases; and
- Unintended pregnancy.⁶

Young adults entering the workforce are exposed to—and spend more time with—older coworkers who may become influencers on issues like alcohol use.⁷ This is particularly true in industries where heavy alcohol use is common among employees.

For example, there is a higher heavy alcohol use among people aged 18 to 64 who work in the construction industry than for other industries.⁸

If young adults find themselves temporarily unemployed, they're still at risk. Research shows that unemployed young adults are more likely to be daily drinkers than their peers.

YOUNG ADULTS AND ALCOHOL

Of 18- to 22-year-olds not attending college full-time:

- Roughly 44 percent drink.
- Nearly 28 percent binge drink.
- Roughly 6 percent drink heavily.

Center for Behavioral Health Statistics and Quality. (2020). Results from the 2019 National Survey on Drug Use and Health: Detailed tables. (Table 6.21B)

This increases their likelihood of engaging in risky behaviors that have serious consequences, like drinking and driving.⁹

YOUR GUIDANCE MATTERS

You can help the young adults in your life make healthy choices in their late teens and early 20s. It may be as simple as talking with them about the consequences of underage drinking. Even though they are branching out on their own, you have a positive influence on choices affecting their health and future.

Your guidance matters. In fact, research shows that young adults whose parents made rules about drinking were less likely to drink as they grew and became independent.¹⁰ It's crucial that you communicate openly and clearly with your young adult about alcohol and the behavior you expect.

Plus, if you commit to knowing more about them—what they're doing, who they're with, where they are—you're more likely to have a positive effect on their behavior.

STARTING THE CONVERSATION

Research shows that parents and caregivers who express disapproval of underage drinking protect young adults from most alcohol use and related consequences, even if a young person is already using alcohol.¹¹

Make it a point to get the conversation started. Look for everyday opportunities to raise the topic. Conversations about career choices, coworkers, or workplace challenges can include a discussion about pressures to drink and the potential consequences.

But conversations about alcohol don't always have to relate to work. You can also share recent news or social media stories about underage drinking, or use an example from a current TV show your young adult watches. If your family or social circles have examples, use those, too.

Instead of lecturing, talk with your young adult about alcohol in ways that show you care about, trust, and respect their growing independence. Try to suggest activities that don't involve drinking, like joining a sports league, an outreach or faith-based group, or a volunteer or community organization—but make your own position about underage alcohol use clear.



BINGE DRINKING

- **Binge Drinking:** Drinking five or more alcoholic drinks for males or four or more alcoholic drinks for females on the same occasion on at least one day in the past month.
- **Heavy Drinking:** Binge drinking on five or more days in the past month.

Center for Behavioral Health Statistics and Quality. (2020). 2019 National Survey on Drug Use and Health: Methodological summary and definitions.

If your young adult is struggling to transition to adulthood, discuss ways to cope with any related negative feelings. In general, mental health issues like depression and anxiety tend to increase among this age group—and so does the risk for alcohol use disorders.^{12,13} Be prepared to help your young adult find mental health treatment, if necessary. One place to look for resources is SAMHSA's Behavioral Health Treatment Services Locator at www.samhsa.gov/find-treatment.

Come back to the conversation about underage drinking so your young adults have repeated exposure and plenty of time to digest the information before they go off on their own. And remember: What you say can make a world of difference.

Start the conversation today.

21 & OVER

IT'S THE LAW

Explain to your young adult that an arrest and conviction record can make it hard to get a job or move ahead in their career. All states and the District of Columbia have 21-year-old minimum drinking age laws and, in most states, 21 is the minimum legal age for the purchase or public possession of alcohol.

U.S. Department of Health and Human Services (HHS), Substance Abuse and Mental Health Services Administration. (2018). Report to Congress on the Prevention and Reduction of Underage Drinking.

CONVERSATION GOALS

- Highlight that underage drinking can hurt their health and limit job success.
- Make your “no underage alcohol use” position clear.
- Help find activities that don't involve alcohol.



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