

Drug and alcohol abuse have long been considered problems associated with large metropolitan areas. However, studies show that alcohol and drug use among young teens is higher in rural America than in large urban centers, and is becoming an increasing problem. According to a 2000 study by CASA (Center for Alcohol and Substance Abuse), 8th graders living in rural America are:

- 34% likelier than those in urban centers to smoke marijuana
- 83% likelier to use crack cocaine and 50% likelier to use cocaine
- 29% likelier to drink alcohol and 70% likelier to have been drunk
- More than twice as likely to smoke cigarettes and nearly five times likelier to use smokeless tobacco

The same study investigated and compared the use of illicit drugs by 8th graders in metro areas and rural areas. They found that the use of five major drugs (marijuana, cocaine, crack, heroin, and amphetamines) by 8th graders in rural areas was higher than the use by urban 8th graders in all instances.

In addition to illicit drugs, alcohol use among rural youth is also higher. In 2004, the National Survey on Drug Use and Health (NSDUH) reported high rates of alcohol use among rural youth versus the rate of use by urban youth.

Age Group	Alcohol Use		Bingeing	
	Rural	Non-Rural	Rural	Non-Rural
12-13	6.6 %	4.0 %	4.1 %	1.6 %
14-15	18.1 %	16.4 %	12.0 %	8.9 %
16-17	36.0 %	32.2 %	25.0 %	21.0 %

Table 1 Rate of alcohol use among rural versus urban youth (NSDUH, 2004)

These statistics indicate that alcohol use becomes a more serious problem around the ages of 16-17, the age when most youth begin to drive cars. The combination of alcohol and cars is deadly, yet teens in rural areas continue to make the choice of drinking and driving. A report by the University of California published in The Daily Bruin claims that adolescents from rural areas are four times more likely to ride in a car with an intoxicated driver than youth from urban regions (Mignot & Kersten, 2004). These, along with many other, poor decisions could adversely affect the youth's health, or even endanger his or her life. However, rural youth do not seem to associate these consequences with their behaviors as effectively as their urban counterparts do. They also are less likely to think that their parents would disapprove of behavior that could be potentially damaging to their health or lead to risky behavior such as drunk driving, as represented in Fig 1:

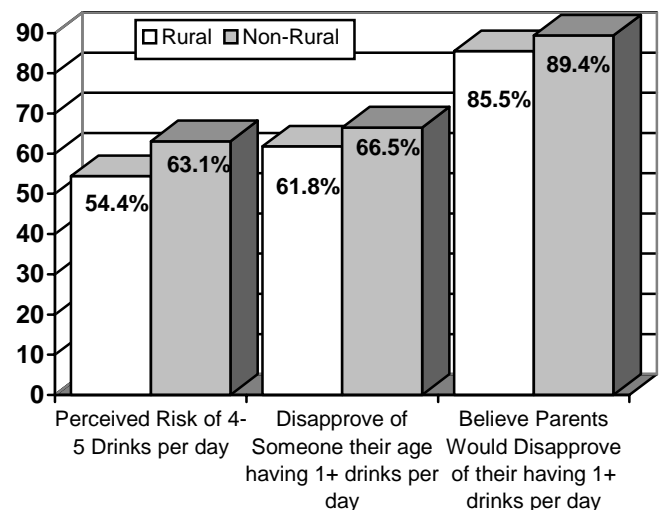


Fig 1. Youth Perception of Alcohol Risk (NSDUH, 2004)

Substance abuse in rural areas among those of the ages 12-17 and 18-25 is consistently higher than those ages 26+ (see Fig 2). Treatment options, however, are usually targeted at those ages 26+, whereas prevention is the focus for ages 12-25. Few treatment options exist for those youth who are beyond the preventative stage.

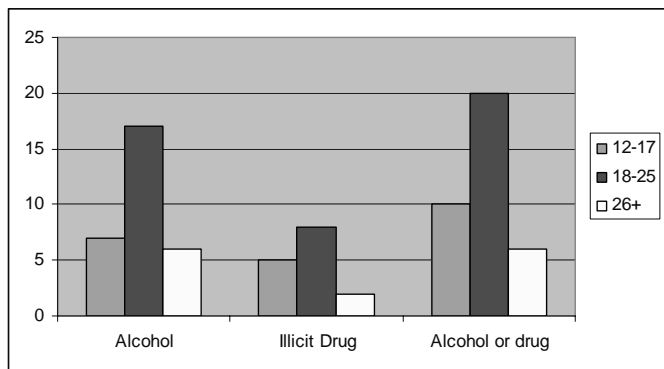


Fig 2. Substance abuse among rural youth by age (Van Gundy, 2006)

For rural areas, the consequences of substance abuse are similar to those in larger cities. Increases in crime, child abuse and neglect, health, and social issues are some of the major challenges. However, unlike their large city counterparts, rural areas do not have the resources and expertise to fully combat the problem, especially for youth. One primary issue is the large distance between population centers and/or venues.

On August 16, 2006 Governor Rick Perry approved a \$1.6 million grant to Juvenile Offender Accountability programs across the state of Texas. The governor was quoted in saying “These grants are an important step in aiding young Texans and protecting our communities. Through funding these services we are helping Texas youth, who are on a path of self destruction and crime, find their way back on the road to becoming productive citizens, able to positively contribute to their community.” (Office of the Governor, Rick Perry, 2006, August 16)

- \$85,067 of this money was given to Bexar County “to provide intensive drug intervention services to first-time juvenile drug offenders.”
- \$41,343 was given directly to the city of San Antonio to provide “intensive, long-term case management services to at-risk youth and their parents.”

Bandera, Comal, and Kendall Counties did not benefit from this grant, and statistics have shown that they may indeed be more at risk than their urban counterparts in San Antonio and other parts of Bexar County. A previous grant from Governor Rick Perry’s office (a total of \$7.5 million) focusing on drug and violence prevention was awarded on October 8, 2004. That grant gave \$101,600 to Bexar County programs, but also ignored Bandera, Comal, and Kendall Counties (Office of the Governor, Rick Perry, 2004, October 8).

The number of youth programs, whether for treatment or prevention, in Bandera, Comal, and Kendall Counties are inadequate to serve the needs of those counties. The majority of the preventative programs are school related and/or affiliated with national organizations such as the Boy Scouts/Girl Scouts of America. Table 2 highlights some of the programs already in place in the KCF counties of interest.

Bexar	Bandera	Comal	Kendall
YMCA		✓	✓
Boys & Girls Club	✓		✓
Big Brother/Sister		✓	
Little League	✓	✓	✓
4-H	✓	✓	✓
Boy/Girl Scouts	✓	✓	✓

Table 2. Youth Programs available by County.

Program unique to each outlying county include:

- **Bandera County:** Hill Country Council on Alcohol and Drug Abuse
 - Offers preventative programs and outpatient treatment; reduces risk taking behavior and substance abuse
 - Program type: prevention and treatment
- **Comal County:** Communities in Schools of South Central Texas
 - Offers supportive social work services to youth and their families, also a stay-in-school program
 - Program type: prevention
- **Kendall County:** Roy Maas’ Youth Alternatives
 - Provides individual and family counseling, crisis intervention, life skills training and parenting classes for at-risk youth and families
 - Program type: treatment and prevention

References:

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