

The Extra Mile

Advocating for evidence-based policies and practices
to prevent and reduce alcohol-related harms

GOING THE DISTANCE: TRACE Trainings

Source investigations needed as youth report increased social access to alcohol

Project Extra Mile hosted two successful trainings for law enforcement and community members - in Omaha on 9/18 and Broken Bow on 9/19 - with the support of the NDOT Highway Safety Office. The trainings focused on the growing need for enhanced enforcement of underage drinking laws that target adults that provide alcohol to underage youth.

Among other things, attendees learned about underage drinking trends in Nebraska, including but not limited to the age when they first started drinking, how much they drink, where they get their alcohol as well as the research showing the negative impacts on their, and the community's, health and safety.

Both trainings were well attended and led by Sarpy County Sheriff Jeff Davis, who discussed how his agency established and implemented its **Targeting Responsibility for Alcohol-Connected Emergencies (TRACE)** program - one type of source investigation. TRACE determines the source of alcohol in underage drinking incidents in order to hold adults who provide alcohol to youth accountable for the breaking the law.

Key topics covered during the training included:

- Recent trends in underage drinking in Nebraska
- Source investigations: rationale, methods, and barriers
- Sarpy County T.R.A.C.E. case study
- Underage drinking laws in Nebraska
- The importance of using all available resources, including community members, to prevent tragic alcohol-related outcomes and harms, especially when it comes to our youth
- How to build robust community support for source investigation and related enforcement efforts.

To learn more about source investigations click [here](#). For Nebraska law enforcement agencies interested in funding for these types of investigations click [here](#).

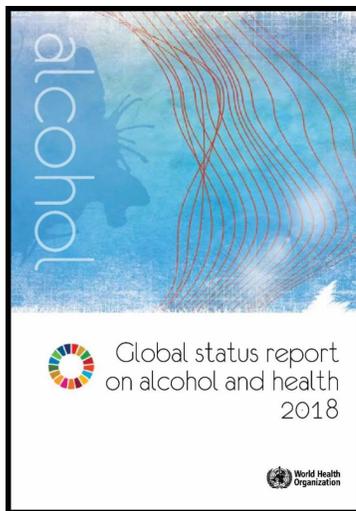


MILES TO GO: Trouble Brewing, But Solutions In Sight

The global movement for alcohol policy implementation intensifies

[The High Level Meeting on Non-Communicable Diseases](#) (NCDs, also known as chronic diseases, including cancer, heart disease, stroke, diabetes, and chronic lung disease) at the United Nations on September 27 was preceded by a rapid succession of important reports on alcohol-related harms and evidence-based policies to reduce that harm. The reports reinforced one another, in that they sketched out the massive health, economic, and social burden of excessive alcohol consumption - but also the power of science-based alcohol policies to alleviate this burden. They included:

1. The **Global Burden of Disease (GBD)** project is world's largest epidemiological undertaking, with thousands of epidemiologists and other scientists participating. In [Alcohol use and burden for 195 countries and territories, 1990-2016: A systematic analysis for the Global Burden of Disease Study 2016](#), GBD researchers determined that alcohol was responsible for about 2.8 million deaths in 2016. It was also the leading underlying cause of death for adults aged 15-49. This is significant because, while all deaths are tragic, deaths in this age group tend to have a disproportionately negative economic effect. Additionally, the study's authors came to the conclusion that no amount of alcohol consumption was "safe," given that even relatively low amounts of drinking may increase the risk for some forms of cancer. This generated a lot of media attention in that it contradicted the widely-promoted belief that light-to-moderate alcohol consumption can lead to a longer life for most people.



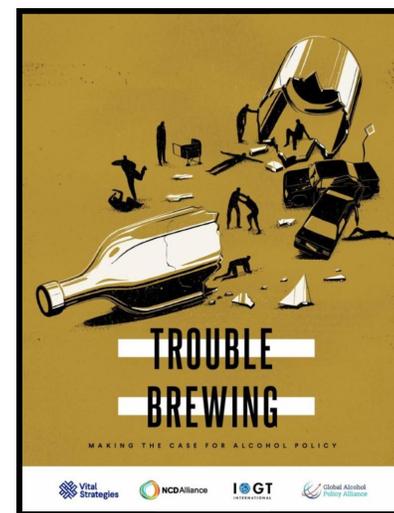
2. On September 21, the World Health Organization released the [Global Status Report on Alcohol for 2018](#). Similar to the GBD report, this report documents an unacceptably high global burden of alcohol-related harm. Specifically, the WHO found that:

More than 3 million people died as a result of harmful use of alcohol in 2016 this represents 1 in 20 deaths. More than three quarters of these deaths were among men. Overall, the harmful use of alcohol causes more than 5% of the global disease burden.

Furthermore, this burden will likely increase over the next decade due to increased alcohol use in Southeast Asia and Africa, fueled in part by aggressive alcohol industry marketing practices.

3. The report [Trouble Brewing: Making the Case for Alcohol Policy](#) was released on September 24. A project of four major global health organizations -Vital Strategies, NCD Alliance, IOGT International, and the Global Alcohol Policy Alliance (GAPA) - the report also describes the consequences harmful use of alcohol, but also describes the solid evidence behind alcohol control policies including:

- Increasing excise taxes on alcoholic beverages
- Enacting and enforcing restrictions on the physical availability of retail alcohol
- Comprehensively restricting exposure to alcohol advertising
- Drink-driving laws and blood alcohol concentration limits
- Providing brief psychosocial interventions (like SBIRT)



What do these reports mean for Nebraskans? While we have seen a lot of alcohol deregulation and normalization in recent years in our state and

neighboring states, the tide may turn as the research about the harms of alcohol (including cancer) and the effectiveness of alcohol policies (like alcohol tax increases) shows itself to be incontrovertible.

Setting the Record Straight on Alcohol Taxes, Part 2

Think alcohol taxes "punish" moderate drinkers? Think again.

We started a series last month challenging arguments advanced by the alcohol industry to prevent evidence-based alcohol tax reform.

Here's the claim we're examining this month:

Increasing alcohol taxes will just punish moderate/social drinkers

Since taxes are never popular, this line of argument seeks to enlist people who within the low-risk guidelines to convince them that these taxes are inherently unfair and that they will be "victimized."

Here are the facts:

1. Excessive drinkers would pay the vast majority of any alcohol tax increase...

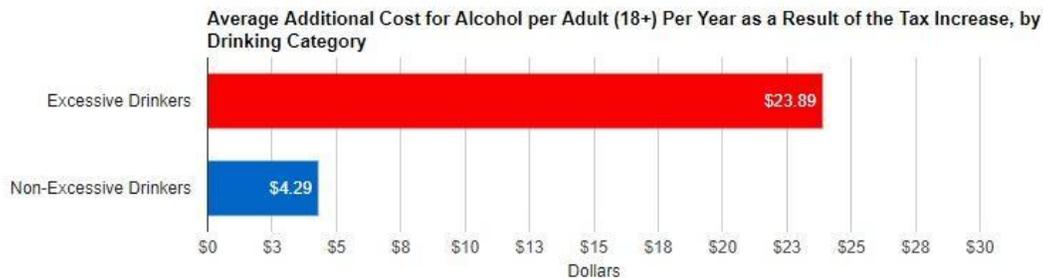
It makes sense, if one takes time to think about it. A person who is drinking lightly or occasionally is not going to be that affected by a small increase in the alcohol tax in the way that heavy drinkers will.

For example, if alcohol taxes were raised a dime-a-drink in Nebraska, someone who drank four bottles of beer a week would be paying 40 cents more week, or \$20.80 more over an entire year.

In fact, [a peer-reviewed analysis of the effects of a quarter-a-drink alcohol tax increase](#) found that:

*On a per capita basis, higher-risk drinkers would pay 4.7 times as much in net additional taxes compared with lower-risk drinkers. Those exceeding four risk criteria would pay approximately **10 times more** than those exceeding only one risk criteria, and approximately **16 times more** than those exceeding none (i.e., lower-risk drinkers). Among various strata of lower-risk drinkers, none would pay more than \$35.04 per year in net increased taxes. [emphasis added]*

Similarly, using the [Center on Alcohol Marketing and Youth Alcohol Tax Tool](#) (a collaboration among researchers from the University of Florida, the University of Illinois at Chicago, Boston Medical Center, and the Johns Hopkins Bloomberg School of Public Health) finds that a ten-cent per drink increase in the alcohol tax in Nebraska would add an average additional cost for alcohol of \$23.09 per year for excessive drinkers, but a mere \$4.29 for non-excessive drinkers.



Among Adult (18+) Drinkers, Who Pays for the Tax Increase?



2. ...and that is only fair since excessive drinking is so costly.

On the other hand, a frequent binge drinker would pay a good deal more in alcohol taxes. But that individual would also tend to cost the community more in public services like law enforcement and criminal justice, emergency medical transport, emergency medical care, social services, and more.

According to the CDC, [excessive alcohol consumption cost Nebraska about \\$1.2 billion in 2010 alone](#), or \$1.61 per drink. That's a lot of dimes.

It should also be pointed out that about 40% of Nebraska adults don't drink at all and would pay no extra taxes. An alcohol tax is a user fee that only impacts those who consume alcohol (and even then at varying levels of impact depending on consumption levels) and an attempt to balance the harms and costs of excessive consumption with the revenues the state receives annually -- approximately \$31 million in 2017.

3. Less is better

The WHO Regional Office for Europe has stated that when it comes to alcohol consumption, less is better. Research has been showing that even light-to-moderate drinking carries some risk. For example, [according to the American Institute for Cancer Research](#), a woman who drinks about 10 grams of alcohol a day (less than one standard drink) elevates her risk for breast cancer. Accordingly, any public policy which has everyone drinking a little bit less will tend to make the population that much healthier. Tax policy is one way to do that, while also raising funds for government services.

NEWS BRIEFS

Alcohol & Sexual Assault

Finding some clarity on a controversial issue

The issue of alcohol-related sexual assault has been in the news a lot lately. Because social research involving behavior can be complicated, and because of all the emotionally-loaded topics surrounding this subject (including gender roles, personal culpability, and the role of alcohol in our society), there can be strong opinions about this relationship.

Even under these circumstances, a fair reading of the research leaves little doubt that excessive alcohol consumption is a major risk factor for sexual assault.

The Centers for Disease Control and Prevention (CDC) address this issue in [*STOP SV: A Technical Package to Prevent Sexual Violence*](#):

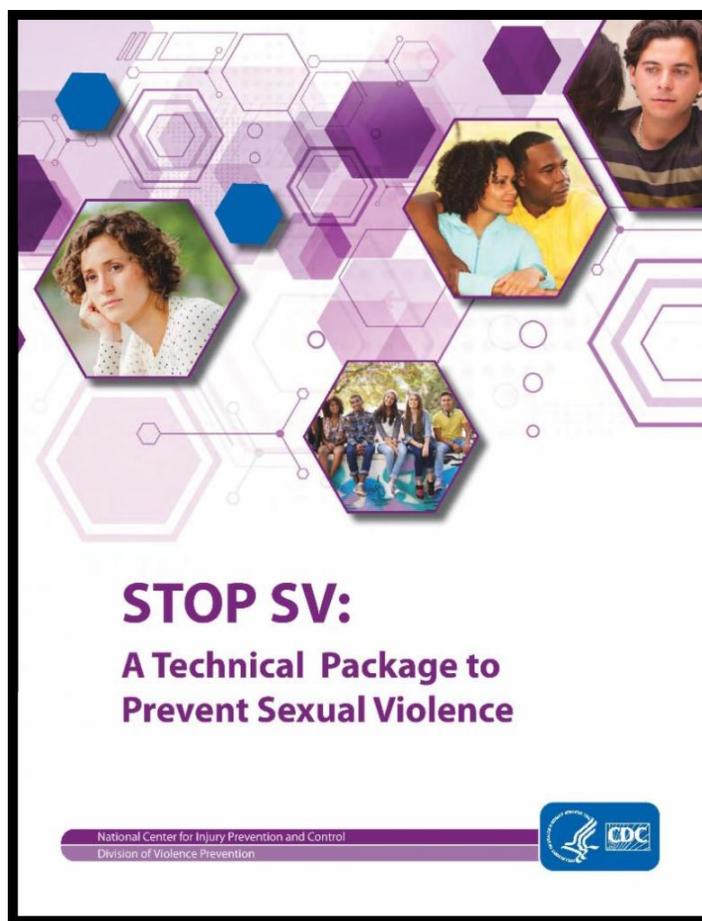
Research suggests that changes to alcohol-related policies can reduce risk for sexual violence (SV) at the community level. Excessive alcohol use interacts with other individual and community-level risk factors to increase the risk for SV perpetration.

... Alcohol policy approaches with the strongest evidence related to SV are those which work to reduce excessive alcohol use by increasing prices or reducing the density of outlets in a community.

Research has found that higher alcohol prices are associated with lower rates of SV victimization in communities, while greater outlet density is linked to higher rates of SV. [emphasis added]

A recent piece by journalist German Lopez also covers this topic thoroughly, noting the strength of a [research review by Abbey and colleagues](#) which describes the ways in which alcohol consumption can contribute to these assaults. Lopez also draws attention to [a recent study from the Center on Alcohol Marketing and Youth](#) which found that off-premise alcohol outlet density was connected to higher rates of sexual assault among other violent outcomes in Baltimore.

Furthermore, as both the CDC and Lopez note, increasing alcohol taxes is a powerful policy option to reduce excessive alcohol consumption and its many harmful consequences - including sexual assault.



Tackling College Drinking - For Real

As reported in the New York Times, the North-American Interfraternity Conference - representing most of the fraternities in the U.S. and Canada - [passed a resolution banning the consumption of hard liquor at events](#). Specifically, according to the Times, the resolution

prohibits "alcohol products above 15 percent A.B.V." from being present in "any chapter facility" - such as a fraternity house - or "at any chapter event" unless it is being sold by a licensed third party. Adults 21 and older are not exempt, officials said; beer, wine and malt beverages, which all fall below the 15 percent alcohol by volume threshold, will be allowed

This policy proscription comes in the wake of several high-profile deaths involving alcohol-related hazing rituals in [Penn State](#), [High Point University](#), and other institutions. Moreover, focusing on distilled spirits as an especially high-risk form of alcohol follows the lead of several college administrations who have instituted similar, campus-wide restrictions, including Stanford, Dartmouth, etc.

The response to this policy helps reveal the deep contradictions around college drinking in many of our communities. Colleges and the surrounding community are horrified by alcohol poisoning deaths, alcohol-related sexual assaults, and the numerous other painful consequences associated with binge drinking. At the same time, many college administrations, athletic departments, boosters, and others encourage drinking behaviors - either explicitly or implicitly.

A recent [piece published in the Omaha World-Herald](#) exemplifies some of those contradictions, and is illuminating in that regard. The piece presents the opinions of two members of a fraternity board as being worthy of consideration, while failing to garner the opinions of alcohol policy experts.

There is indeed, at times, a "double standard" regarding UNL alcohol policies - as there is many U.S. public universities with robust athletics programs. But in what direction should campus alcohol policies move to make the standard more consistent? Most public health evidence points to the benefit of tightening up college alcohol policies - including those surrounding college athletics. Loosening those policies (as suggested by the gentlemen interviewed in the article) has not been shown to work.

No policy is a "magic bullet," but the [21 Minimum Legal Drinking Age \(MLDA\) has been very effective in reducing overall underage drinking](#). What would happen if we lowered the age? New Zealand lowered their drinking age from 20 to 18 in 1999. Analysis afterwards found a considerable growth in alcohol-related harms, especially in the 16-19 age group.

Those fraternity board members are right in calling for more consistent policies around college drinking. However, our universities and colleges need to strengthen alcohol policies and restrict access to alcohol on campus in line with the [Surgeon General's Call to Action to Prevent and Reduce Underage Drinking](#). In that crucial report, our country's top public health official calls for restricting alcoholic beverage sales on campus or at campus facilities, such as football stadiums and concert halls.

	
<p>Omaha Metro Coalition Meeting</p> <p>Wednesday <u>October 10, 2018</u> 9:00 a.m.</p> <p>For more information: (402) 963-9047 www.projectextramile.org info@projectextramile.org</p> 	<p>We invite you to join us for <i>coffee and conversation</i> as we welcome </p> <p>Sgt. Neal Bonacci of the Omaha Police Department & Fred Zwonechek of the NDOT Highway Safety Office</p> <p>to discuss Alcohol Enforcement Efforts in Omaha.</p> <p>Thank you for your involvement!</p> <p> Jennifer Pollock, Coalition Chair</p> <div data-bbox="657 1409 1252 1675" style="border: 2px solid red; padding: 10px;"><p>NEW LOCATION MEETING LOCATION: National Safety Council Lower Level 11620 M Circle, Omaha NE Use Lower Level, West Entrance</p></div>

