

Alcohol Policy and Use in 2023: An Update

Tuesday, January 10, 2023

*Hosted by the New England (HHS Region 1) Prevention
Technology Transfer Center*



Funding Information

This event is supported by the New England Prevention Technology Transfer Center, supported through Cooperative Agreement #5H79SP081020-05 from the Department of Health and Human Services, Substance Abuse and Mental Health Services Administration.

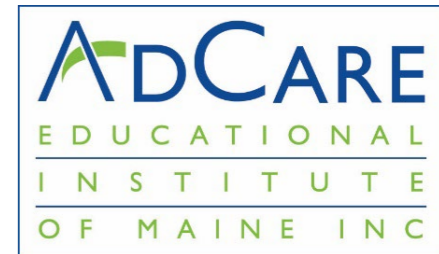
At the time of this publication, Miriam E. Delphin-Rittmon, Ph.D, served as Assistant Secretary for Mental Health and Substance Use in the U.S. Department of Health and Human Services and the Administrator of the Substance Abuse and Mental Health Services Administration.

The opinions expressed herein are the view of the presenters and do not reflect the official position of the Department of Health and Human Services (DHHS), SAMHSA. No official support or endorsement of DHHS, SAMHSA, for the opinions described in this document is intended or should be inferred.

Presented January 10, 2022

New England Prevention Technology Transfer Center

- The New England PTTC, part of the PTTC network, translates prevention science into trainings and technical assistance products to guide the prevention workforce in adopting and implementing prevention science in their communities.
- Services and products include webinars, online courses, in-person events, learning communities, resource development, and tailored intensive technical assistance
- Find us online:
 - <https://pttcnetwork.org/centers/new-england-pttc>
 - Twitter: @NewEnglandPTTC or Facebook: New England PTTC
 - Contact us: newengland@pttcnetwork.org

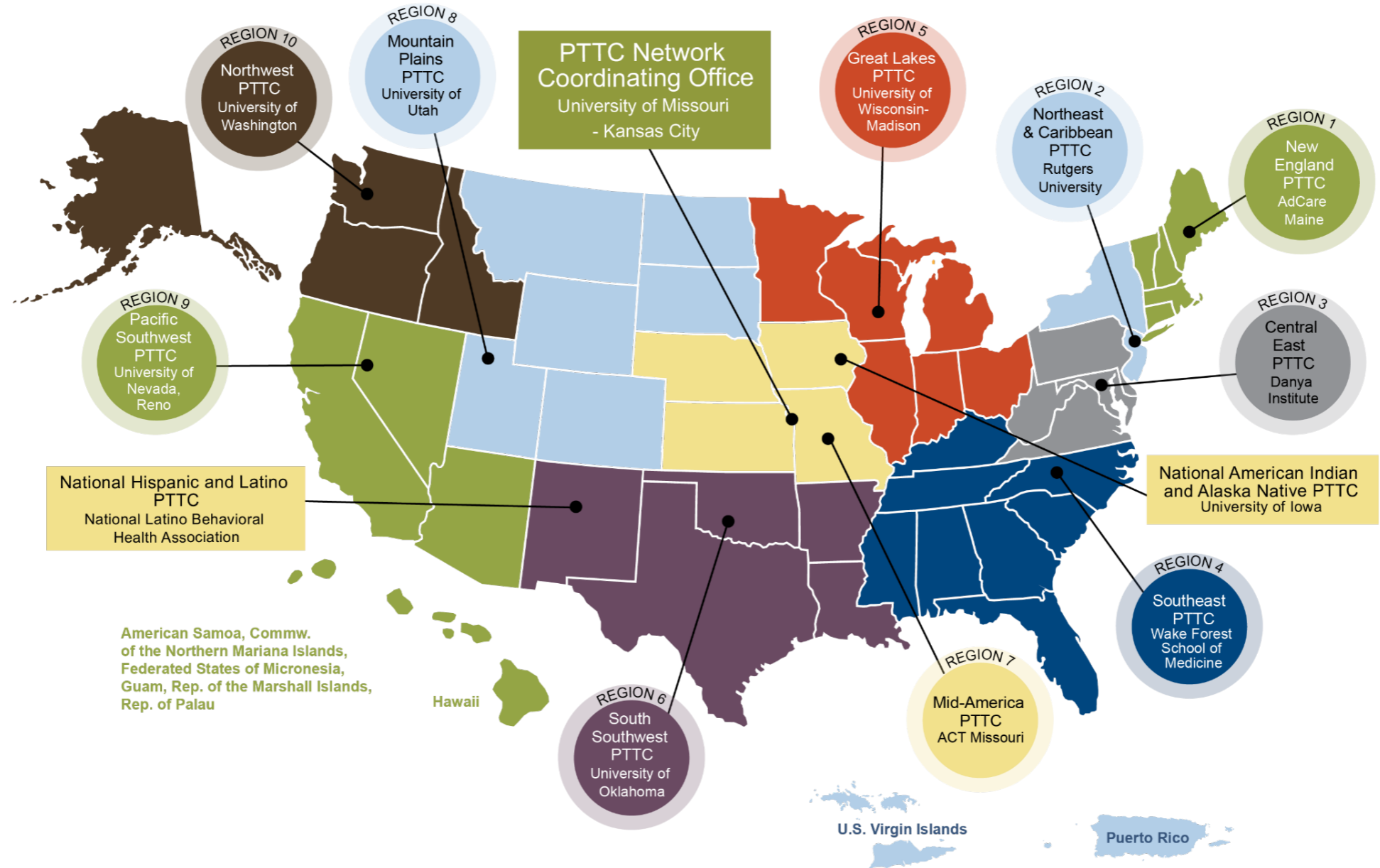




PTTC

Prevention Technology Transfer Center Network
Funded by Substance Abuse and Mental Health Services Administration

PTTC Network



The use of affirming language inspires hope.

LANGUAGE MATTERS.

Words have power.

PEOPLE FIRST.

The PTTC Network uses affirming language to promote the application of evidence-based and culturally informed practices.

Today's speakers and agenda:

- **Cassandra Toure**, Director of Public Policy, National Alcohol Beverage Control Association (NABCA)
- **Liz Parsons**, Associate Director, Center for Advancing Alcohol Science to Practice
- **Kate Frey**, Vice President of Advocacy, New Futures, Inc.
- Questions & Answers
- Brief Evaluation survey

New England PTTC (HHS Region 1)
Tuesday, January 10, 2023
1:00-2:00 pm ET

Alcohol Policy and Use in 2023: *An Update*

Cassandra Tourre
Director, Public Policy



NABCA



NABCA

Introduction

To support member jurisdictions in their efforts to protect public health and safety and ensure responsible and efficient systems for beverage alcohol distribution and sales



**FOUNDED
1938**



**CONTROL
SYSTEMS**



**BROAD
MEMBERSHIP**



**CREDIBLE
INFORMATION**



**NOT ADVOCACY
NOR INDUSTRY**



Evolving Alcohol Landscape



BEVERAGE CATEGORY

Spirits-based, lower-proof, ready-to-drink cocktails in a can and increased alcohol beverage by volume content for beer are blurring the once distinct lines between beverage categories

HOME DELIVERY

Direct shipping of alcohol across state borders and expansions for home delivery by on-premise licensed operators through use of own employee and third-party delivery apps prove challenging for compliance and strain regulatory resources

PANDEMIC HARDSHIPS

Lowered age of servers to address employee shortages, permitted cocktails to-go and licensed nontraditional settings (e.g., parks, sidewalks) to allow for consumption outside requiring more training for licensees to safeguard against harms

ON-PREMISE LICENSEES

Curbside Pick-up

Spirits-Based Drinks

Legend:

Yes - Law, permanent

Yes - Law, sunset

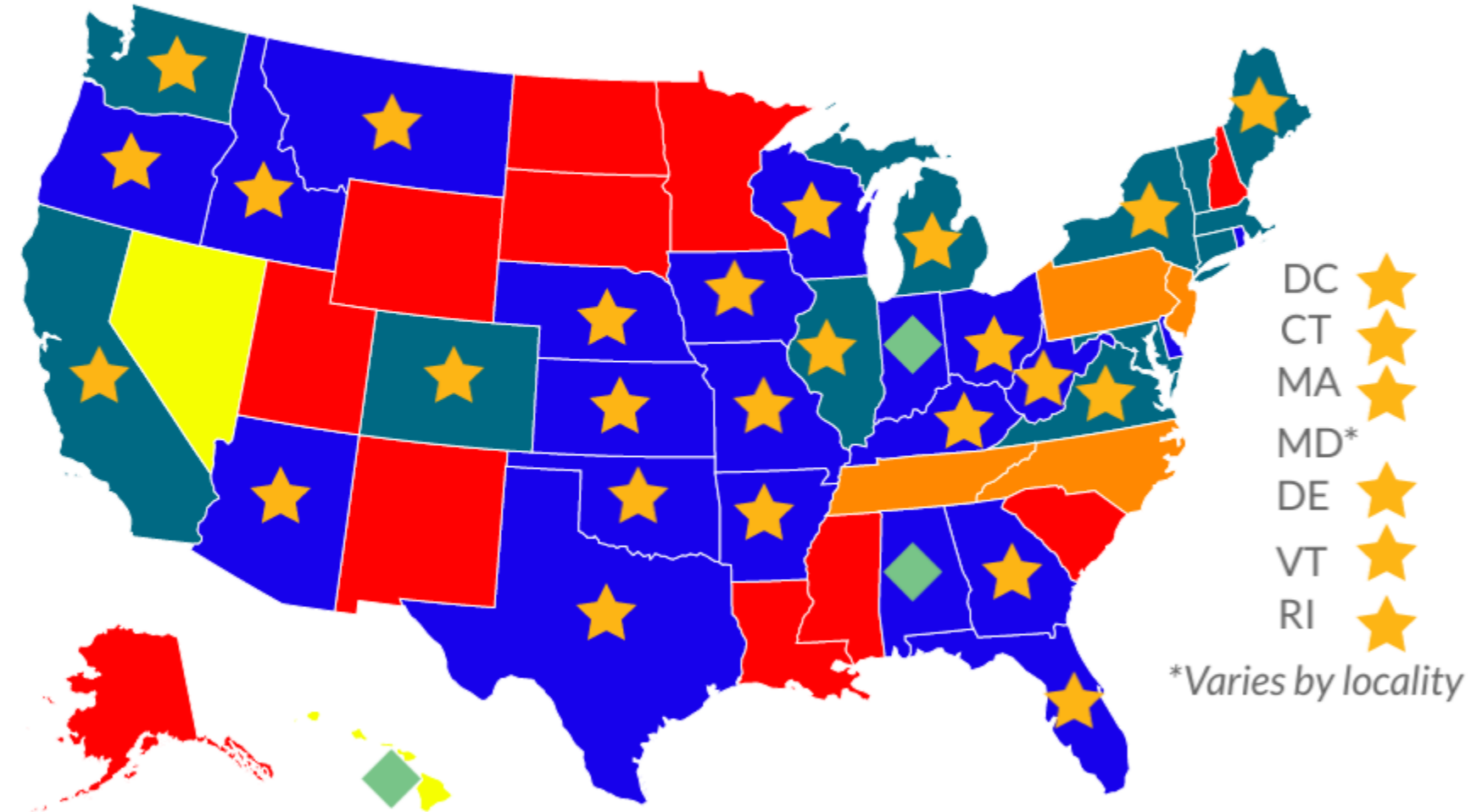
No - Order expired

No

Varies by locality

On-premise licensees = Both
Bars and Restaurants

SOURCE: NABCA (1/3/2023)



◆ Manufactured-sealed drinks only

★ Drinks mixed on-premise



ON-PREMISE LICENSEES

Home Delivery

Spirits-Based Drinks

Legend:

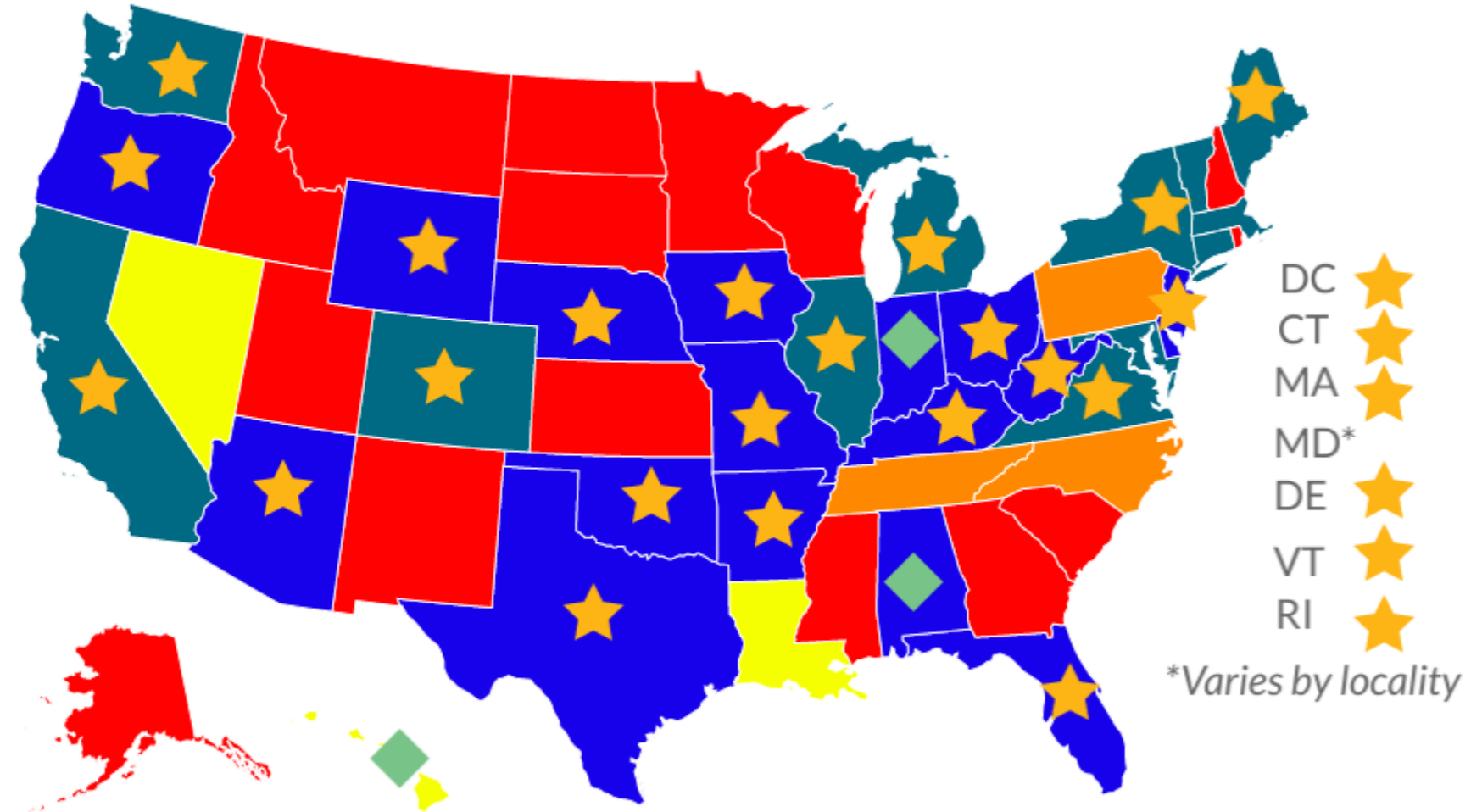
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ALCOHOL TO-GO

On-Premise Licensees (e.g., Bars, Restaurants)



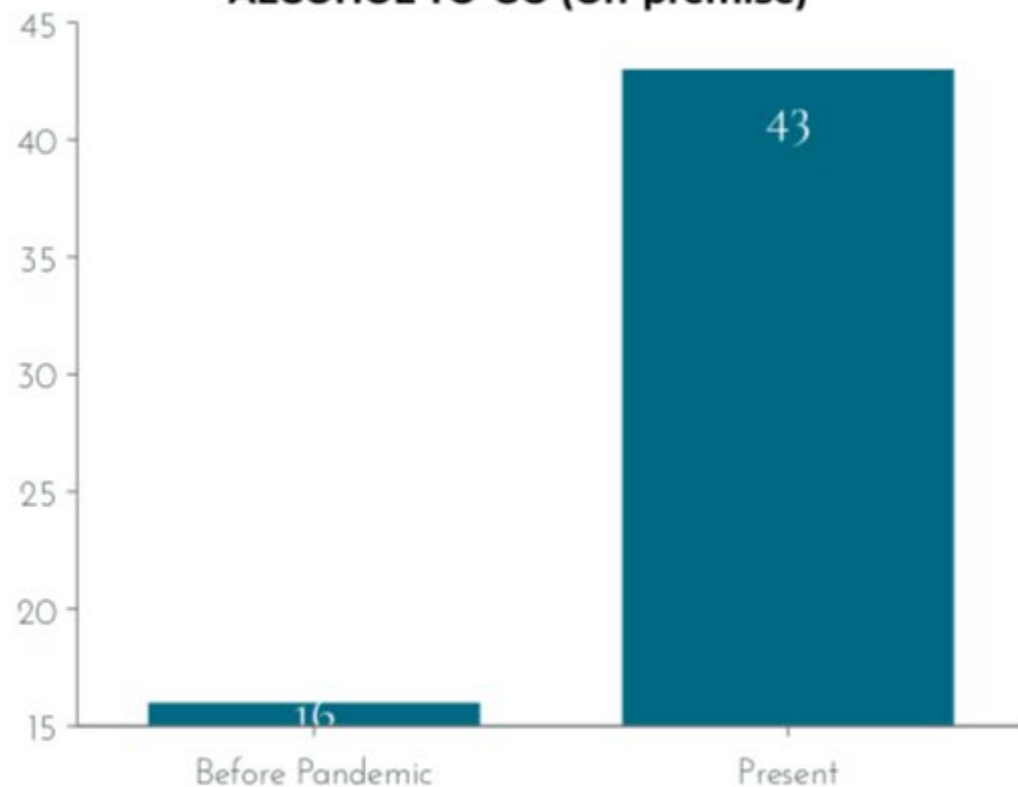
While **only 16** jurisdictions permitted alcohol to-go by on-premise licensees prior to COVID-19, **all but 8** allow alcohol to-go in some form.



169%
INCREASE

SOURCE: NABCA (1/3/2023)

ALCOHOL TO-GO (On-premise)



OFF-PREMISE LICENSEES



BEFORE PANDEMIC



CURRENT



Alabama, Georgia, and Wyoming passed permanent laws expanding delivery and curbside pick-up

Some states allowed third-party delivery services from off-premise retailers (Iowa, Louisiana)

Curbside pick-up of alcohol from off-premise retailers was also expanded in 13 states, 9 of which did so through ABC guidance without clear expiration parameters set

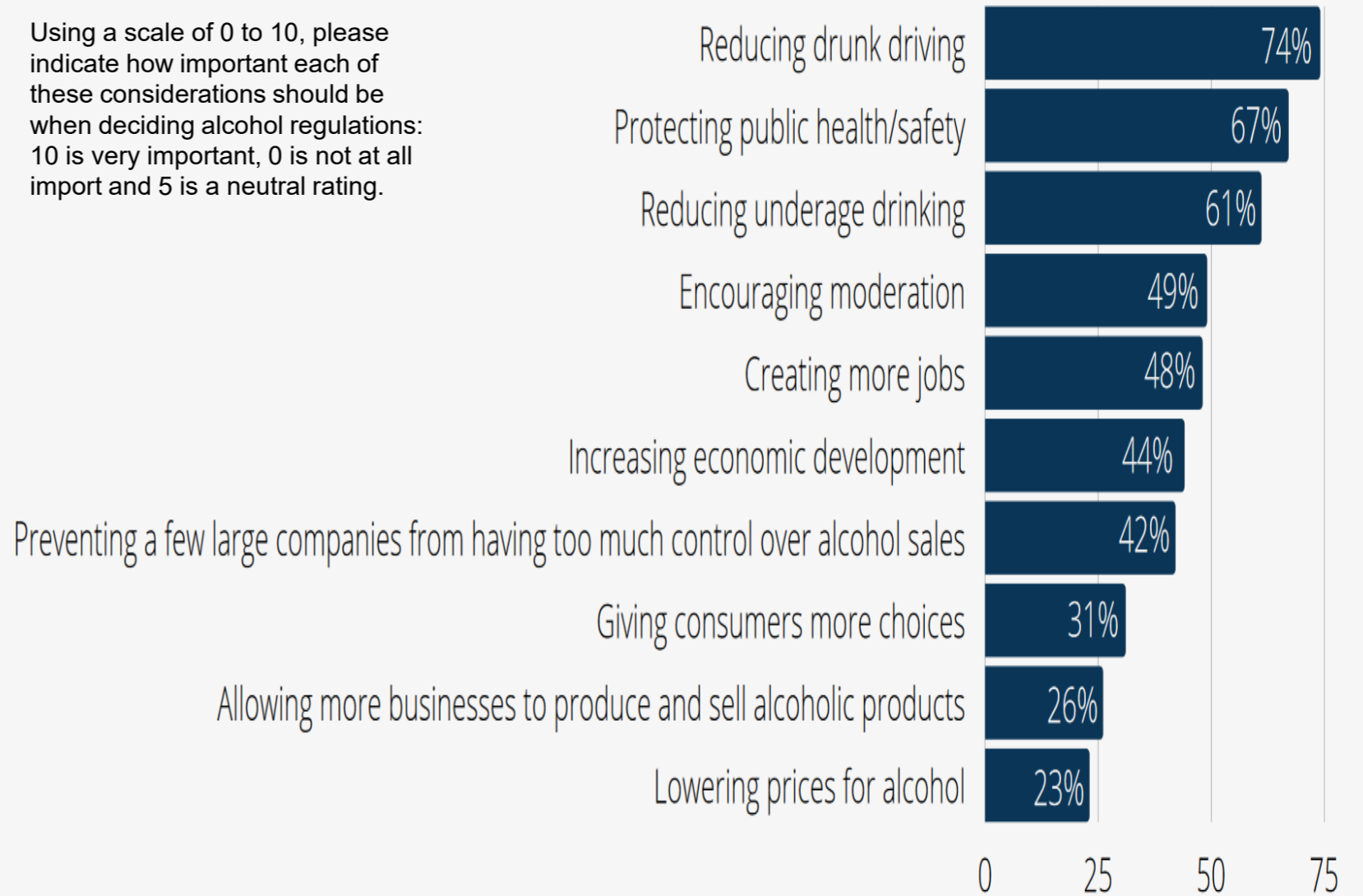
Some states expanded alcohol curbside pick-up and delivery for distilleries and breweries in addition to package alcohol stores (North Carolina, Virginia)

SOURCE: NABCA (1/3/2023)

PUBLIC HEALTH AND SAFETY SHOULD BE A PRIORITY

Voters want to see lawmakers address drunk driving.

Using a scale of 0 to 10, please indicate how important each of these considerations should be when deciding alcohol regulations: 10 is very important, 0 is not at all important and 5 is a neutral rating.



“

Americans want lawmakers to prioritize public health and safety over convenience and price when weighing changes to alcohol regulations.

”



CONSUMPTION INCREASES SIZEABLE

“ In the U.S., alcohol sales increased more in 2020 than anytime in the prior 50 years. ”

- Dr. Aaron White, NIAAA

White House Series of Virtual Conversations on the Science Behind the Mental Health Crisis
Webinar: "The Science Behind Alcohol Misuse as a Coping Mechanism"
August 4, 2022



TRENDS IN ALCOHOL CONSUMPTION



Drinking Patterns

2000-2016

PRE PANDEMIC

Between 2000-2016 a net increase of 3% in alcohol consumption and 7.5% in binge drinking occurred per decade. Greatest among women, Blacks, and those 50+

Gruza et al. 2018

April -June 2020

EARLY PANDEMIC

U.S. retail alcohol sales increased by 34%.* Off-premise alcohol volume need only rise by 22% to offset pandemic related on-premise declines**

**Lee et al. 2021 **Nielsen, 2021*

Mar 2020 -Jan 2021

MID PANDEMIC

42-week survey found moderate drinkers, some increased and stopped, while others increased and sustained

Leventhal et al. 2022

Frequency Increased

Males, Whites, middle-aged/older adults, college degree recipients, those consistently working, and those above the poverty limit

Intensity Increased

Males, Whites, nonmarried, those without college degree, 18 to 39-year-olds

TRENDS IN ALCOHOL USE



Emergency Room Visits Increased

Quarterly alcohol-related ER visits increased by 7–24% over 2018-2019

Esser et al., 2022



Alcohol-related Deaths Doubled

Number of deaths involving alcohol increased by 26% from 2019-2020

White et al., 2022



Impaired Driving Progress Stalled

Alcohol-impaired driving traffic deaths are up 14% from 2019 to 2020

NHTSA, 2022

Resources & Data



Policy & Research

Welcome to the NABCA public policy and research resource center. Our staff are seasoned professionals with decades of experience in policies related to alcohol regulation, enforcement, law and public health. We hope you find our resources valuable to your alcohol policy efforts.



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THANK YOU

Cassandra Tourre
Director, Public Policy
policy@nabca.org



Liz Parsons, Associate Director Center for Advancing Alcohol Science to Practice





Center for Advancing Alcohol Science to Practice



**Alcohol science for
the community good.**

We build the capacity of communities to use alcohol science for healthy, safe, and equitable neighborhoods through evidence-based, population-level strategies.

We offer community and state partners technical assistance (TA) to **move toward the policy solutions that science shows make lasting change to reduce excessive alcohol use**, such as the strategies outlined in the Community Preventive Service Task Force's Community Guide.



Funding

The Center for Advancing Alcohol Science to Practice is supported by the Centers for Disease Control and Prevention of the U.S. Department of Health and Human Services (HHS) as part of a financial assistance award totaling \$388,652.33 with 100 percent funded by CDC/HHS.

The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by CDC/HHS, or the U.S. Government.

Excessive alcohol use includes:



Binge Drinking

For women, 4 or more drinks consumed on one occasion

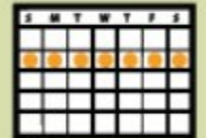


For men, 5 or more drinks consumed on one occasion



Heavy Drinking

For women, 8 or more drinks per week



For men, 15 or more drinks per week




Any alcohol used by pregnant women



Any alcohol used by those under the age of 21 years

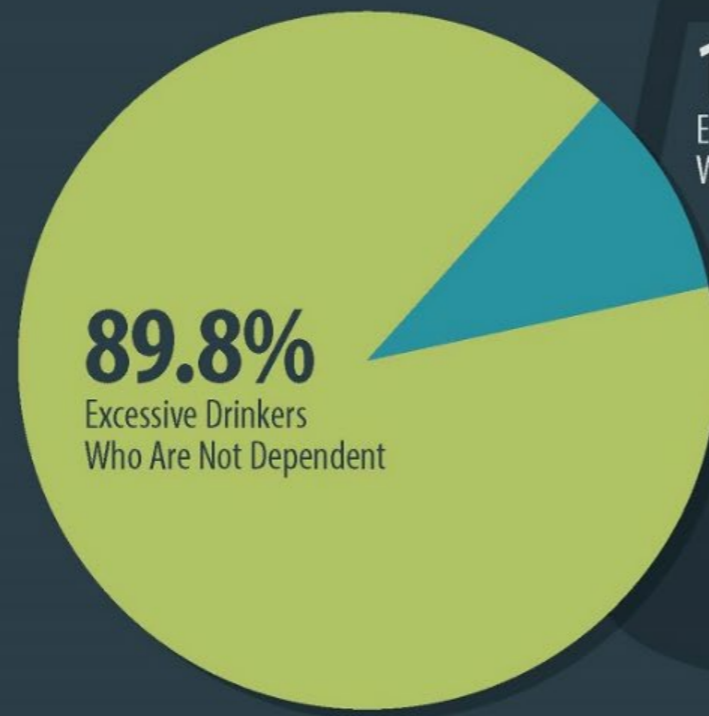


U.S. Department of Health and Human Services
Centers for Disease Control and Prevention



**More than 140,000 people die
from excessive alcohol use
in the U.S. each year**

9 out of 10 excessive drinkers are **not** alcohol dependent.



10.2%
Excessive Drinkers
Who Are Dependent

89.8%
Excessive Drinkers
Who Are Not Dependent



CS252939-A

PREVENTING CHRONIC DISEASE
PUBLIC HEALTH RESEARCH, PRACTICE, AND POLICY

www.cdc.gov/pcd/issues/2014/14_0329.htm
www.cdc.gov/alcohol

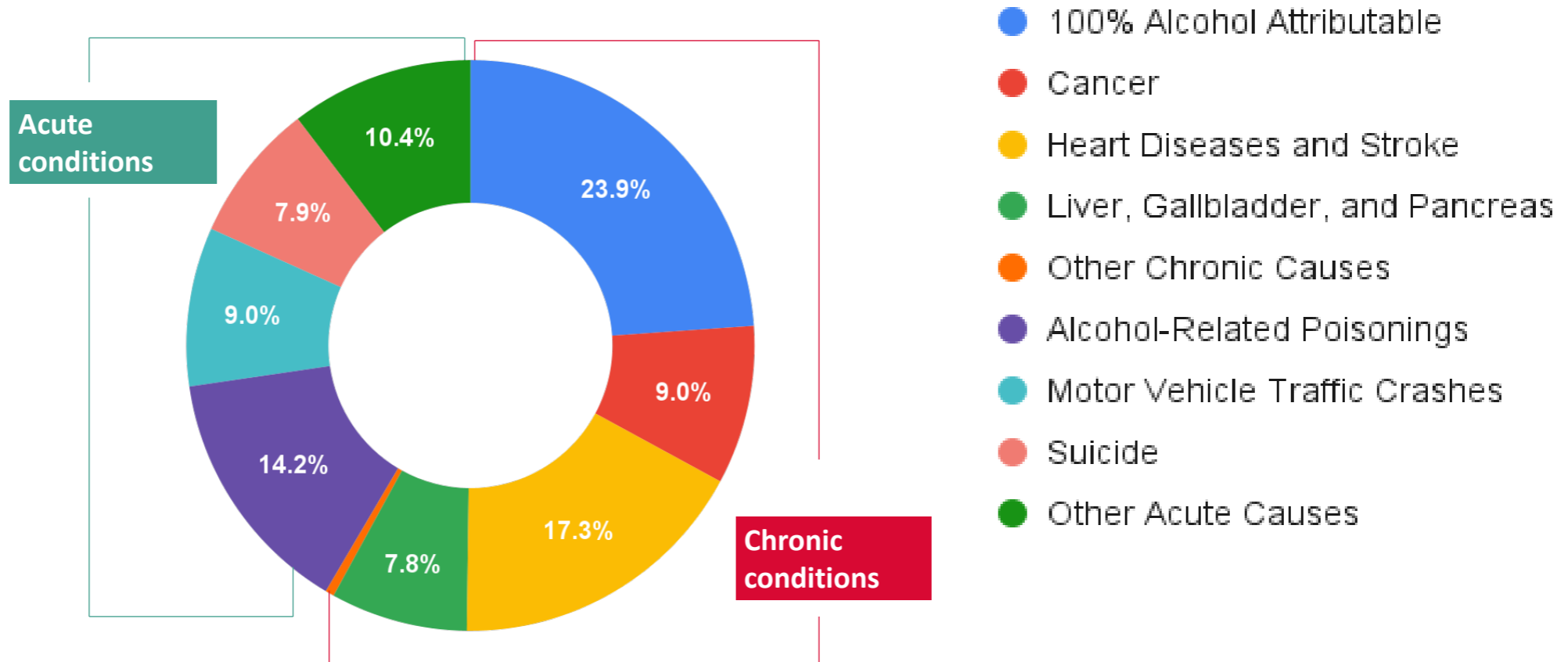
According to 2019 YRBS data,

A large red circle is centered on the page. Inside the circle, the text '29%' is written in a large, white, sans-serif font. Below the percentage, the text 'of high schoolers' is written in a smaller, white, sans-serif font. Two vertical teal bars are positioned on either side of the red circle, extending from the top to the bottom of the circle's vertical span.

29%
of high schoolers

Have drunk in the past 30 days

Alcohol Attributable Deaths



Binge Drinking is the Most Deadly, Costly & Common Pattern of Excessive Drinking in the U.S.

42% of the deaths due to excessive drinking

90% of excessive drinkers binge drink



55% of the Years of Potential Life Lost

77% of the economic costs

Almost half of all alcohol-attributable deaths are from binge drinking

www.cdc.gov/ardi; Esser et al. 2014 PCD; Sacks et al. 2015 AJPM



Center for Advancing
Alcohol Science to Practice

Alcohol is a contributing factor to leading preventable causes of death among young people

Unintentional Injury

10 Leading Causes of Death, United States
2020, Both Sexes, All Ages, All Races

	<1	1-4	5-9	10-14	15-24	25-34	35-44	45-54	55-64	65+	All Ages
1	Congenital Anomalies 4,043	Unintentional Injury 1,153	Unintentional Injury 685	Unintentional Injury 881	Unintentional Injury 15,117	Unintentional Injury 31,315	Unintentional Injury 31,057	Malignant Neoplasms 34,589	Malignant Neoplasms 110,243	Heart Disease 556,665	Heart Disease 696,962
2	Short Gestation 3,141	Congenital Anomalies 382	Malignant Neoplasms 382	Suicide 581	Homicide 6,466	Suicide 8,454	Heart Disease 12,177	Heart Disease 34,169	Heart Disease 88,551	Malignant Neoplasms 440,753	Malignant Neoplasms 602,350
3	Sids 1,389	Homicide 311	Congenital Anomalies 171	Malignant Neoplasms 410	Suicide 6,062	Homicide 7,125	Malignant Neoplasms 10,730	Unintentional Injury 27,819	Covid-19 42,090	Covid-19 282,836	Covid-19 350,831

Top 3

Alcohol is attributed to...

47%

of homicides



32%

of falls



28%

of motor vehicle crashes



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Alcohol is attributed to...

24%

of suicides



18%

of firearm injuries



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Alcohol also harms people other than the drinker



Physical, sexual, and psychological violence



Property crimes



Harms to fetuses from drinking by pregnant people



Financial harms



Earlier age of initiation of drinking and increased frequency among youth in the same household



Crashes involving other drivers



Child neglect and maltreatment



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Alcohol and Inequities



Alcohol harm paradox

Those of lower SES experience more alcohol-related harms despite those of higher SES drinking more on average



Clustering of alcohol outlets in Black and Latinx/-e communities



Targeted advertising to BIPOC and LGBTQ+ communities



Women experience more severe alcohol-related harms despite drinking less than men on average





Alcohol and COVID-19

- Sales from off-premise alcohol outlets were up 30% in 2021 compared to 2018 and 2019 (Census Bureau retail sales data)
- Nearly 1 in 4 (23%) of adults reported drinking more alcohol to cope with pandemic-related stress (American Psychological Association)
- 25.5% increase in the number of deaths involving alcohol between 2019 and 2020¹
- Alcohol-related ED visit rates increased during 2020 vs 2018- 2019²

Many states have made or are in the process of making home delivery and cocktails-to-go policies permanent, but compliance efforts are not keeping pace.

1. White AM, Castle IP, Powell PA, Hingson RW, Koob GF. Alcohol-Related Deaths During the COVID-19 Pandemic. JAMA. 2022 May 3;327(17):1704-1706. doi: 10.1001/jama.2022.4308. PMID: 35302593; PMCID: PMC8933830.

2. Esser MB, Idaikkadar N, Kite-Powell A, Thomas C, Greenlund KJ. Trends in emergency department visits related to acute alcohol consumption before and during the COVID-19 pandemic in the United States, 2018-2020. Drug Alcohol Depend Rep. 2022 Jun;3:100049. doi: 10.1016/j.dadr.2022.100049. Epub 2022 Mar 27. PMID: 35368619; PMCID: PMC8957715.

Solutions

What does the evidence base tell us?

Policies that *reduce the availability and affordability of alcohol* are associated with...



REDUCED



Overall and
excessive drinking



Motor vehicle
crashes



Violence



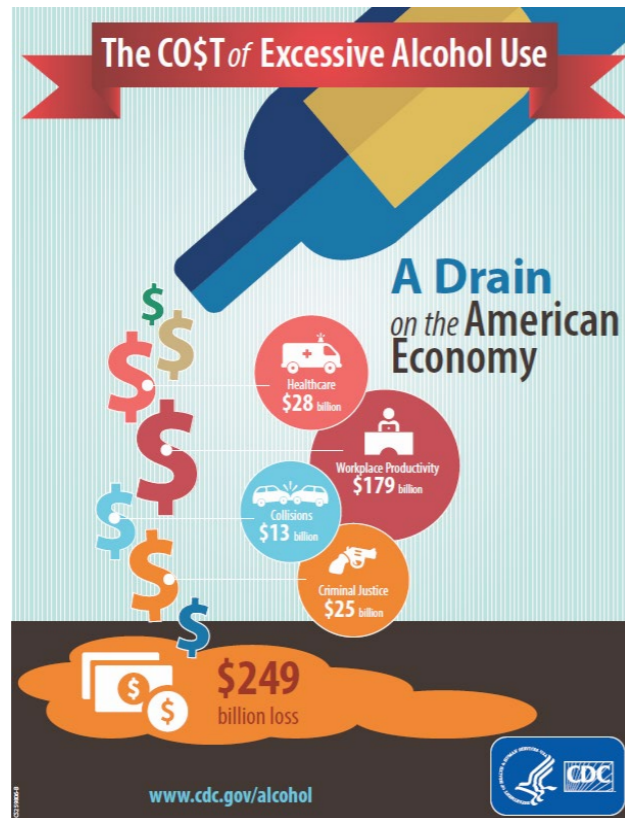
Sexually
Transmitted
Infections



Chronic disease
incidence



The costs of excessive drinking



\$249 billion in economic costs (2010)
or ~\$2.05/drink




People other than the drinker and local
and state governments bear most of the
cost of excessive drinking.











Evidence-Based Strategies to Reduce Excessive Drinking




www.thecommunityguide.org/alcohol











CPSTF FINDINGS ON EXCESSIVE ALCOHOL CONSUMPTION

The Community Preventive Services Task Force (CPSTF) has released the following findings on what works in public health to prevent excessive alcohol consumption. These findings are compiled in The Guide to Community Preventive Services (The Community Guide) and listed in the table below. Use the findings to identify intervention strategies you could use for your community.

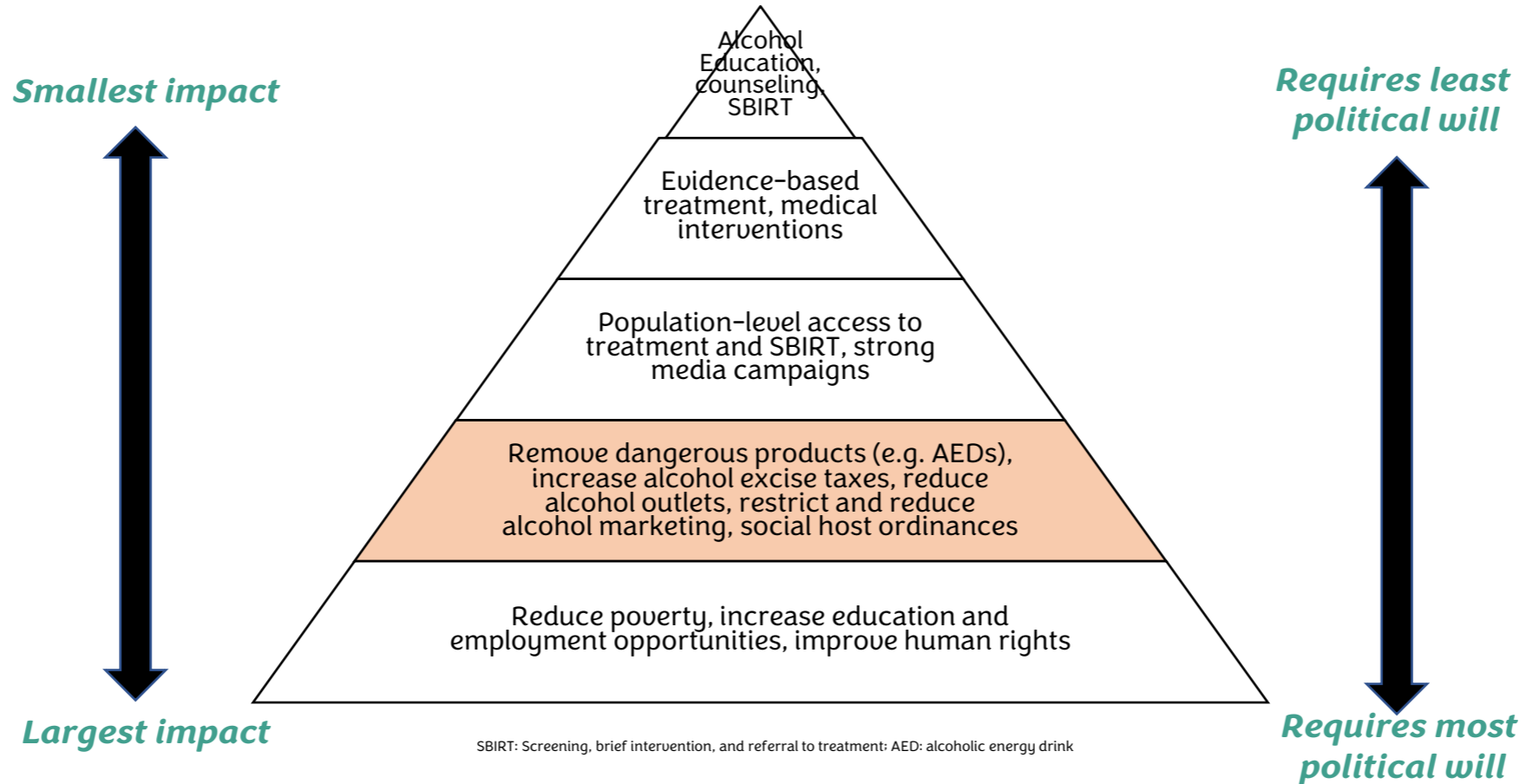
Legend for CPSTF Findings:  Recommended  Insufficient Evidence  Recommended Against (See detailed description on the next page.)

INTERVENTION	CPSTF FINDING
Dram shop liability	
Electronic screening and brief intervention (e-SBI)	
Enhanced enforcement of laws prohibiting sales to minors	
Increasing alcohol taxes	
Maintaining limits on days of sale	
Maintaining limits on hours of sale	
Overservice law enforcement initiatives	
Privatization of retail alcohol sales	
Regulation of alcohol outlet density	
Responsible beverage service training	

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Structural and systemic changes at the population level can have the greatest impact on health



As adapted from Frieden 2010 by David Jernigan PhD, Boston University School of Public Health



Center for Advancing Alcohol Science to Practice



**Alcohol science for
the community good.**



Our Approach



Amplify resources
and increase
capacity



Deliver training and
technical
assistance



Enhance access to
the science



Support translation
of effective
strategies into public
health practice

Partnership Council



**Amplify resources
and increase
capacity**

Council Members

**American Institute for
Cancer Research**

**American Public Health
Association**

**American Society of Clinical
Oncologists**

**ChangeLab
Solutions**

**Community Anti-Drug
Coalitions of America**

**Consumer Federation of
America**

**Council of State and
Territorial Epidemiologists**

**National Alcohol Beverage
Control Association**

**National Association of
Counties**

**National Liquor Law
Enforcement Association**

**Network of Public Health
Law**

**Prevention Technology
Transfer Centers**

U.S. Alcohol Policy Alliance

Cadre of Experts



**Enhance
access to
the science**

- 30+ experts in the field with expertise
- Broad skills and wide knowledge-base
- Example areas of focus:
 - Evidence-based population-level strategies to reduce excessive drinking
 - Alcohol outlet density
 - Alcohol tax
 - Health equity considerations for alcohol policies
 - Alcohol advertising
 - Coalition and partnership building
 - Public Health policy communications

Our Approach



Deliver training and technical assistance



CDC's Alcohol and Public Health Website and Alcohol Portal

The screenshot shows the CDC Alcohol and Public Health website. At the top left is the CDC logo and the text "Centers for Disease Control and Prevention" and "CDC 24/7: Saving Lives. Protecting People™". A search bar is located at the top right. Below the search bar is a purple header with the text "Alcohol and Public Health". The main content area features a large graphic of the United States map filled with beer glasses, with the text "More than 140,000 people die from excessive alcohol use in the U.S. each year". Below this graphic is the URL "cdc.gov/alcohol". To the right of the graphic are two call-to-action boxes: "Drink Less, Be Your Best" with a "Tips for drinking less" button, and "Check your drinking." with a "This quick assessment can help." button.

www.cdc.gov/alcohol

The screenshot shows the CDC Alcohol Portal website. At the top is a blue header with the text "Alcohol Portal" and social media icons. Below the header is a large banner with the title "Effects of Drinking Alcohol on Your Health" and a graphic of colorful circles containing icons for health, pregnancy, car crashes, and alcohol. Below the banner is a paragraph of text: "While most people know that drinking too much alcohol can lead to injuries and deaths in car crashes, many people do not know that drinking too much alcohol also can increase the chances of cancer, suicide, unintended pregnancies, sexually transmitted infections, and other negative health outcomes. CDC provides for the common defense of the country and, as such, has a significant role in fighting excessive alcohol use through the use of our science, tracking, and service to the countless Americans and their families affected by drinking too much." Below the text are four content cards: "Binge Drinking" with a photo of beer bottles and the text "Learn more about its risks and its impact.", "Drinking & Driving" with a photo of a person holding a glass and the text "Get the facts.", "Underage Drinking" with a photo of a young man and the text "Help prevent and reduce underage drinking.", and "Alcohol & Pregnancy" with a photo of a pregnant woman and the text "Learn the effects that drinking alcohol during pregnancy can have".

www.cdc.gov/alcoholportal

Connecting with Others

**US Alcohol Policy
Alliance**

<https://www.alcoholpolicy.org/>
Info@alcoholpolicy.org



**ATOD Section's
Alcohol Action Network**

<https://www.alcoholactionnetwork.com/>
leadership@apha-atod.org





Center for Advancing
Alcohol Science to Practice

Sign Up for Our Mailing List



Thank you!

ep@alcoholsciencetopractice.org

Info@alcoholsciencetopractice.org

www.alcoholsciencetopractice.org

Kate Frey, Vice President of Advocacy, New Futures, Inc.



State Action on Pandemic Alcohol Policies

January 10th 2023

new**future**s[→]

About New Futures



New Futures envisions a State and local communities whose **public policies support the health and wellness** of all New Hampshire residents.

Policy Focus Areas



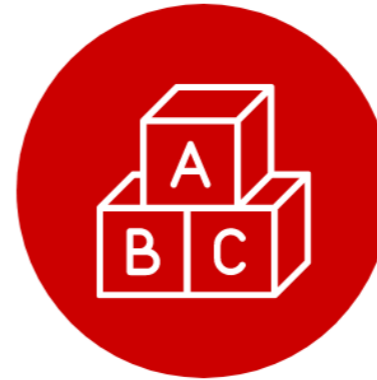
**ALCOHOL
& OTHER
DRUGS**



**ACCESS TO
TREATMENT**



HEALTH



**EARLY
CHILDHOOD**



**CHILDREN'S
BEHAVIORAL
HEALTH**

How We Work



Advocate



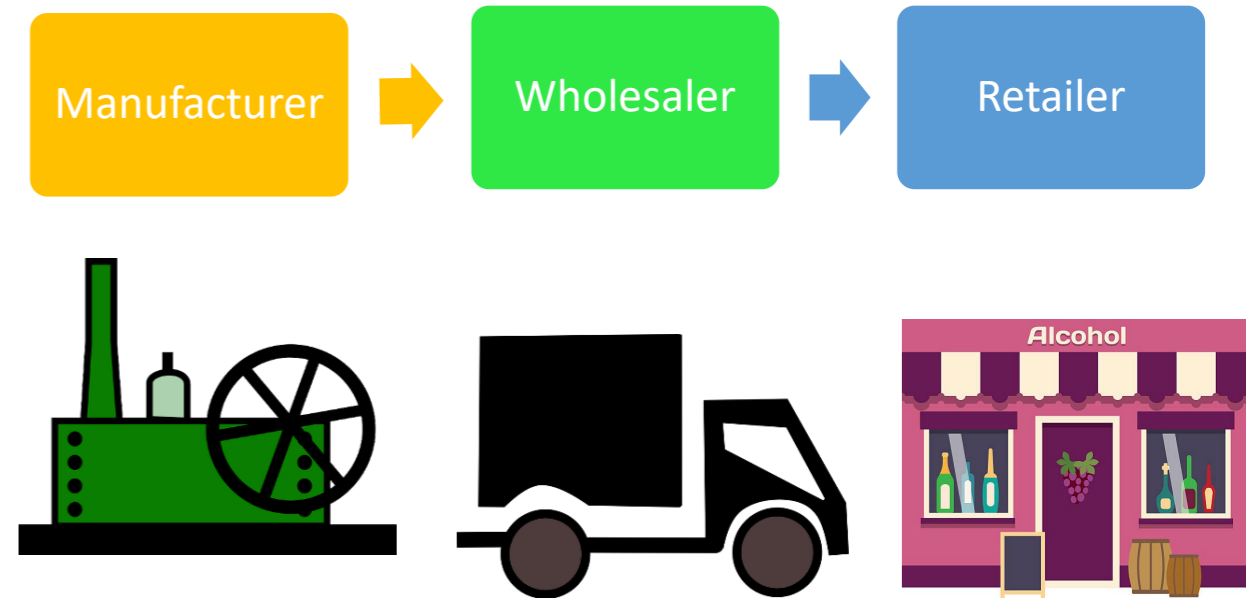
Collaborate



Educate

Three-Tier System

- States adopted a three-tier system
- No one party can be involved in more than one tier
- Each tier regulated independently
- Significant variability for each state- licensing or control states





NH Three Tier System

- NH is one of 17 alcohol **control** states
- New Hampshire Liquor Commission was established in 1933 (RSA 175-180)
- Regulates the manufacture, possession, sale, consumption, importation, use, storage, transportation and delivery of wine, spirits, and malt or brewed beverages in the state.
- All sales of wine and spirits sold in the state are by licensees of the Commission or through the 79 wine and spirits stores operated by the Commission.



NH Three Tier System

- NHLC collects license fees for the manufacturing, sale, transportation, warehousing of alcoholic beverages and \$0.30 per gallon tax on beer:
- In Fiscal Year 2021, NHLC sales reached \$765 million, a 5-percent increase or \$36.5 million over the previous year.
- Funds support essential state programs, including education, health and social services, transportation and natural resource protection
- Funds the Alcohol Abuse Prevention and Treatment Fund, which utilizes a percentage of NHLC profits to fund prevention, treatment and recovery programs. **\$10 million in 2021.**

Benefits and Threats

Benefits

- Regulatory
- Economic
- Commercial
- Public Health



Threats

- Blurred lines between tiers
- Weakened marketing restrictions
- Increased alcohol percentages in products
- Undercut pricing in neighboring states
- Online Sales

Today's drink special:
the Quarantini



It's just a
regular martini
but you
drink it alone,
in your house

THE NEW SPEAKEASY: UBER EATS HAS TURNED INTO A ROGUE COCKTAIL BAR

'Hell yeah': Some states allowing takeout alcohol along with food orders during coronavirus pandemic

Senior hour at the liquor store? Now happening in Mecklenburg County.

Opinion: Yes liquor stores are essential businesses



NH Liquor & Wine Outlets Stay Open Despite COVID-19 Virus

Missouri to temporarily allow curbside liquor sales during COVID-19 outbreak

U.S. ALCOHOL SALES INCREASE 55 PERCENT IN ONE WEEK AMID CORONAVIRUS PANDEMIC

History of Alcohol to Go in NH

- SENATE BILL 512 relative to transportation of beverages and wine- introduced January 2020
- Covid-19 delays 2020 legislative session
- Gov Sununu signs Executive Order –April, 2020- temporary authorization for take-out or delivery of beer or wine.
(language from SB 512)
- Legislation to make permanent passed through omnibus legislation later that year but with sunset provision
- Sunset provision removed in 2021 legislative session

Next Steps

- Involvement in Alcohol Action Network and the sharing of the Alcohol Assessment led to next steps.
- Meeting with NHLC in September of 2021 to discuss assessment.
- NABCA encourages states to use their education grants for assessment development.
- NHLC connected the dots and began working with us on grant .
- Grant awarded to NHLC May 2022.

Restaurant Delivery Licensee Compliance Initiative

Goal-to collect local data that can inform decision makers on how these policies are being implemented and the impact on access

- Initiation Phase- development and deployment of the survey tool; the data analysis on the survey tool and the development of the licensee training programs for the Restaurant Delivery License.
- Phase II -follow up compliance checks on all Restaurant Delivery License licensees; completing the data analysis on the compliance check results and conducting the RDL training program for all licensees.
- Phase III - final analysis of the project will include: comprehensive reports on the impact of the project and after action planning.

Thank you!

<https://www.new-futures.org/>

 NewFuturesNH

 @NewFuturesNH



Questions? Please share in the chat!

Webinar survey: <https://ttc-gpra.org/P?s=835243>

