



www.nifi.org

>> Alcohol in America

What Can We Do about Excessive Drinking?



About This Issue Guide

The use—and misuse—of alcohol is a sensitive and often personal topic. It encompasses questions of public safety, personal responsibility, and even freedom of speech. Deliberative forums on this issue may not be easy. It will be important to remember, and to remind participants, that the objective of these forums is to begin to work through the choices and trade-offs involved when addressing Americans' relationship to alcohol.

Participants in these forums may become angry, and those with strong feelings may feel attacked by those who hold other points of view. This can sidetrack the deliberation. In productive deliberation, people examine the advantages and disadvantages of different options for addressing a difficult public problem, weighing these against the things they hold deeply valuable.

The framework in this issue guide encompasses several options and provides an alternative means for moving forward in order to avoid polarizing rhetoric. Each option is rooted in a shared concern, proposes a distinct strategy for addressing the problem, and includes roles for citizens to play. Equally important, each option presents the drawbacks inherent in each action. Recognizing these drawbacks allows people to see the trade-offs that they must consider in pursuing any action. It is these drawbacks, in large part, that make coming to shared judgment so

difficult—but ultimately, so productive.

One effective way to hold deliberative forums on this issue:

- Ask people to share their general and personal views about how our society treats alcohol and the abuse of alcohol. Participants are likely to mention the concerns identified in the framework.
- Consider each option one at a time, using the actions and drawbacks as examples to illustrate what each option entails.
- Review the conversation as a group, identifying any areas of common ground as well as issues that still must be worked through.

The goal of this issue guide is to assist people in moving from initial reactions to more reflective judgment. That requires serious deliberation or weighing options for action against the things people hold valuable.

The National Issues Forums Institute

This issue guide was prepared for the National Issues Forums Institute in collaboration with the Kettering Foundation. Issue guides in this series are used by civic and educational organizations interested in addressing public issues. These organizations use the books in locally initiated forums convened each year in hundreds of communities. For a description of the National Issues Forums, log on to the website: www.nifi.org.

Other Topics and Ordering Information

Recent topics in this series include higher education, bullying, Medicare and Medicaid, and immigration. For more information, please visit www.nifi.org or contact NIF Publications at 1-800-600-4060 or info@ait.net.

Writer: Maura Casey

Executive Editor: Brad Rourke

Managing Editor: Joey Easton O'Donnell

Design and Production: Long's Graphic Design, Inc.

Copy Editor: Laura Carlson

Alcohol in America: What Can We Do about Excessive Drinking?

Copyright 2014

National Issues Forums Institute

All rights reserved.

ISBN: 978-0-945639-69-5

This publication may not be reproduced or copied without written permission of National Issues Forums Institute. For permission to reproduce or copy, please write to Bill Muse at bmuse@nifi.org.

Founded in 1927, the Kettering Foundation of Dayton, Ohio (with offices in Washington, D.C., and New York City), is a nonprofit, nonpartisan research institute that studies the public's role in democracy. It provides issue guides and other research for the National Issues Forums. For information about the Kettering Foundation, please visit www.kettering.org or contact the foundation at 200 Commons Road, Dayton, Ohio 45459.



©Tracey Thompson/Corbis ©Radius/SuperStock.com

>> Alcohol in America

What Can We Do about Excessive Drinking?

THERE IS NO BEVERAGE quite like alcohol, and none with so much religious, historical, and social significance. Alcohol has been used for thousands of years to rejoice in victories, celebrate weddings, and mourn tragedies; for millennia, it has been intrinsic to some religious ceremonies. A shortage of beer, among other supplies, influenced where and when the Pilgrims landed the *Mayflower* at Plymouth, Massachusetts. Trade in liquor and taxes on alcohol helped finance the growth of the United States.

American attitudes towards alcohol have evolved ever since. It has been both celebrated and reviled. Between the founding of the Republic and 1830, when alcohol was generally safer to drink than available water, drinking became so accepted that annual consumption reached more than seven gallons of pure alcohol per person, sparking the rise of the temperance movement, which viewed alcohol use as a moral failing. Prohibition began in 1920, making most purchases of alcohol in the United

States illegal until prohibition's repeal in 1933. Two years later, Alcoholics Anonymous, a fellowship based on a desire to quit drinking, began.

In the last 40 years, states lowered the drinking age, then raised it back to 21. The public once shrugged at drunken driving but now considers it a serious crime. While alcohol addiction is now known to be a complex brain disease, it is also widely accepted that moderate amounts of red wine can provide health benefits to middle-aged people. It would not have health benefits for those with a predisposition toward alcoholism or a number of other diseases, like breast cancer.

Most Americans are responsible in their alcohol use, but excessive use of alcohol continues to be a major public issue. It is not just a question for individuals. It costs the U.S. dearly in lives lost and dollars spent. The estimated financial cost of excessive drinking was \$223.5 billion in 2006. In 2008, one-third of all motor vehicle accidents involved alcohol. Heavy drinking on and off the road causes nearly

exceed what is considered moderate drinking, which experts say is an average of two drinks a day for men and one drink a day for women.

The consequences of heavy drinking are measurable in many ways. Excessive drinking is implicated in violence, anxiety, depression, health problems such as cancer and heart disease, risky sexual behavior, homicide, child maltreatment, and suicide. If a woman drinks during pregnancy, her baby could be born with physical and mental birth defects. Drinking to excess also takes a huge emotional toll, affecting families and friends alike.

Binge drinking is the most common form of excessive alcohol use. It occurs when, during a short period of time, an individual consumes a large amount of alcohol (four or more drinks for women, five or more for men). About 15 percent, or 33 million American adults, are binge drinkers, a rate that has stayed steady for more than a decade. Of high school students surveyed nationwide, a little more than one-fifth reported binge drinking in the



80,000 deaths annually, making it the third-leading preventable cause of death in the U.S., according to the Centers for Disease Control. Some of these deaths could be prevented if alcoholics got effective help, but only 1 out of 10 of those addicted to drugs or alcohol get treated, compared to 7 out of every 10 people who have other chronic diseases, such as diabetes or hypertension. The alcohol treatment statistics haven't changed in more than 40 years.

While many people who drink heavily are alcoholics, most are not. Up to 34 percent of Americans age 12 or older are either addicted to alcohol or engage in "risky drinking," according to the National Center on Addiction and Substance Abuse at Columbia University. Risky drinking, or heavy drinking, takes place when people

previous 30 days. Young people who drink before the age of 15 are many times more likely to develop alcoholism later on than those who wait until age 21 to drink.

Many people subscribe to the belief that drinking brings with it a number of health benefits. The studies that underlie this view indicate that there are health benefits to some individuals over 45 when the drinking is moderate—two drinks per day for men and one drink per day for women. But at least one study showed that even moderate drinking increases the risk of breast cancer in women.

Alcohol is a legal beverage, but its misuse hurts people, costs our nation billions of dollars, and makes the public less safe. The question remains, what can we do about excessive alcohol use?

People who drink excessively can create significant community problems, inflicting suffering on families, friends, and innocent bystanders alike.



Burlinghamy@Shutterstock.com

>>Protect Others from Danger

FOR ALL THE UNDERSTANDABLE CONCERN about illicit drug use in America, the drug that may be responsible for more crimes of violence, highway fatalities, and family difficulties is not illegal at all. It is alcohol.

Most moderate drinking takes place without any negative consequences, and alcohol has been a part of many social occasions without incident. For many, it is hard to imagine a wedding or retirement without a champagne toast.

Yet excessive alcohol use is also an unfortunate fact of life in America. This option says that, while drinking or not drinking is an individual choice, we must do more to reduce its impact on others.

On the Road

Some of the worst consequences of drinking are the results of auto accidents. Of the 80,000 alcohol-related deaths every year, a little over 10,000 of the fatalities are the result of drunken driving. Deaths and injuries on the roadways have decreased in recent years, as citizen advocacy groups have raised public awareness about the problem, and federal as well as state laws have gotten tougher.

Yet tough laws are not enough to deter everyone, so many localities have taken other steps to discourage drivers from having a drink before they get behind the wheel. One of the most effective involves sobriety checkpoints, where police stop cars at random. If drivers show signs of

being intoxicated, such as drowsiness or slurred speech, then police may administer a breath test for the presence of alcohol. It is estimated that sobriety checkpoints reduce alcohol-related crashes by 20 percent.

Still, the tests can be controversial, and not all states allow them, even though in 1990 the Supreme Court ruled that such stops are legal. In Australia and some European countries, the laws are tougher. There, police at sobriety checkpoints stop every driver and use breathalyzer tests for the presence of alcohol, whether they appear intoxicated or not.

Stopping before They Start

Intervening when intoxicated drivers are already on the road strikes many as too late. This option contends that bartenders and servers should consistently stop serving people who are intoxicated. Most states require this as part of their liquor control regulations. In other states, such as California, a bartender can be found guilty of a misdemeanor if he doesn't stop serving an obviously inebriated customer. Most of the time there is leeway for bartenders to use their own judgment. But some bartenders are reluctant to cut off drunken patrons because some will react by getting upset, and it is difficult to deal with angry customers.

An understanding that can help bartenders overcome this reluctance is the knowledge that businesses' liquor licenses could be suspended if customers are caught driv-

ing drunk or becoming disorderly after a night out. That's just what happened to six bars in Lawrence, Massachusetts, during the summer of 2013, when authorities cracked down on pubs whose nightlife repeatedly got out of hand, issuing citations and suspending liquor permits.

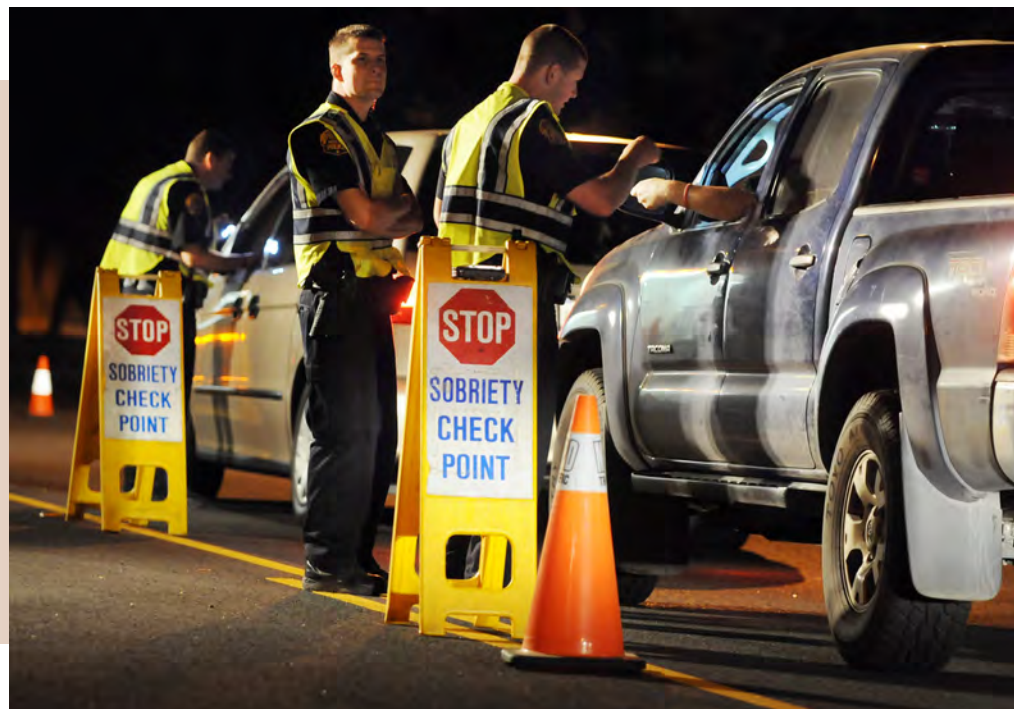
Some of the most effective interventions, though, come from friends. Individuals who are drinking excessively are more likely to listen to their friends. That's why taking away the keys of a friend who is intoxicated, or confronting them when they are sober, can be effective. "Friends don't let friends drive drunk," a tagline introduced during a prevention campaign in 1990, was credited with helping to lower the number of alcohol-related accidents the following year. It also helped popularize the notion that friends should not look the other way when a person is about to drive while under the influence.

The Game Changer

Sometimes, no matter how well-intentioned prevention efforts are, people drive drunk anyway. If that happens, this option contends, the best action is one that prevents a drunk driver from repeating his or her mistake.

"Technology is the game-changer in reducing alcohol-related crashes on our nation's roadways," said National Transportation Safety Board Chairman Deborah Hersman. Ignition interlock devices that measure the sobriety of the driver before the car will start have become increasingly common in recent years. Now all 50 states have certain

It is estimated that sobriety checkpoints reduce alcohol-related crashes by 20 percent.



©Bart Ah You/ZUMA Press/CORBIS



©iStock.com/BanksPhotos

laws that require them, and 15 states require their use on a first conviction. When New Mexico expanded its drunken driving law to force first-time offenders to use these devices, repeat drunken-driving offenses fell by 65 percent. Similar results have occurred in other areas.

Some states go even further. In the case of a repeat drunken driver in Ann Arbor, Michigan, a judge ordered the man to serve six months in prison and, upon release, made it mandatory for him to take the drug disulfiram, popularly known as Antabuse. Taken daily, Antabuse makes people violently ill if they drink alcohol. Many see this as a particularly punitive measure for courts to take. But this option says that in the case of repeat offenders, it may be necessary to protect the public.

What We Could Do

This option contends that excessive drinking creates many problems for society at large. Government, police, and communities should intervene to protect people from those negative consequences. Here are some things this option suggests that we could do, along with some drawbacks:

- Police could set up sobriety checkpoints to randomly test drivers for alcohol. This would be effective because the possibility of being stopped would make all drivers less inclined to drink before hitting the road.

But . . . *Sobriety checkpoints punish everyone for the bad behavior of a few. Most people don't drink and drive, but all are inconvenienced by sobriety checkpoints. In congested parts of the country, they add an unacceptable bottleneck to already clogged highways, and checkpoints tie up the police when they could be concentrating on violent criminals.*

- Where excessive drinking is concerned, confrontation may not be pleasant, but it can be helpful—even life-saving. People need to confront their friends and loved ones regarding harmful drinking to help them understand how they are hurting others. They need to take away their keys if they attempt to drive. Bars should stop serving people when they drink too much.

But . . . *Families are under enough stress without expecting them to have contentious conversations about alcohol use that are likely to create enormous discord. The same is true of relationships between friends. Bars that cut off customers will lose business, threatening jobs.*

- Insurance companies and governments could require interlock devices on cars to prevent convicted drunken drivers from operating a car unless they are sober. Judges could force convicted drunk drivers to enter alcohol treatment programs, or offer the use of Antabuse as an alternative to jail. This way, the public would be protected from those who violate the law when they drink.

But . . . *This would increase government and corporate intrusion in people's lives. It would require spending time and energy keeping track of people to make sure they were following the law. Some would not be able to afford the interlock device. Alcohol treatment programs have mixed long-term success and Antabuse has its own health risks.*



People who drink too much suffer. Excessive drinking contributes to the deaths of tens of thousands of people every year.



©AGI Studios

>> Help People with Alcohol Problems

MOST OF US TAKE a nip of eggnog and rum to toast the winter holidays or have a celebratory beer to cheer on our favorite team without even thinking about it. But for some, those occasions are a minefield. Excessive drinking almost always hurts at least one person—the drinker—and often those around him or her.

“Moderate drinking” is defined as no more than a drink a day for women or two drinks a day for men. Many Americans drink far more.

This option says that we have a responsibility—as friends, as neighbors, as family—to see that those who need help can get it.

Access to Help

Despite the fact that medical science considers alcohol addiction to be a chronic, progressive disease, it is one that has particularly low rates of access to treatment. More than 40 years ago, just 1 in 10 alcoholics were treated for the illness. In 2013, the rate had remained unchanged.

Yet patients with other chronic diseases have access to an array of services and few waiting lists. “Right now every insurance company offers diabetes counseling, assessment, diagnostic sessions, and family counseling. Also, home services, telemonitoring, and a range of services. . . . That has never been the case in the substance-abuse world.”

said A. Thomas McClellan, former deputy director of the White House Office of National Drug Control Policy, in a 2011 interview. This option says that reducing excessive drinking goes hand-in-hand with giving people who need it access to treatment, just as we do with diseases like diabetes or hypertension.

In the past, insurance companies have refused to pay for addiction treatment. As a result, Congress passed the Mental Health Parity and Addiction Equity Act in 2008—with final rules issued in 2013—which makes it mandatory for insurance companies to cover alcohol and addiction treatment under their behavioral health provision in a manner “no less restrictive” than the limits that apply to medical and surgical benefits.

Treatment programs need not take place just at hospitals or mental health facilities. One effective form of treatment, which has shown up to a 76 percent reduction in substance use, is called Multidimensional Family Therapy. It focuses on helping the family of the alcoholic as well as the person who is addicted. Therapists conduct treatment in the home, at school, at government buildings, or at other community locations over the course of six months to intervene in an addict’s or alcoholic’s behavior.

Although alcohol is a legal beverage, it is sold with warning labels to make it clear that drinking can harm some people—particularly pregnant women. No amount of alcohol use during pregnancy is considered safe. Alcohol exposure in the womb can have a lingering, negative impact on an individual’s behavior and growth rates years after birth. Fetal alcohol syndrome, which occurs in babies exposed to alcohol in the womb, is the leading known cause of developmental disabilities and can be prevented.

One way to prevent it, this option says, is for doctors to test women for alcohol use, not just early in their pregnancies but until they give birth. Doctors test just one-third of pregnant women for their alcohol use, studies show, and such testing generally takes place only in the first trimester of pregnancy. This option says such actions don’t go far enough.

Binge Drinking

About 20 percent of high school students report that they have engaged in binge drinking in the recent past. Parental attitudes toward drinking influence their children’s decisions. Some parents believe it is acceptable to serve alcohol to teens as long as there is adult supervision. An increasing number of states are passing “social host” laws that allow prosecution of parents when teens drink in their homes or on their property.

Binge drinking is particularly common on college campuses, too. For example, since the 1980s, many seniors at the University of Virginia mark the final home game of the football team by drinking what is known as the “fourth year fifth.” This involves students drinking a fifth of liquor (about 25 ounces) before the start of the last football game, a dangerous tradition that persists despite the opposition of university officials. This option says that binge drinking in high schools and on college campuses can be reduced when educational institutions, states (in establishing laws on underage drinking), and the surrounding communities act together to address the issue.

Penalizing establishments that sell alcohol to minors, banning alcohol on college campuses, limiting the amount



©Mark Peterson/Corbis

A keg master fills up cups at a ski club party at Arizona State University.

of bars nearby, and preventing bars from discounting the price of drinks on weekends or during “ladies’ night” events are all associated with a reduction in campus binge drinking, according to a Harvard School of Public Health survey of 120 colleges.

Funding Treatment

Often, alcohol treatment is publicly funded, particularly for those who have committed alcohol-related crimes. Yet few states have raised alcohol taxes to help pay for treatment. In many states, the alcohol taxes haven’t even kept up with inflation. This option says that raising taxes on alcohol would be a good source of treatment dollars.

Providing more treatment options would also lower drunken driving deaths and other negative consequences of drinking. That’s what happened in Alaska during the 1980s when the state raised alcohol taxes. The following year, deaths from alcohol use in Alaska dropped by 30 percent. The reverse is also true; when Finland lowered its taxes on alcohol by more than one-third in 2004, alcohol consumption went up 50 percent and arrests for drunken and disorderly conduct rose.

Raising alcohol taxes for treatment would defray the cost of helping addicts recover. In New Jersey, mothers who had lost children to drug and alcohol abuse began the Just a Nickel campaign. The proposal would raise \$10 million a year for addiction treatment by raising alcohol taxes. In New Mexico, a portion of the liquor excise tax goes to pay for addiction treatment. In 2011, Washington State voters significantly raised taxes on alcohol sold in that state, a move that was credited by some for an initial

drop in drunken driving fatalities. Setting aside alcohol taxes to pay for recovery makes good sense, Option Two says.

What We Could Do

This option holds that the cost of excessive drinking to individuals and society is too great for us to do nothing. Excessive drinking is often a sign of addiction, a chronic disease that calls for effective, readily available treatment like that for any other illness. We must help people reduce their drinking or stop entirely when their drinking becomes destructive.

- High schools and colleges could take steps to reduce the problem of binge drinking. Schools could work with communities to enact more restrictive policies, such as penalizing parents and stores that supply alcohol to minors. Bars near campus could be forbidden to sell discounted drinks or to have special nights in which the cost of drinking is reduced.

But . . . *Punishing those who violate alcohol policies would just drive drinking underground. Limiting the number of bars near campus would hurt businesses that depend on student customers. And ending the practice of discounting drinks would punish the majority—who are responsible drinkers—because of the actions of a few.*

- Doctors could intervene in the treatment of pregnant women regarding their use of alcohol, testing them and counseling them throughout their pregnancy. This would reduce the incidence of fetal alcohol syndrome, one of the leading causes of mental retardation, resulting in healthier babies and mothers, too.

But . . . *Questioning pregnant women repeatedly about their use of alcohol, which is a legal beverage, would amount to an invasion of privacy. It might deter some women from getting prenatal care, which could result in more difficult pregnancies and health problems. It could damage doctor-patient relationships.*

- Alcohol taxes could be raised to discourage people from drinking too much. The money could be set aside to pay for the treatment of alcoholism and addiction. In this way, the substance that helps cause the problem could be used to help pay for treatment of it.

But . . . *Raising alcohol taxes would penalize those who don’t have a problem with drinking. Using taxes to lower people’s consumption would hurt legal businesses that depend on sales of alcohol. It would also avoid putting the responsibility for drinking where it belongs: on the individual consumer.*



Solutions must address the societal attitudes and environments that make heavy drinking widely accepted.



©luciaserra/Shutterstock.com

>>Change Society's Relationship with Alcohol

BEEER COMMERCIALS ABOUND on American TV, suggesting drinking as a way to make friends, get a date, or be popular. News stories extol wine as being good for the heart. Attend an adult party, and alcohol often flows freely. Drive down a highway, and billboards send the message that one's choice of alcohol is part of sex appeal.

This option says that excessive drinking can't be curtailed without addressing the environment, which is replete with positive messages about alcohol while expressing little of the downside. Although every individual is responsible for his or her own drinking, those decisions are influenced by a society that sometimes seems saturated in alcohol.

Reducing negative drinking behavior begins by questioning the messages we accept, the norms we set, and, ultimately, our relationship with this popular beverage.

The Tobacco Example

Some believe that alcohol should be regulated more like tobacco. The U.S. Congress banned tobacco ads on TV more than 40 years ago. In 2010, Congress passed a law forbidding tobacco companies from sponsoring music, sports, or other cultural events. Such steps have helped to reduce smoking in the United States, advocates say.

The contrasting treatment of alcohol ads is striking. Beer ads—and more recently, ads for hard liquor—air numerous times during the evening hours. Alcohol companies are among the most generous sponsors of sporting events. A study in the journal *Pediatrics* found the level of exposure to alcohol marketing in seventh grade had a measureable influence on underage drinking behavior. By the age of 16, most teens have seen many thousands of alcohol ads on television.

This option says that the government should ban TV ads for alcohol, if only to reduce the influence such marketing has on our children. Like the ban on tobacco ads 40 years ago, a ban on alcohol ads would reduce the number of positive messages about drinking and allow for a more balanced approach.

Happy Hour and “Alcopops”

Bars, like any other businesses, want to make the products they sell more attractive to buy. One way is to serve drinks at cut-rate prices or to offer special reduced-cost deals, such as ladies’ nights. The “happy hour,” traditionally in the early evening, is a common vehicle for half-price drinks and other perks that entice customers. But the results are sometimes not happy at all. This option says that states and localities should outlaw such attempts by bars to sell more alcohol because they encourage people to consume more than is good for them.

This option holds that a ban on happy hours would lead to more responsible drinking. Massachusetts banned happy hours in 1984, after a driver who had drunk at least

seven beers during happy hour ran over and killed 20-year-old Kathleen Barry. Several other states followed this lead.

But happy hours are not the only potential problem. There’s also concern that so-called “alcopops,” marketed to young people, are too easily available and encourage underage drinking.

“Alcopops” are inexpensive, carbonated, sweet beverages sold in bottles pre-mixed with spirits. Despite containing liquor, alcopops also contain enough malt to be treated like beer under most state regulations. In many states, that means they are taxed at a lower rate and generally available in convenience stores, with fewer restrictions on hours and sales.

This option says that raising taxes on alcopops would reduce underage drinking, since young people generally have less money than their elders. Utah and Maine, along with countries such as the United Kingdom, Australia, and Germany, have raised alcopop taxes.

Reasonable Alternatives

Others contend that the best way to reduce excessive drinking is not to rely on bans or crackdowns on businesses but to expose people to enjoyable alcohol-free activities. This option believes that giving people healthy alternatives to alcohol promotes responsible behavior by showing them they don’t need alcohol to have a good time.

In Morris County, New Jersey, New Social Engine rents out an arcade and a bowling alley for alcohol-free evening rides and games for students. Colleges, too, are promoting activities in which students can enjoy themselves without drinking. Purdue University has weekly poetry slams and movie nights. The University of Pittsburgh sponsors alcohol-free tailgate parties before football games and has a late-night tea room in the student union that one administrator describes as “a bar without the alcohol.” In Stoughton, Massachusetts, an organization called OASIS (Organizing Against Substances in Stoughton) regularly holds half-day activities for the town’s middle and high school youth. Students may enjoy basketball, kickball, and music; high school students can attend a leadership institute where they learn communication and other skills.

Another way to accomplish this goal is to help people understand that millions of people choose not to drink, not merely as an occasional choice but as a daily commitment. There are an estimated 20 million recovering drug addicts and alcoholics in America who live normal lives without alcohol or other substances. Yet in part because of the stigma of addiction, as well as the 12-step program’s tradition of anonymity, recovering people rarely discuss their success stories publicly. The result is that they are largely invisible to the wider society. This option argues that a good way to



©Steve Debenport/iStock.com



©Blend Images/SuperStock

Many colleges promote activities in which students can have fun without drinking.

make not drinking a more popular and viable alternative is to put a face on sobriety by having recovering people tell their stories openly.

Faces and Voices of Recovery, a Washington, D.C.-based advocacy group, suggests that addicts and alcoholics who are sober describe themselves as “people in long-term recovery,” without mentioning any self-help group to which they may belong. That way, they can avoid violating such groups’ traditions while serving as an example to others. As Ken Pomerance, a co-founder of the recovery website *Intherooms.com*, wrote, “We have the potential to give the gift of hope to those who are still struggling with their addiction, but in order to do so, I believe that we must take a risk and break our own anonymity. . . . Not doing so only helps to perpetuate the myth that alcoholics and addicts simply do not recover.” This option says that not drinking is a viable option and that recovering people need to share their stories openly.

What We Could Do

Option Three contends that the best way to reduce excessive drinking is to change the culture in which we live. The messages that encourage drinking are so pervasive that they portray drinking, and perhaps even overdrinking, as normal. This option says that the only way to cut down on excessive alcohol use is to change the way society views alcohol.

- The government could ban television advertising for alcohol, just as it did for cigarettes. The messages lauding alcohol use are so numerous that most teenagers have seen thousands of commercials for alcohol. That can’t help but encourage them to drink.

But . . . *Banning commercials overlooks the individual’s responsibility to drink responsibly and amounts to censorship. If TV stations couldn’t sell ads to alcohol companies, it would take away an important part of their financial support, resulting in lost jobs.*

- Communities should outlaw happy hours for bars. Selling drinks at low prices, often at a fraction of their regular cost, only encourages overdrinking. Happy hours could lead to higher incidences of driving while under the influence and other negative consequences.

But . . . *Banning happy hours would interfere with the operation of businesses that are simply reducing the cost of their product to attract more customers. It would also penalize the majority of people who drink responsibly, not just the minority of individuals who drink too much.*

- Recovering alcoholics and addicts should shed anonymity and openly talk about their sobriety. In this way, society would begin to view abstaining from alcohol as a “normal” alternative to the use of alcohol. The sooner that people realize how many individuals are in recovery, the easier it will be to counter unhealthy messages about alcohol use.

But . . . *Anonymity exists to protect a person from the unfair stigma often associated with being an alcoholic—even one in recovery. Shedding anonymity could damage people’s careers and relationships. The pressure to go public could keep some people from seeking help.*

S U M M A R Y



>> Alcohol in America

What Can We Do about Excessive Drinking?

MOST AMERICANS are responsible in their alcohol use, but excessive use of alcohol continues to be a major public issue. It is not just a question for individuals. It costs the U.S. dearly in lives lost and dollars spent. The estimated financial cost of excessive drinking was \$223.5 billion in 2006. In 2008, one-third of all motor vehicle accidents involved alcohol. Heavy drinking on and off the road causes nearly 80,000 deaths annually, making it the third-leading preventable cause of death in the U.S., according to the Centers for Disease Control. Some of these deaths could be prevented if alcoholics got effective help, but only 1 out of 10 of those addicted to drugs or alcohol gets treated, compared to 7 out of every 10 people who have other chronic diseases, such as diabetes

or hypertension. The beverage that some families enjoy with dinners and celebrations creates a nightmare for other families.

The National Council on Alcoholism and Drug Dependence maintains that up to 40 percent of all hospital beds in the U.S. are being used to treat health conditions related to alcohol consumption. Excessive drinking is implicated in violence, anxiety, depression, health problems such as cancer and heart disease, risky sexual behavior, homicide, child maltreatment, and suicide.

Alcohol is a legal beverage, but its misuse hurts people, costs our nation billions of dollars, and makes the public less safe. The question remains: What can we do about excessive alcohol use?

OPTION ONE

Protect Others from Danger

People who drink excessively and alcoholics can create significant community problems, inflicting suffering on families, friends, and innocent bystanders alike. Society should do what it takes to protect itself from the negative consequences of drinking behavior.

The drawback to these actions is that they would increase police and institutional scrutiny of what many believe is private behavior.

EXAMPLES OF WHAT MIGHT BE DONE

SOME CONSEQUENCES AND TRADE-OFFS TO CONSIDER

Police could conduct regular alcohol breath-tests on random drivers to measure potential alcohol intake. Random tests would make it less likely that people would drive drunk.

Stopping people randomly, without cause or suspicion, would raise serious civil liberties concerns and could cause traffic jams. Police would spend time looking for heavy drinkers that could be spent pursuing other criminals.

Businesses should stop serving intoxicated people. Individuals should take their friends' keys and confront those who drink too much.

Bars might lose money if customers avoid them because they won't be able to drink what they want. If individuals take keys away and confront their friends over drinking, they may sever those relationships.

Car insurance companies could require anyone convicted of a DUI to install an ignition interlock device. Courts could require alcohol treatment or the use of Antabuse in lieu of significant jail time.

Not everyone could afford the required modification to their cars. Treatment programs have mixed results, and some people can't take Antabuse.

Government could shut down or suspend the licenses of bars or liquor stores known to have sold alcohol used in unlawful incidents.

Such actions punish business establishments for selling legal products instead of punishing the people who misused the alcohol.

OPTION TWO

Help People with Alcohol Problems

People who drink too much suffer. Excessive drinking contributes to the deaths of tens of thousands of people every year. Only 1 in 10 alcoholics in America gets treatment. We need to help people reduce their drinking.

The drawback to this approach is that interventions depend upon the actions of other people and institutions, rather than the person who needs to stop drinking. The individual drinker, not others, is the one who should be responsible for change.

EXAMPLES OF WHAT MIGHT BE DONE

Doctors could screen all pregnant women for alcohol and drug abuse so they won't deliver babies addicted to drugs or with fetal alcohol syndrome, a preventable cause of mental retardation.

Federal and state governments could significantly increase taxes on alcohol to encourage people to reduce their drinking, as the government did with cigarettes. The taxes could pay for treatment for those who need help in quitting.

High school and college institutions could take steps to reduce binge drinking. This would include teaching students about how the alcohol industry targets them with marketing, working with communities to limit bars near campuses, and cracking down on stores that sell alcohol to minors.

Expand effective treatment for those addicted to alcohol so that more of them can get the medical help and psychological support they need—similar to the way people with diabetes get medical intervention to manage their disease.

SOME CONSEQUENCES AND TRADE-OFFS TO CONSIDER

This may cause pregnant women who are in need of prenatal services to avoid seeing health care professionals.

Those who don't have a problem with alcohol would have to pay more money to buy alcoholic beverages. Making alcohol more expensive would impact businesses' bottom line.

This could drive drinking underground, where it would be harder to measure and treat.

Treatment programs are expensive and the public may not be willing to shoulder the cost. Many people believe alcoholics must ultimately take responsibility for becoming, and staying, sober.

OPTION THREE

Change Society's Relationship with Alcohol

This option says that solutions must address the societal attitudes and environments that make heavy drinking widely accepted. Our culture celebrates alcohol use through the media and popular sporting events, which encourage people to drink more than they should.

The drawback to this approach is that changing our cultural approach to alcohol would take too long for results when we need help now. It also ignores the fact that many people drink moderately, with no compromise to their health or negative consequences in their lives.

EXAMPLES OF WHAT MIGHT BE DONE

The federal government should ban commercials for alcohol on television, the way that it made cigarette advertising illegal. This would limit the exposure of people to advertising that encourages drinking.

Localities and states could ban happy hours to cut down on irresponsible drinking. They could ban the sale of alcopops that seek to lure underage people into drinking.

Communities should promote alcohol-free activities to give people ways of socializing without drinking and set a good example for young people.

Recovering people should reject anonymity because it contributes to public misunderstanding about addiction. There are 23 million Americans in recovery and people should understand that addiction is very common.

SOME CONSEQUENCES AND TRADE-OFFS TO CONSIDER

This would restrict our free speech rights. It would also remove an important source of revenue for televised sporting events that have a broad fan base.

Bars and stores might lose business without happy hours. Responsible adult consumers will have to pay more and lose some of their choices around alcohol.

Like Prohibition, alcohol-free events may actually make alcohol more attractive. And such events would only attract those who are already responsible drinkers.

Recovering people might be discriminated against if people knew about their addiction. The pressure to shed anonymity would keep some people from ever getting help.



www.nifi.org