



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

**OMAHA COALITION MEETING**  
*Wednesday, January 20, 2021*  
*9 a.m.*

**A G E N D A**

- I. Welcome and Introductions
- II. Review of the December 9, 2020 Meeting Minutes  
(*please contact PEM staff with corrections*)
- III. 2021 Legislative Session (through Day 9)
  - a. Legislative Tracking Sheet is available at [www.projectextramile.org](http://www.projectextramile.org)
- IV. Focus Area Updates
  - a. Policy
    - i. LCC Rule changes
    - ii. Craft Beverage Modernization & Tax Reform Act
    - iii. US Dietary Guidelines
    - iv. Work Group meeting Tuesday, January 26<sup>th</sup> at 10am CST via Zoom
  - b. Enforcement
    - i. Douglas County DUI Task Force
    - ii. 2021 Law Enforcement Training
  - c. Youth
    - i. January 10<sup>th</sup> Youth Leadership Council meeting
    - ii. National Youth discussion
    - iii. Next meeting is February 14<sup>th</sup> at 5:30pm
  - d. Awareness
    - i. Media advocacy: Cocktails to-go in the Omaha World Herald and on WOWT
    - ii. January 2021 Research Summary available at [www.projectextramile.org](http://www.projectextramile.org)
- V. Additional Discussion/Announcements
- VI. Adjournment and Next Meeting Date: **February 10<sup>th</sup>, 9 a.m.**

**IMPORTANT UPCOMING EVENTS**

Policy Work Group Meeting – January 26<sup>th</sup>, 2021 at 10 a.m.

Nebraska Liquor Control Commission Hearings – February 2 & 3, 2021

The mission of Project Extra Mile is to advocate for evidence-based policies  
and practices to prevent and reduce alcohol-related harms.

## PROJECT EXTRA MILE

### OMAHA METRO AREA COALITION MEETING MINUTES December 9, 2020

- I. Call to Order: Project Extra Mile Chair Jen Pollock called the meeting to order virtually via Zoom at 9 a.m.
- II. Welcome and Introductions: Welcome and introductions took place. Coalition members and speakers in attendance: Jen Pollock, Chris Abbot, Angela Richards, Carey Pomykata, Clint Zost, Don Hoes, Mark Magill, Mandy Peth, Jayna Schaaf, Teri Mattran, Palistene Gray-Moore, Jona Beck, Wendy Evans, Kurt McBride, Jim Timm, John Lemen, Sharona Crittenden, Loel Schettler, and Lanette Richards. Staff members in attendance: Chris Wagner, Liene Topko, Beatha Kliewer, and Erin Ayad.
- III. Approval of Minutes: The minutes from the November 11, 2020 meeting were reviewed and approved. No additions or corrections were made.
- IV. 2020 in Review: Project Extra Mile staff discussed 2020 accomplishments.
  - a. Chris Wagner shared COVID-19's impact on the coalition's work through postponed or cancelled events, as well as how relaxed alcohol policies in response to the pandemic have increased availability.
  - b. Wagner highlighted the year's coalition meeting topics.
  - c. Liene Topko shared information about the 2020 Law Enforcement Training. Planning is underway for a Douglas County DUI Task Force and enforcement collaborations to focus on alcohol delivery to minors and alcohol service to intoxicated individuals.
  - d. Topko discussed results of 2020 compliance checks and noted that the operations continued during the pandemic as a result of collaboration between PEM, the Liquor Control Commission, the Attorney General's Office, and local law enforcement.
  - e. Erin Ayad updated the coalition on efforts to reconvene the PEM Youth Leadership Council, which is currently being held monthly through virtual meetings.
  - f. Ayad also shared an overview of media advocacy efforts on DUIs, party buses, alcohol and COVID, as well as overall alcohol-related harms.
  - g. Wagner discussed advocacy efforts that have occurred at the local, state, and national levels. Topics included the Governor's COVID-19 Executive Orders to allow drive through alcohol sales and cocktails-to-go, liquor licensing and party buses, entertainment districts, expanding 2 am and Sunday alcohol sales, alcohol screening efforts, and the expansion of law enforcement operations.
- V. What's in store for 2021: The coalition was assigned to one of five breakout rooms to discuss the past year and what partners have planned for 2021, as well as issues for future collaboration.
- VI. Adjournment and Next Meeting Date: The meeting was adjourned. The next meeting will take place on Wednesday, January 20<sup>th</sup> at 9 a.m. virtually via Zoom.



AMERICAN PUBLIC HEALTH ASSOCIATION

*For science. For action. For health.*

December 4, 2020

The Honorable Richard Shelby  
United State Senate  
Committee on Appropriations  
Washington, DC 20510

The Honorable Chuck Grassley  
United States Senate  
Committee on Finance  
Washington, DC 20510-6200

The Honorable Nita M. Lowey  
United States House of Representatives  
Committee on Appropriations  
Washington, DC 20515

The Honorable Richard Neal  
United States House of Representatives  
Ways and Means Committee  
Washington, DC 20515

Dear Chairman Shelby, Chairman Grassley, Chairwoman Lowey, and Chairman Neal:

On behalf of the American Public Health Association, a diverse community of public health professionals who champion the health of all people and communities, I am writing to express opposition to the extension of the Craft Beverage Modernization and Tax Reform Act of 2019 (S. 362; H.R. 1175). Alcohol-related deaths have doubled over the last 10 years and studies have shown that increases in alcohol prices and/or taxes – not lower taxes - are associated with reductions in alcohol consumption and related problems, including motor vehicle fatalities, violent crime and alcohol-related diseases.<sup>1</sup> Additionally, tax increases have also been shown to be minimally burdensome on moderate drinkers, racial/ethnic minorities and members of low-income households, with excessive drinkers shouldering three-quarters of the overall cost.<sup>2</sup>

This bill seeks to make temporary federal excise tax cuts on beer, wine and distilled spirits permanent. In most cases, these rates were reduced by 50% to 93% for the first stages of production and allowed the entire industry to benefit from lower tax rates – not just small breweries, wineries, and distilleries.<sup>3</sup> A loophole in the CBMTRA allows large distilled spirits producers to ship their product tax-free through smaller firms, including shell company intermediaries, allowing them to take advantage of the lower tax rate that was intended for small craft businesses.<sup>4</sup> The alcohol industry likes to frame these cuts as economic development and job growth, but this is only one side of the economic story.

Although the current economic and public health crisis may seem like an opportune time to provide continued economic relief for alcohol producers, the continuation of these tax cuts negatively impacts the federal budget. According to a recent economic cost analysis, American taxpayers and businesses were already shouldering the costs of excessive alcohol use to the tune of approximately \$249 billion per year as of 2010, or \$2.05 per drink.<sup>5</sup> Over 70% of total costs resulted from losses in workplace productivity and about 40% of all excessive drinking costs were paid with taxpayer dollars.

As federal and state budgets continue to struggle, the alcohol industry is expected to see volume growth of 2% in the United States this year according to the International Wines and Spirits Record Drinks Market Analysis with the ready-to-drink alcoholic beverage category experiencing 43% volume growth.<sup>6</sup> Furthermore, the alcohol industry has benefitted from artificially low federal alcohol taxes since 1991 given that excise taxes are not indexed for inflation, which has eroded their value by an average of 36% (using the Personal Consumption Expenditures deflator).<sup>7</sup>

There has been a net increase of over 7% in binge drinking per decade between the years 2000 and 2016 in the United States.<sup>8</sup> Binge drinking is a serious public health problem that extends far beyond the individual drinker. Increases in harmful alcohol consumption parallel changes in health services utilization across the country. Between 2006 and 2014, overall emergency department visits involving alcohol consumption increased by 62%, whereby acute alcohol-related emergency department visits increased by 52% and chronic alcohol-related visits (e.g., alcohol-related psychosis, alcohol-related liver disease) increased nearly 76%.<sup>9</sup>

Making the CBMTRA permanent, or even extending it temporarily, will lead to cheaper alcohol, increased excessive consumption and increased community harms. Independent, peer-reviewed scientific research is clear that decreasing the price of alcohol through tax cuts leads to increased underage and binge drinking and the related social, health and economic harms.<sup>10</sup> Price increases for alcohol lead to reduced alcohol consumption, both in the general population and in certain high-risk populations such as heavier drinkers, adolescents and young adults.<sup>11</sup>

As Congress again considers legislation to extend these tax cuts for the alcohol industry, we urge members to weigh the significant harms to public health and safety. Making these tax cuts permanent during the pandemic will add even more pressures to an already burdened health care system and lead to more family and community suffering. Instead, *allowing these tax cuts to expire* would help address the most problematic drinking and its harms, particularly in communities already disproportionately burdened by the coronavirus. For example, younger adults, racial/ethnic minorities, essential workers and unpaid adult caregivers have reported worse mental health outcomes, increased substance use and elevated suicidal ideation according to a recent research centered around COVID-19.<sup>12</sup>

In October 2020 it was revealed that over 95,000 Americans die from alcohol-related causes each year due to excessive alcohol use -- an increase of more than 7,000 deaths per year.<sup>13</sup> These deaths account for 1 in 10 total deaths among working-age adults aged 20 to 64 years and are entirely preventable through stronger alcohol policies, including higher alcohol taxes. Returning federal alcohol excise tax rates to 2017 levels would be a start toward saving American lives, helping with budget shortfalls and result in fewer instances of alcohol-impaired driving, alcohol-related crimes, alcohol-related cancers, liver cirrhosis, unintended pregnancies and suicides.

In closing, we urge you not to extend the CMBTRA beyond its expiration date on December 31, 2020. However, if there is a consensus to extend, we respectfully request that it be extended only for one year, expiring on December 31, 2021. Thank you for considering our views on this legislation.

Sincerely,

A handwritten signature in black ink, reading "Georges C. Benjamin". The signature is fluid and cursive, with the first name "Georges" being more prominent and the last name "Benjamin" following in a similar style.

Georges C. Benjamin, MD  
Executive Director

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- <sup>1</sup> Wagenaar AC, Tobler AL, Komro KA. *Effects of alcohol tax and price policies on morbidity and mortality: a systematic review*. Am J Public Health. 2010;100:2270–2278.
- <sup>2</sup> Naimi TS, Daley JJ, Xuan Z, Blanchette JG, Chaloupka FJ, Jernigan DH. *Who would pay for state alcohol tax increases in the United States?* Prev Chronic Dis. 2016;13:E67.
- <sup>3</sup> Alcohol Tobacco Tax and Trade Bureau. Tax and Fee Rates. <https://www.ttb.gov/tax-audit/tax-and-fee-rates>
- <sup>4</sup> Looney, Adam. *How to close the loopholes in the Craft Beverage Modernization Act*. Brookings. 2019, Sept. 6.
- <sup>5</sup> Sacks et al. *2010 national and state costs of excessive alcohol consumption*. American Journal of Preventive Medicine. 2015.
- <sup>6</sup> Arthur, Rachel. *Drinks industry performs better than expected in 2020: IWSR analysis*. Beveragedaily.com. 2020, Nov. 12.
- <sup>7</sup> Looney, Adam. *Measuring the loss of life from the Senate's tax cuts for alcohol producers*. Brookings. 2017, Nov. 22.
- <sup>8</sup> Gruzza et al. *Trends in adult alcohol use and binge drinking in the early 21st-century United States: a meta-analysis of 6 National Survey Series*. Alcohol Clin Exp Res. 2018.
- <sup>9</sup> White et al. *Trends in alcohol-related emergency department visits in the United States: Results from the Nationwide Emergency Department Sample, 2006 to 2014*. Alcohol Clin Exp Res. 2018.
- <sup>10</sup> Chaloupka et al. *The effects of price on alcohol consumption and alcohol-related problems*. Alcohol Res Health. 2002.
- <sup>11</sup> Xu & Chaloupka. *The effects of prices on alcohol use and its consequences*. Alcohol Research and Health. 2011.
- <sup>12</sup> Czeisler et al. *Mental health, substance use, and suicidal ideation during the COVID-19 pandemic — United States, June 24–30, 2020*. MMWR Morb Mortal Wkly Rep 2020.
- <sup>13</sup> Esser et al. *Deaths and years of potential life lost from excessive alcohol use - United States, 2011-2015*. Morbidity and Mortality Weekly Report. 2020, Oct. 2.

## **U.S. Diet Guidelines Sidestep Scientific Advice to Cut Sugar and Alcohol**

Written by Roni Caryn Rabin

Rejecting the advice of its scientific advisers, the federal government has released new dietary recommendations that sound a familiar nutritional refrain, advising Americans to “make every bite count” but dismissing experts’ specific recommendations to set new low targets for consumption of sugar and alcoholic beverages.

The “Dietary Guidelines for Americans” are updated every five years, and the latest iteration arrived on Tuesday, 10 months into a pandemic that has posed a historic health threat to Americans. Confined to their homes, even many of those who have dodged the coronavirus itself are drinking more and gaining weight, a phenomenon often called “quarantine 15.”

The dietary guidelines have an impact on Americans’ eating habits, influencing food stamp policies and school lunch menus and indirectly affecting how food manufacturers formulate their products.

But the latest guidelines do not address the current pandemic nor, critics said, new scientific consensus about the need to adopt dietary patterns that reduce food insecurity and chronic diseases. Climate change does not figure in the advice, which does not address sustainability or greenhouse gas emissions, both intimately tied to modern food production.

A report issued by a scientific advisory committee last summer had recommended that the guidelines encourage Americans to make drastic cuts in their consumption of sugars added to drinks and foods to 6 percent of daily calories, from the currently recommended 10 percent.

Evidence suggests that added sugars, particularly those in sweetened beverages, may contribute to obesity and weight gain, which are linked to higher rates of chronic health conditions like heart disease and Type 2 diabetes, the scientific panel noted.

More than two-thirds of American adults are overweight or obese; obesity, diabetes and other related conditions also increase the risk of developing severe Covid-19 illness.

The scientific advisory group also called for limiting daily alcohol consumption to one drink a day for both men and women, citing a growing body of evidence that consuming higher amounts of alcohol is associated with an increased risk of death, compared with drinking lower amounts.

The new guidelines acknowledge that added sugars are nutritionally empty calories that can add extra pounds, and concede that emerging evidence links alcohol to certain cancers and some forms of cardiovascular disease — a retreat from the once popular notion that moderate drinking is beneficial to health.

But officials at the Department of Agriculture and the Department of Health and Human Services rejected explicit caps on sugar and alcohol consumption.

Although “the preponderance of evidence supports limiting intakes of added sugars and alcoholic beverages to promote health and prevent disease,” the report said, “the evidence reviewed since the 2015-2020 edition does not substantiate quantitative changes at this time.”

The new guidelines concede that scientific research “suggests that even drinking within the recommended limits may increase the overall risk of death,” and that alcohol has been found to increase the risk for some cancers even at low levels of consumption.

But the recommendation from five years ago — one drink per day for women and two for men — remains in place.

The new guidelines do clarify, for the first time, that the limits apply to those days when alcohol is consumed. The vagueness of the previous recommendations left suggested to many American men that they could binge-drink a couple of days a week, so long as they did not exceed 14 drinks over the course of a week.

Dr. Timothy Naimi, a member of the dietary guidelines advisory committee, said the guidelines “reaffirm two important but overlooked health messages”: that alcohol is “a dangerous substance” and that drinking less is better than drinking more at all levels of consumption.

“This is especially a key point in the time of Covid and holidays, in which consumption has increased and important alcohol control policies have been relaxed,” such as restrictions on home delivery, Dr. Naimi said.

The main sources of added sugars in the American diet are sweetened beverages — including sodas, as well as sweetened coffees and teas — desserts, snacks, candy, and breakfast cereals and bars. Most Americans exceed even the 10 percent benchmark; sugars make up 13 percent of daily calories, on average.

The new guidelines do say for the first time that children under 2 should avoid consuming any added sugars, which are found in many cereals and beverages.

Critics were disappointed that the federal agencies had ignored the recommendations of the scientific advisory committee.

“I’m stunned by the whole thing,” said Marion Nestle, a professor emerita of nutrition and food studies at New York University and author of several books on the government’s dietary guidelines.

“Despite repeated claims that the guidelines are science-based, the Trump agencies ignored the recommendation of the scientific committee they had appointed, and instead reverted to the recommendation of the previous guidelines,” she said.

The composition of the dietary advisory committees drew controversy earlier this year, because many of the experts had ties to the beef and dairy industries. Yet the scientists went further in their advice than had previous committees, particularly with the recommendations to limit sugar and alcohol, Dr. Nestle said.

“Those were big changes, and they got all the attention when the report came out last summer for very good reasons — and they were ignored in the final report,” Dr. Nestle said.

“The report was introduced as science-based — they used the word ‘science’ many times, and made a big point about it,” she added. “But they ignored the scientific committee which they appointed, which I thought was astounding.”

In other ways, the new guidelines are consistent with previously issued federal recommendations. Americans are encouraged to eat more healthy foods, like vegetables, fruits, legumes, whole grains, nuts, seafood, low-fat or nonfat dairy, and lean meat and poultry.

The guidelines urge the nation to consume less saturated fat, sodium and alcohol, and to limit calorie intake.

Indeed, officials with the Center for Science in the Public Interest, an advocacy organization, said they were pleased the guidelines continued to affirm a diet rich in fruits and vegetables and lower in red meat and processed meats, though they said it “misses the mark” on added sugars.

Jessi Silverman, a registered dietitian and public health advocacy fellow at C.S.P.I., called on the incoming Biden administration to take action to remove barriers to healthy eating, such as restoring nutritional standards for whole grains, sodium and milk in the national school lunch program, which were rolled back under President Trump.

For the first time, the guidelines take a “full life-span approach,” trying to sketch out broad advice for pregnant and breastfeeding adults and for children under 2.

One of the recommendations for pregnant women, those about to become pregnant and those who are breastfeeding is to eat ample seafood and fish that is rich in omega-3 fatty acids but low in methylmercury content, which can have harmful effects on a developing fetus. This dietary pattern has been linked to healthier pregnancies and better cognitive development in children.

The new guidelines emphasize the health benefits of breastfeeding, which has been linked to lower risks of obesity, Type 1 diabetes and asthma in children. Foods that are potential allergens, like eggs and peanuts, should be introduced during the first year of life — after 4 months of age — to reduce the risk of developing allergies.



## **YOUTH LEADERSHIP COUNCIL**

**Who:** Students in 8th through 12th grades who want to make a difference in their communities through efforts to prevent underage alcohol use.

**What:** Young people are encouraged to take the lead in solving the problem of underage drinking in their community. Through Project Extra Mile's Youth Leadership Council, adult partners work with students to help reach their goals.

**Why:** Underage drinking is a leading public health problem. Alcohol contributes to more than 3,500 deaths among youth under 21 each year in the U.S.

**Where:** Via Zoom – Please register at the following link in advance: <https://zoom.us/j/91944210888>  
**Meeting ID: 919 4421 0888**

**When:** The next meeting will be on Sunday, February 14, 2021  
5:30 PM – 6:30 PM

**Join us as we discuss the 2021 legislative session in Nebraska.**

**Questions? E-mail [youth@projectextramile.org](mailto:youth@projectextramile.org)**

## **Restaurant association says Nebraska should extend carryout cocktails to help businesses survive**

Written by Paul Hammel

At Stokes restaurant in Omaha's Old Market, many takeout customers have taken advantage of the pandemic-inspired waiver of a state law that prohibits the sale of carryout cocktails.

A specialty margarita or mojito goes well with the Southwestern-style meals dished out by the eatery.

"It's a very nice option for people," said Tayler Jackson, an assistant manager.

Takeout orders have increased substantially at Nebraska sports bars and restaurants since COVID-19 hit in March. At Stokes, Jackson said, takeout now represents perhaps 35-40% of the restaurant's meals.

The extra revenue generated by sales of to-go drinks is inspiring the Nebraska Restaurant Association, as part of a national push, to seek a continuation of the waiver, even after the pandemic wanes.

"This is a way for our restaurants to survive and come out the other side of this pandemic," said Zoe Olson, the executive director of the restaurant group. "Hospitality is what we do. We want to continue this."

Olson said her group is seeking the introduction of a bill during the 2021 legislative session, which begins next week, to extend the ability to sell carryout cocktails. It's an idea that's already getting some pushback from groups that oppose binge drinking and drunken driving.

"When you increase the availability, and the ease of access to alcohol, that's when you get increased harms," said Chris Wagner, executive director of Project Extra Mile, an Omaha-based group that seeks to prevent or reduce problems associated with alcohol.

Not long after COVID-19 hit, Gov. Pete Ricketts authorized a temporary waiver of state law that prevented restaurants and bars from selling carryout alcohol in something other than its original packaging. The waiver allowed the sale of mixed drinks and other alcoholic beverages as long as their containers were sealed with a lid and not partially consumed.

Ricketts cited the economic hit that bars and restaurants suffered because of the pandemic prohibitions on dine-in customers and restrictions on capacity. At a later press conference, he remarked that the executive order he signed on takeout drinks was the most popular directive he'd ever approved. The waiver extends until the end of the pandemic emergency.

But Olson, of the restaurant association, said her members would like to see the waiver extended beyond that, at least on a trial basis.

The Nebraska Liquor Control Commission, which regulates alcohol sales in the state, has also asked for the extension, as part of its annual "wish list" of law changes sent to state lawmakers.

"We've been devastated by this pandemic, as everybody knows," Olson said. "But we're very important to the economy of the state."

A recent survey by the National Restaurant Association indicated that about 17% of the nation's eateries had closed since the pandemic began, and that nearly nine in 10 full-service restaurants saw an average drop in sales of 36%. Olson, though, said she thought Nebraska's restaurants had fared a bit better than that.

She said the association's proposal would include a requirement for some sort of seal on carryout beverages that, if broken, would indicate that someone had opened their takeout drink in transit. The proposal would also end to-go drinks at some point, so legislators could review the policy and decide whether it should be extended.

Statistics from the Nebraska State Patrol indicate that drunken driving arrests declined by about 24% from April 1 to Dec. 28 when compared with a similar time frame a year ago.

Olson said that indicates that carryout drinks haven't caused a problem.

Wagner, of Project Extra Mile, however, said the statistics don't show whether those arrested had to-go cocktails.

Cody Thomas, a spokesman for the Nebraska State Patrol, said he couldn't say definitively, but that a reduction in traffic and other COVID-19 impacts may have contributed to the decrease in DUIs.



**RESEARCH SUMMARY**  
Date Compiled: January 2021

**Key takeaways from included research:**

- Screening, Brief Intervention, and Referral to Treatment (SBIRT) may prevent health problems and prevent costly services use among adolescents related to mental health and substance misuse.
- Alcohol intake of 1.2 drinks/day was associated with an increased risk of atrial fibrillation (AF). Researchers observed a positive association between alcohol consumption and AF across different types of alcoholic beverages and consumption patterns, even in individuals with low alcohol consumption.
- A study examined trends in alcohol and other drug-related hospitalizations with discharge to a skilled nursing facility (SNF) among adults age 55 and older. Alcohol-related hospitalizations were the leading cause of discharge to a SNF.
- Enhanced alcohol enforcement operations involving community health and law enforcement agencies can reduce alcohol-impaired driving and related consequences among young people.

## **THREE-YEAR OUTCOMES AFTER BRIEF TREATMENT OF SUBSTANCE USE AND MOOD SYMPTOMS**

January 2021

### **Abstract**

**Background:** Screening, brief intervention, and referral to treatment (SBIRT) for adolescents exhibiting co-occurring substance use and mental health problems may improve outcomes and have long-lasting effects. This study examined the relationship between access to SBIRT and substance use, depression and medical diagnoses, and health services use at 1 and 3 years postscreening for such adolescents.

**Methods:** The study draws from a cluster-randomized trial comparing SBIRT to usual care (UC) for adolescents endorsing past-year substance use and recent mood symptoms during visits to a general pediatrics clinic between November 1, 2011, and October 31, 2013, in a large, integrated health system ( $N = 1851$ ); this sample examined the subset of adolescents endorsing both problems ( $n = 289$ ). Outcomes included depression, substance use and medical diagnoses, and emergency department and outpatient visits 1 and 3 years later.

**Results:** The SBIRT group had lower odds of depression diagnoses at 1 (odds ratio [OR] = 0.31; confidence interval [CI] = 0.11–0.87) and 3 years (OR = 0.51; CI = 0.28–0.94) compared with the UC group. At 3 years, the SBIRT group had lower odds of a substance use diagnosis (OR = 0.46; CI = 0.23–0.92), and fewer emergency department visits (rate ratio = 0.65; CI = 0.44–0.97) than UC group.

**Conclusions:** The findings suggest that SBIRT may prevent health complications and avert costly services use among adolescents with both mental health and substance use problems. As SBIRT is implemented widely in pediatric primary care, training pediatricians to discuss substance use and mental health problems can translate to positive outcomes for these vulnerable adolescents.

**Source:** Parthasarathy, S., Kline-Simon, A.H., Jones, A. et al. 2021. Three-year outcomes after brief treatment of substance use and mood symptoms. *Pediatrics*, 147(1).  
<https://pediatrics.aappublications.org/content/147/1/e2020009191>

## **ALCOHOL CONSUMPTION, CARDIAC BIOMARKERS, AND RISK OF ATRIAL FIBRILLATION AND ADVERSE OUTCOMES**

January 2021

### **Abstract**

**Aims:** There is inconsistent evidence on the relation of alcohol intake with incident atrial fibrillation (AF), in particular at lower doses. We assessed the association between alcohol consumption, biomarkers, and incident AF across the spectrum of alcohol intake in European cohorts.

**Methods and results:** In a community-based pooled cohort, we followed 107 845 individuals for the association between alcohol consumption, including types of alcohol and drinking patterns, and incident AF. We collected information on classical cardiovascular risk factors and incident heart failure (HF) and measured the biomarkers N-terminal pro-B-type natriuretic peptide and high-sensitivity troponin I. The median age of individuals was 47.8 years, 48.3% were men. The median alcohol consumption was 3 g/day.  $N = 5854$  individuals developed AF (median follow-up time: 13.9 years). In a sex- and cohort-stratified Cox regression analysis alcohol consumption was non-linearly and positively associated with incident AF. The hazard ratio for one drink (12 g) per day was 1.16, 95% CI 1.11–1.22,  $P < 0.001$ . Associations were similar across types of alcohol. In contrast, alcohol

consumption at lower doses was associated with reduced risk of incident HF. The association between alcohol consumption and incident AF was neither fully explained by cardiac biomarker concentrations nor by the occurrence of HF.

**Conclusions:** In contrast to other cardiovascular diseases such as HF, even modest habitual alcohol intake of 1.2 drinks/day was associated with an increased risk of AF, which needs to be considered in AF prevention.

**Source:** Csengeri, D., Sprünker, N., & Di Castelnuovo, A. et al. 2021. Alcohol consumption, cardiac biomarkers, and risk of atrial fibrillation and adverse outcomes, *European Heart Journal*, ehaa953. <https://doi.org/10.1093/eurheartj/ehaa953>

## **TRENDS IN INPATIENT DISCHARGES WITH DRUG OR ALCOHOL ADMISSION DIAGNOSES TO A SKILLED NURSING FACILITY AMONG OLDER ADULTS, NEW YORK CITY 2008–2014** **December 2020**

### **Abstract**

**Background:** Recent research shows an increase in drug and alcohol-related hospitalizations in the USA, especially among older adults. However, no study examines trends in discharges to a skilled nursing facility (SNF) after a drug or alcohol-related hospitalization. Older adults are more likely to need post-hospital care in a SNF after a hospitalization due to an increased presence of chronic diseases and functional limitations. Therefore, the objective of this study was to estimate trends in drug or alcohol-related hospitalizations with discharge to a SNF among adults age 55 and older.

**Methods:** We analyzed data from New York State's Statewide Planning and Research Cooperative System to calculate the number of cannabis, cocaine, opioid, and alcohol-related hospitalizations in New York City that resulted in discharge to a SNF from 2008 to 2014 among adults age 55 and older. Using New York City population estimates modified from US Census Bureau, we calculated age-specific rates per 100,000 adults. Trend tests were estimated using joinpoint regressions to calculate annual percentage change (APC) with 95% confidence intervals (CI) and stratified by adults age 55–64 and adults age 65 and older.

**Results:** During the study period, among adults age 55–64, there were significant increases in cocaine, cannabis, and opioid-related hospitalizations that resulted in discharge to a SNF. For adults ≥ 65 years, there were sharp increases across all substances with larger increases in opioids (APC of 10.66%) compared to adults 55–64 (APC of 6.49%). For both age groups and among the four substances, alcohol-related hospitalizations were the leading cause of discharge to a SNF.

**Conclusions:** We found an increase in hospital discharges to SNFs for patients age 55 and older admitted with alcohol or drug-related diagnoses. Post-acute and long-term care settings should prepare to care for an increase in older patients with substance use disorders by integrating a range of harm reduction interventions into their care settings.

**Source:** Han, B.H., Tuazon, E., Kunins, H.V. et al. 2020. Trends in inpatient discharges with drug or alcohol admission diagnoses to a skilled nursing facility among older adults, New York City 2008–2014. *Harm Reduction Journal*, 17, 99. <https://doi.org/10.1186/s12954-020-00450-8>

**EFFECTS OF A COMMUNITY-LEVEL INTERVENTION ON ALCOHOL-RELATED MOTOR VEHICLE CRASHES IN CALIFORNIA CITIES: A RANDOMIZED TRIAL**  
**November 2020**

**Abstract**

**Introduction:** This trial assesses the effects of a community-level alcohol prevention intervention in California on alcohol-related motor vehicle crashes.

**Study design:** The study is a group RCT with cities as the unit of assignment to condition and as the unit of analysis.

**Setting/participants:** A total of 24 California cities with populations between 50,000 and 450,000 were chosen at random and roughly matched into pairs before randomly assigning 12 each to the intervention and control conditions.

**Intervention:** The intervention, aimed at reducing excessive drinking among adolescents and young adults, included driving under the influence sobriety checkpoints, saturation patrols, and undercover operations to reduce service of alcohol to intoxicated patrons in bars, all including high visibility so the public would be aware of them. A measure of overall intervention intensity or dosage was created.

**Main outcome measures:** The outcome was a monthly percentage of all motor vehicle crashes that were single vehicle nighttime crashes for drivers aged 15–30 years.

**Results:** Multilevel analyses were conducted to examine intervention effects on alcohol-related crashes among drivers aged 15–30 years. Crash data were obtained in 2018 with data preparation and analysis conducted in 2019. Intent-to-treat analyses indicated a 17% reduction in the percentage of alcohol-involved crashes among drivers aged 15–30 years relative to controls, which translates to about 310 fewer crashes. Dosage was found to have a statistically significant effect on crashes among this age group, although not in the expected direction.

**Conclusions:** Enhanced alcohol enforcement operations involving both community health and law enforcement agencies can help to reduce alcohol-impaired driving and related consequences among young people. Including measures of intervention dosage raises interesting questions about the understanding of the impact of the community intervention. Future studies should continue to further develop implementation strategies that may more effectively and efficiently reduce community alcohol-related harm.

**Source:** Saltz, R.F., Paschall, M.J., & O'Hara, S.E. 2020. Effects of a community-level intervention on alcohol-related motor vehicle crashes in California cities: A randomized trial. *American Journal of Preventive Medicine*. [doi.org/10.1016/j.amepre.2020.08.009](https://doi.org/10.1016/j.amepre.2020.08.009).

## **New study shows every week of lockdown increases binge drinking**

Written by Taylor & Francis Group

Harmful drinking among adults increases the longer they spend at home in lockdown, according to a study published in the peer-reviewed American Journal of Drug and Alcohol Abuse.

The research, based on a survey of nearly 2,000 over-18s in the US, is the first to highlight the relationship nationally between hazardous drinking and life stresses triggered by the COVID-19 pandemic and the associated 'lockdowns'.

The findings show the odds of heavy alcohol consumption among binge drinkers - those who, within two hours, consumed five or more drinks for men and four and above for women - rose an extra 19% for every week of lockdown.

The odds of increased alcohol intake overall for binge drinkers was more than double that of people who did not drink excessively (60% vs 28%), especially those with depression or a history of the disease.

Carried out by experts at the University of Texas Health Science Center School of Public Health, i Dallas, the study also highlights that:

- During the pandemic, binge drinkers on average drank four drinks per occasion, compared to two drinks among non-binge drinkers.
- Participants who drank at harmful levels during the pandemic would consume seven drinks maximum on one occasion. This is compared to a maximum of two per session during the pandemic for those who did not.
- Living with children in lockdown minimally reduced the odds (by 26%) of turning to the bottle for people in general.

The researchers are now calling for new intervention and prevention strategies for people in isolation at risk of hazardous drinking. Otherwise, they say there could be long-lasting health consequences.

"Increased time spent at home is a life stressor that impacts drinking and the Covid-19 pandemic may have exacerbated this stress," says Sitara Weerakoon, a PhD candidate from the University of Texas.

"Future research should consider the potential for depressive symptoms acting as a moderator (a factor that changes the impact) in the relation between the time spent under a shelter-in-place mandate (lockdown) and binge drinking.

"Additional research is (also) needed to develop best treatment for people with substance use disorders who may be more susceptible to adverse health outcomes."

The study aim was to identify a link between COVID-19-related stress factors and changes in alcohol consumption and binge drinking since the pandemic began.

The data was from an online survey completed by 1,982 adults from mid-March to mid-April, which coincided with the first US state-wide stay-at-home order on March 19. The average age of participants was 42 and the majority were white (89%) and female (69%).

Based on survey responses, the researchers categorised participants as binge drinkers, non-binge drinkers and non-drinkers. Among the factors analysed were length of time spent in lockdown, how many adults or children they were living with, current or previous episodes of depression, and job status related to lockdown such as decreased pay.

On average, every respondent had been in lockdown for four weeks, and spent 21 hours a day at home, with the majority (72%) not leaving for work.

Overall, nearly a third (32%) of participants reported binge drinking during the pandemic with binge drinkers increasing their intake. However, non-binge drinkers consumed about the same amount of alcohol than before lockdown.

Limitations of the study include the survey data being self-reported, and the fact the question on binge-drinking did not specify a time within which the alcohol was consumed.

In addition, the majority (70%) of participants were relatively high earners, a factor already associated with hazardous alcohol use. The authors say future research is needed in a more 'generalizable population'.

## **Dad facing DUI charges after trying to pick up child at elementary school**

Written by KOLN Staff

LINCOLN, Neb. (KOLN) - The Lincoln Police Department says a man was taken into custody and is now facing DUI charges after trying to pick up his child at school.

Around 3:30 p.m. on Tuesday, officers were dispatched to Meadowlane Elementary for a report of a principal taking keys from a parent.

LPD said the principal was taking the keys from the father, who was there to pick up his 11-year-old child, because he had thrown up outside of the window of his car five times.

According to police, the mother was contacted and picked up the child.

LPD said the father was kept at the school and responding officers saw the man and believed he was at a high level of intoxication.

A field sobriety test was performed and LPD said the father failed.

According to police, the man also failed a Preliminary Breath Test and went to detox, and registered a 0.103 blood alcohol content.

LPD said the father is facing DUI with a child under the age of 16 charges.

## **Parents of Elkhorn High student who died in 2018 sues Kwik Shop for supplying alcohol**

Written by Todd Cooper

The parents of an Elkhorn High School student killed when he drove off the road after consuming alcohol that was sold by a Kwik Shop clerk have filed a wrongful-death lawsuit against the chain.

Jessica Kinnersley filed a lawsuit this fall on behalf of the estate of George Gervase, the 17-year-old who died in October 2018 after his Nissan Maxima left the road and hit a pole near 192nd and Pacific Streets. Kinnersley, George's mother, was joined at a hearing Thursday by George's father, George Gervase Sr.

An Omaha police investigation determined that a Kwik Shop clerk sold alcohol to two teens who then turned around and sold it to George Gervase. Gervase's blood alcohol content was .217. The legal limit for adults to drive is .08.

The lawsuit alleges that Kwik Shop failed to adequately supervise the clerk, Kevin Hart.

"Kwik Shop did little to nothing to investigate or identify sale of alcohol to minors, and did little to nothing to properly train (employees) or restrain employees from selling alcohol to minors," attorney Daniel Fischer alleges in the lawsuit.

Kwik Shop asked Judge Timothy Burns on Thursday to dismiss the case. An attorney for Kwik Shop, Matthew Rusch, said Gervase's family cannot collect because of a law passed by the Nebraska Legislature in 2007.

That law holds bars and liquor stores responsible for deaths or injuries to third parties as a result of a crash caused by a drunken teen. However, the law has a carve-out that says that liquor stores don't have to pay for the death of the intoxicated minor himself.

"No cause of action under the Minor Alcoholic Liquor Liability Act shall be available to the intoxicated person, his or her estate, or anyone whose claim is based upon injury to or death of the intoxicated person," the law says.

"This is a terrible, tragic situation," Rusch said Thursday. "It's a terrible event, and Kwik Shop extends its condolences. But that being said ... we have to look at Nebraska law. ... And in looking at Nebraska law, it's clear there is no recognized cause of action."

Fischer disagreed. He argued that the 2007 law does not prohibit the estate from attempting to collect under common-law arguments that Kwik Shop was negligent in selling to a minor.

Burns will decide in coming weeks whether the lawsuit can proceed.

Coincidentally, Burns oversaw the criminal case against Hart. Burns sentenced the 30-year-old Hart to a year in prison and 18 months of supervised release after he pleaded no contest to procuring alcohol for a minor. Having completed his year in prison, Hart is currently serving his parole term.

Hart told the judge at the time of his sentencing that he had been using illicit drugs, which may have affected his decision-making.

"I cannot begin to express how sorry I am," Hart said at sentencing. "It was the single most unintelligent and moronic action I've made in my life. It's the first thing I think of when I wake up and the last thing I think of when I go to bed. ... I know I can never undo (it)."

From late August until Oct. 11, 2018, the teens, ages 16 and 17, bought alcohol from Hart at the store more than two dozen times. At times, the teens would text Hart.

"So can we come in and buy alc?" one text read.

"Yep, just got in," Hart responded.

That night, Gervase had contacted the boys through Snapchat to request two kinds of liquor — Four Loko Gold and Captain Morgan.

The boys went to the gas station. Hart hit a button on the cash register that allowed him to override the age check.

The boys turned around and sold some of the alcohol to Gervase and his friend. Surveillance video from Elkhorn High School showed a white pickup truck meeting a dark-colored car — thought to be the Nissan Maxima that Gervase was driving — in the parking lot about 11:45 p.m.

From there, Gervase and his friend ended up at a female teen's house, where a group of teens had gathered. Most of the teens were drinking excessively, an attorney has said. A stepfather of one of the girls came downstairs to find a group of drunken teens and kicked them out of his house.

No one is sure what time Gervase crashed.

An accident reconstruction expert determined that Gervase was headed south on 192nd Street, traveling at a high speed, when his car left the roadway.

Gervase wasn't spotted until dawn.

## **A community-level intervention reduces alcohol-related crashes**

Written by Pacific Institute for Research and Evaluation

New research from the Prevention Research Center of the Pacific Institute for Research and Evaluation shows that a community-level alcohol intervention in California resulted in a 17% reduction in alcohol-involved crashes among drivers aged 15-30.

The research study assessed an intervention aimed at reducing excessive drinking and harm among teens and young adults, including driving under the influence. Twenty-four California cities were chosen at random for the study with 12 cities then randomly assigned the intervention and 12 cities assigned as controls.

Interventions included sobriety checkpoints, saturation patrols, and undercover operations to reduce service of alcohol to intoxicated bar patrons, with all interventions accompanied by high visibility to raise public awareness. The effect of these efforts translates into about 310 fewer crashes across the intervention cities.

Says lead author, Dr. Robert Saltz: "The impact of alcohol control policies, whether at the city, state, or national level, ultimately depends on local enforcement. Even though numerous strategies to reduce alcohol-impaired driving have been employed over the years, the study shows that enhanced alcohol interventions involving partnerships of community health and law enforcement agencies can further reduce alcohol-impaired driving and related consequences among young people."

## Nebraska has one of the nation's highest binge drinking rates

Written by Chris Dunker, Molly Hunter

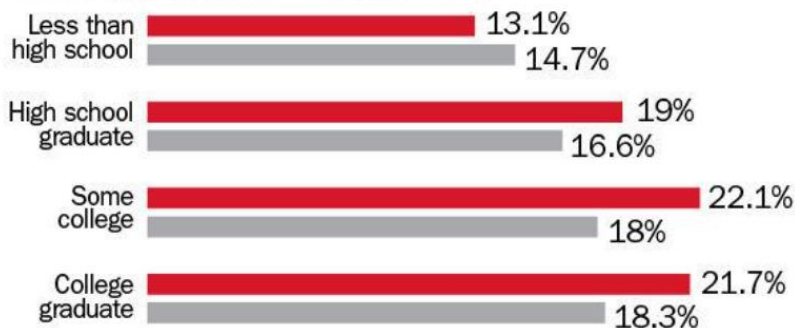
Like other states with large rural populations, Nebraska has a drinking problem.

The percentage of adults in the state who report binge drinking — that's four drinks for a woman and five for a man — has been consistently higher than the country at large.

In 2019, according to the Centers for Disease Control and Prevention's Behavioral Risk Factor Surveillance System, 21.9% of Nebraskans reported binge drinking within the previous 30 days, compared with 18.6% nationally.

### EXCESSIVE DRINKING, BY EDUCATION

Percentage of adults ■ NEB. ■ U.S.



SOURCE: CDC, Behavioral Risk Factor Surveillance System, 2019

MATT HANEY, THE WORLD-HERALD

While the Cornhusker State's numbers are down 2% from 2011, the CDC has reported a bounce from the decade low of 20.4% in 2015.

Health experts, law enforcement and education officials in Nebraska say that's cause for concern.

Excessive drinking comes with a host of short-term problems, including a penchant for violence and poor decision-making.

"Driving under the influence, domestic assaults, assaults in general — we respond to more of those type of calls because of a direct correlation between alcohol use and changes in demeanor and poorer choices," said Platte County Sheriff Ed Wemhoff.

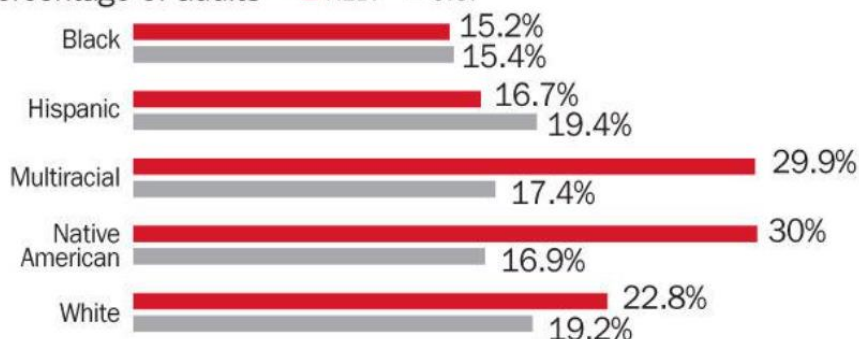
Other long-term health problems associated with excessive drinking include hypertension, heart and liver disease, various cancers and addiction.

Before the coronavirus pandemic took hold, the number of people seeking treatment for alcohol addiction at The Bridge Behavioral Health had been increasing greatly, according to Tammy Stevenson, executive director of the Lincoln treatment center.

In 2019, the number of patients seeking a bed increased 150% over the previous year, which she attributed to law enforcement encouraging people to get help.

## EXCESSIVE DRINKING, BY RACE

Percentage of adults ■ NEB. ■ U.S.



SOURCE: CDC, Behavioral Risk Factor Surveillance System, 2019

MATT HANEY, THE WORLD-HERALD

“People are more likely to seek help and treatment if they come in voluntarily,” Stevenson said, “and I know (law enforcement) would much rather have them come here than have to take them to jail.”

The Bridge, which is one of several alcohol and drug addiction treatment centers in Lincoln, also is the city’s “emergency detoxification program” — more commonly known as detox.

Many of the people brought to The Bridge by law enforcement are suffering from chronic alcohol abuse, Stevenson said. They also see “episodic drinkers,” those who had a trip to the bars that went too far.

But 90% of the people who come to detox, when surveyed about their drinking habits, say they were binge drinkers before they turned 18.

“These are individuals that have been impacted by alcohol use and drug use for a very long time,” Stevenson said.

According to the CDC, almost 31% of Nebraskans ages 18 to 44 had reported binge drinking within the previous 30 days, aligning Nebraska with states like Iowa, South Dakota, North Dakota, Minnesota and Wisconsin.

Nationally, the binge drinking rate among those 18 to 44 was 25.2%.

### *The most binge drinking*

States with the highest percentage of adults who reported binge drinking in the past 30 days.

Wisconsin: 23.6%

Minnesota: 22%

North Dakota: 23.3%

Nebraska: 21.9%

Montana: 22.7%

Illinois: 21.6%

South Dakota: 22.6%

Massachusetts: 21.3%

Iowa: 22.5%

Vermont: 21%

Data collected by the CDC in 2019

The University of Nebraska-Lincoln, with 20,000 undergrads, has taken steps to curb drinking among students. UNL has noted some progress over the last few years.

Connie Boehm, UNL's director of student resilience, said binge drinking rates at the state's flagship university are slightly below the national average.

Still, 35% of those who reported drinking in the two weeks before the survey was conducted in 2019 were classified as "high-risk drinkers."

Boehm said UNL students are required to complete alcohol education workshops each year. Recent screenings have asked students to anonymously examine how alcohol may be affecting their lives, with programming designed around their responses.

The university also has scheduled weekend events that "interrupt" student drinking by giving them other things to do. Officials plan to establish a residence hall for students in recovery.

"As you grow these communities, it helps nudge other students along to think about their drinking behaviors and realize there is not a stigma around getting help if you think you're drinking too much," Boehm said.

But binge drinking isn't limited to cities such as Lincoln with a large population of college students.

Social pressures, socioeconomic factors and cultural norms also have contributed to excessive alcohol use in more rural parts of the state like Columbus, a town of 23,000.

Across Nebraska, health officials emphasize building and maintaining a support system and resources for those who need it. Many of the programs are taxpayer-funded.

"The more resources you can get involved for someone who is fighting an addiction, the greater their chances are of recovery," said Dr. Kurt Kapels, clinical director of Inpatient Physician Associates of Columbus. "Whether that be support groups or support lines or rehab facilities or medications, when appropriate."

In addition to robust Narcotics Anonymous and Alcoholics Anonymous support systems, Columbus has Seekers of Serenity, which offers a 28-day social detox program, and SMART Recovery, which provides online help.

Goodwill Industries of Nebraska's Behavioral Health Services center in Columbus also offers community support, providing outpatient care before and after treatment.

Kapels encourages those needing help to reach out to their primary care doctor first to learn about what options are available and what might be the best path for them to pursue.

Addiction, including addiction to alcohol, is a real illness, Kapels said, and treating it can be difficult.

“And for some people, it’s not successful the first time. That doesn’t mean that the next time won’t be different,” Kapels said. “Continuing to seek help and continuing to build on the gains you’ve made gives you the best chance of success.”

The reasons why people start drinking excessively often are complex, said Stevenson, at The Bridge in Lincoln.

When the public health restrictions put in place to stop the spread of COVID-19 lift, she expects the ongoing public health issues around alcohol use in Nebraska to remain.

“I suspect for some individuals, life will be able to return to normal pretty easily,” she said. “For others, there will be lasting impacts from both a mental health and substance abuse perspective, and I think we’ll see that for some time to come.”

**OPD arrests 75 for DUI during the holidays; NSP arrest 41**

Written Taleisha Newbill

OMAHA, Neb. (WOWT) - The Omaha Police Department and the Nebraska State Patrol wrapped up their "Drive Sober or Get Pulled Over" campaign in January with 75 DUI arrests while NSP made 41.

According to an OPD news release, of the 75 arrests for driving under the influence of alcohol:

- 59 arrests were first-offense DUI
- 8 arrests were second-offense DUI
- 7 arrests were felony (or 3 or more) DUI
- One was arrested for DUI under the age of 21

Other arrests made during holiday season campaign, from Dec. 18 through Jan. 1:

- 9 people were arrested for refusing to take a breath test
- 7 were arrested for minor in possession of alcohol
- 139 were arrested for operating a vehicle while on a suspended license
- 48 were arrested for careless or reckless driving
- 15 citations were given for not wearing a seat belt
- 20 citations were given for having an open container of alcohol in a vehicle
- One person was cited for improper child restraint
- 86 citations for possession of marijuana and drug equipment
- 47 arrests for possession of a controlled substance
- 358 citations for speeding

The Nebraska State Patrol holiday campaign, happening over the same timeframe, netted 41 DUI arrests. In addition:

- 485 citations were issued for speeding
- 16 were cited for driving with an open alcohol container
- 6 citations were issued for minor in possession
- 57 were cited for driving with a suspended license
- 28 cited for driving without proof of insurance
- 17 cited for not wearing a seat belt
- 4 cited for improper child restraint

## **Omaha police officer hit by vehicle on Kennedy Freeway; driver arrested on suspicion of DUI**

Written Jessica Wade

An Omaha police officer was injured Thursday when he was struck by a vehicle on Kennedy Freeway.

Officer Michael Salseda was working to redirect traffic around a crash at 6:17 p.m. on the freeway near F Street when he was struck by a vehicle driven by 29-year-old Christopher Guy.

Salseda had parked his cruiser with its emergency lights on and, while wearing a high-visibility traffic vest, was placing flares.

Guy, driving north and unable to stop behind the cruiser, swerved to the right, then to the left onto the shoulder where Salseda was standing, according to the Omaha Police Department.

Salseda was taken to the Nebraska Medical Center with very serious but not life-threatening injuries.

Guy showed signs of impairment, and was taken to OPD Central Police Headquarters for a DUI investigation. Guy's blood alcohol content results were .305.

Guy was booked into Douglas County Jail on suspicion of driving under the influence causing serious bodily injury.

## **Ralston woman arrested for DUI with child in car; police say it's a growing issue**

Written Ashly Richardson

RALSTON, Neb. (WOWT) - Ralston Police are releasing shocking new details after a woman is arrested for drinking and driving with a child in the car.

The department says it's part of a larger issue they are noticing in the community.

"She had a child with her in the car, and that is something we obviously take very seriously," says Ralston Deputy Chief Bryan Hanson.

Officers were called to Ralston High School for a possible drunk driver who struck a pole in the parking lot around 6 Monday night. When police got there, they found a woman behind the wheel and a child in the car.

On top of that, police said, the woman was on her way to pick her toddler up from daycare. Arresting officers said she was nearly four times over the legal limit.

"She's not only putting herself and other drivers at risk, but also her own child," Deputy Chief Hanson said.

Ralston Deputy Chief Bryan Hanson says this is part of a larger ongoing issue they are seeing... an increase of drunk drivers on Ralston roads.

"Since November to January First, compared to last year we are up 12% in DUI arrests," says Deputy Chief Hanson.

He said investigators aren't exactly sure why they are seeing more drunken drivers, but the pandemic may be playing a role.

"It could have something to do with recently the bars re-opening. It could be people are venturing out more after being locked down or not being comfortable going out for a while but when they do go out maybe they tend to drive a bit more than they would," Hanson said.

But his team is staying vigilant when it comes to drunken drivers.

"We find that it's a very easy way for us to be proactive to prevent a very dangerous situation. So, our guys always take the initiative to go out and look for intoxicated drivers," he said.

Hanson said the Ralston Police Department along with a few officers have received special awards from Mothers Against Drunk Driving for their work in trying to keep impaired drivers off the roads.