

The Extra Mile

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

Alcohol and the Coronavirus:

The problem with promoting America's deadliest drug during a pandemic

Excessive alcohol use is responsible for about [88,000 deaths a year](#) in the United States, including 1 in 10 total deaths among working-age adults aged 20 to 64 years. The harms associated with excessive [alcohol use cost the U.S. \\$249 billion](#) in 2010.

During the last month, as businesses began to close in response to the coronavirus pandemic, the Wine & Spirits Wholesalers of America (WSWA) urged governors to keep alcoholic beverage retail locations open. [WSWA submitted a letter to all 50 governors](#), asking them to allow retailers to continue operating under state laws that allow for curbside pick-up or delivery of alcohol. For states without these laws in place, WSWA encouraged governors to include them as well. Subsequently, [states across the country began easing alcohol sales restrictions](#) and Nebraska quickly followed suit.



On March 19th, Governor Ricketts issued an [executive order](#) authorizing licensed establishments in Nebraska to sell beer, wine, and spirits to customers via takeout or delivery orders. The executive order initially created confusion among retailers, leading an announcement from the Nebraska Liquor Control Commission the day after stating "All OFF-SALE must be in its original unopened containers. We have received many questions about selling cocktails such as margarita, sangria, and other mixed drinks to go. This is not allowed."

That restriction lasted one week until a [second executive order](#) was announced on March 26th giving restaurants and bars the ability to provide takeout for cocktails and other alcoholic beverages as long as they are sealed with a

lid. The latest policy change adds an increased burden on law enforcement, as research has shown that [enforcement of open container laws is crucial to effectively addressing drinking and driving](#).

This quick rollback of alcohol regulations demonstrates the influence that the alcohol industry has in statehouses across the country. It's rare to see alcohol laws and regulations tightened in the name of public health. Oftentimes, good bills are abandoned because the industry argues it's economic impact is critical to the economy. Yet at the same time, the high cost burden of excessive alcohol use is a drain on the U.S. economy, and industry friendly bills are primarily paid for by taxpayers due to [alcohol taxes being far too low to cover these costs](#).

In addition to excessive alcohol use, drunk driving remains one of the deadliest problems plaguing our communities. In many areas across the country, progress in reducing drunk driving deaths has stalled. Nebraska ranks 2nd worst among all states for self-reported drunk driving, and alcohol-related crashes represent 30% of all fatal crashes in the state. Supporting Nebraska businesses is something we can all agree on during this crisis. However, lifting regulations that are in place to protect public health at a time when people are increasingly unemployed, isolated, anxious, and depressed is not a well thought out solution.

According to a recent [CBS New York story](#), health officials in the state are afraid that growing fears surrounding the coronavirus will lead to an increase in substance abuse. A spike in alcohol sales has already been observed in many areas around the country, and health experts have warned that alcohol suppresses the immune system. Others have shared concerns about an increase in [domestic violence](#).

In other areas of the world, some leaders have taken a drastically different approach. [The sale of alcohol was recently banned in the capital of Greenland](#) to "reduce violence against children during the period of confinement caused by the coronavirus outbreak." Many states in the U.S. have deemed liquor stores "essential businesses," placing them at the same level of importance as grocery stores and pharmacies. The ability of the alcohol industry to accomplish this in the U.S. has effectively offset any improvements we could have expected to see in public health and safety through a decrease in alcohol consumption.

The National Institute on Alcohol Abuse and Alcoholism (NIAAA) has pointed to the significant role alcohol plays in [deaths of despair](#), leading to overdoses, suicides, and liver disease, as well as to a wide range of other conditions. With all of the recent headlines around deaths of despair in America, it's difficult to understand why state leaders have so quickly overlooked the harm that results when alcohol is more readily available, particularly during stressful, uncertain times. Alcohol use has been on the rise among middle-aged adults in the U.S. It is more common when people are experiencing circumstances such as job loss, divorce, economic downturns, chronic pain, or psychiatric conditions. The pandemic is substantially impacting all of these factors, and increasing alcohol availability puts individuals and communities at even greater risk.

April is Alcohol Awareness Month

[More prevention efforts should focus on alcohol-cancer link](#)

April is Alcohol Awareness Month. While public health, treatment, recovery,

and other organizations have made substantial progress increasing awareness of the adverse health effects associated with alcohol use, less progress has been made in adopting effective alcohol policies at the local, state, and federal levels. [Recent research](#) indicates heightened awareness about the role alcohol plays in cancer risk may help to increase public support for implementing alcohol policies.

Many people continue to be unaware that drinking alcohol can raise their risk of getting cancer. [Alcohol plays a role in about 3.5 percent of all cancer deaths in the U.S.](#) The risk of breast cancer among women increases with less than one drink per day. Compared to women who had fewer than 60 drinks a year, those drinking between 60 and 229 drinks, or about 0.6 drinks per day, on average, were 20% more likely to develop breast cancer. Research has shown that excessive drinkers also have a higher risk of cancers of the mouth, esophagus, larynx, pharynx, liver, colon, and rectum, according to the NIAAA.

A recent survey of women found about half knew that smoking was a risk factor for breast cancer, but only [about 20% knew that consuming alcohol was a risk factor](#). Among health care workers, knowledge of the connection between alcohol and breast cancer was also low. Of 33 health care workers surveyed, fewer than half (49%) identified alcohol as a risk factor for breast cancer. Furthermore, a 2017 survey by the American Society of Clinical Oncology found that [70% of Americans didn't know that drinking alcohol is a risk factor for cancer](#).

Thirteen percent of a sample of [individuals surveyed in England](#) were aware of the alcohol-cancer link unprompted, 34% were aware when prompted, and 53% were not aware of the relationship. Researchers studied support for four policy factors, including price and availability, marketing and information, harm reduction, and drunk driving. Awareness of the alcohol-cancer link (unprompted) was associated with increased support for each of the four factors.

Researchers concluded that support for alcohol policies is higher among individuals who are aware of the link between alcohol and cancer. Unfortunately, over half of the people surveyed were unaware, so increasing awareness may be a good approach to increase support for alcohol policies.

To learn more about the link between alcohol use and cancer, visit Project Extra Mile's [website](#).

DRINKING ALCOHOL RAISES THE RISK OF SOME CANCERS

THE LESS ALCOHOL YOU DRINK,
THE LOWER THE RISK OF CANCER.

DRINKING ANY KIND OF ALCOHOL CAN CONTRIBUTE TO CANCERS OF THE:

- ▶ MOUTH AND THROAT
- ▶ LARYNX (VOICE BOX)
- ▶ ESOPHAGUS
- ▶ COLON AND RECTUM
- ▶ LIVER
- ▶ BREAST (IN WOMEN)

WWW.CDC.GOV/CANCER/DCPC/PREVENTION/OTHER.HTM

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

Lower BAC Limits Save Lives

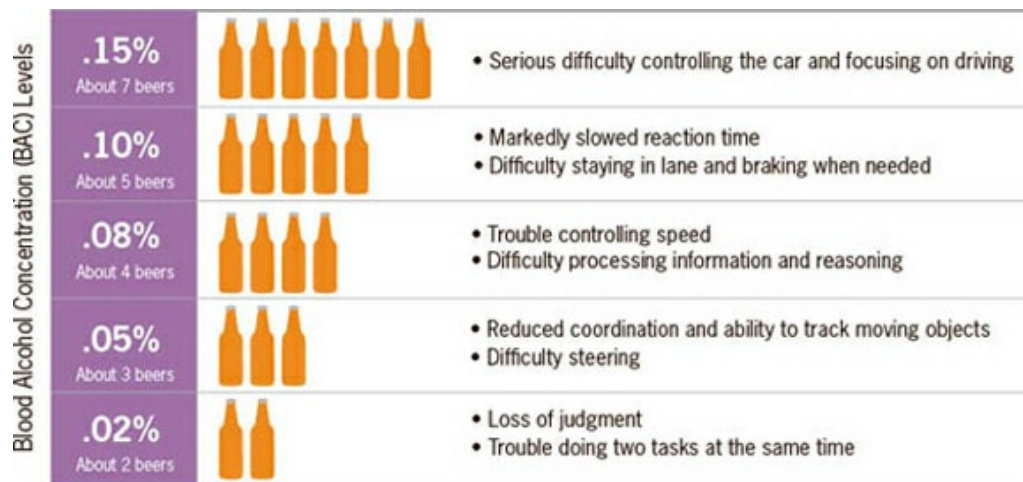
15% of alcohol-related motor vehicle fatalities involve drivers under .08

New research published in the *American Journal of Preventive Medicine* analyzed motor vehicle crashes involving drivers with blood alcohol concentrations (BACs) below 0.08 percent. [These crashes account for 15 percent of alcohol-involved crash deaths in the U.S.](#) Of these deaths, 55 percent of fatalities were individuals other than the drinking driver. These particular crashes were also more likely to result in youth fatalities compared with crashes above the legal (0.08%) BAC limit.

"Our study challenges the popular misconception that alcohol-involved crashes primarily affect drinking drivers, or that BACs below the legal limit don't matter," said Dr. Tim Naimi, one of the study's authors. Alcohol policies that could lead to a decrease in crash deaths involving alcohol at all BAC levels include increased alcohol taxes and limited alcohol availability in grocery stores, according to the study.

More than 1,500 lives could be saved annually if the BAC limit across the U.S. were lowered to 0.05%. Based on a large body of research, a report by the [National Academies of Sciences, Engineering, and Medicine \(NASEM\)](#) [recommends that all states lower the BAC limit set by state law from 0.08% to 0.05%](#) to prevent deaths from alcohol-impaired driving.

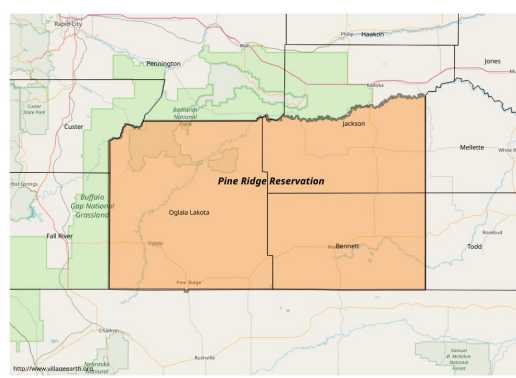
Impairment from alcohol consumption begins at BAC levels well below 0.08%. The National Highway Traffic Safety Administration (NHTSA) has stated that [impairment occurs at a BAC of 0.02%](#), with drivers experiencing loss of judgment, altered mood, and a decline in visual functions.



Oglala Sioux Tribe Maintains Ban on Alcohol

Results indicate proposal to allow alcohol in casinos fails by large margin

The Oglala Sioux Tribe rejected the sale of alcohol at casinos on the Pine Ridge Reservation in South Dakota in early March. [Voters answered three questions on the March 10th ballot](#), including whether or not to allow medical marijuana and recreational marijuana on the Reservation and alcohol sales at two casinos.



Both medical and recreational marijuana passed easily, while [a decisive majority of voters \(62%\) said no to allowing alcohol sales in casinos](#).

Favian Kennedy, Director of Anpetu Luta Otipi Comprehensive Alcohol and Substance Abuse Treatment and Prevention Program, was pleased with the results on alcohol. "The abuse of alcohol and other substances remains one of the most substantial public health problems in Pine Ridge, so it's important to implement policies that limit access to alcohol and other harmful products to improve the health status of the Tribe," he said. "The revocation of alcohol licenses in Whiteclay, Nebraska, is transforming the area. Hope and positive economic development are beginning to spring up in a location that only knew despair."

The sale and possession of alcohol are illegal on the Pine Ridge Reservation. A tribal vote in 2013 to legalize alcohol was not implemented, and the sale of alcohol in neighboring Whiteclay, NE (population 12) ended following a Nebraska Supreme Court decision in 2017 following decades of alcohol-related trauma to children and families.

Before 2017, Whiteclay was home to four Class B liquor licenses that allowed for the sale of alcohol for off-premise consumption. The Reservation has prohibited the purchase and use of alcohol for over 120 years. Yet between 2006 and 2015, Whiteclay liquor stores sold an average of 341,000 gallons of high-gravity (high alcohol content) beer per year, or [3.6 million cans per year](#).

Indian Health Service has estimated that 85% of families on the Pine Ridge Reservation are impacted by alcohol abuse. One in 4 (25%) children are born with Fetal Alcohol Spectrum Disorders (FASD) versus national estimates of 2-5%; the infant mortality rate is 300% higher than the national average, and the teen suicide rate is 150% higher than the national average.



In the interest of Public Health, the Project Extra Mile

April Coalition Meeting has been cancelled.

At this point we will still plan to continue with the May 13th meeting as scheduled, but will continue to monitor recommendations from health officials and will make any necessary decisions at that time.

We hope that you will stay healthy during this time and look forward to when we will be able to meet again.

The Project Extra Mile Staff



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