



**RESEARCH SUMMARY**  
Date Compiled: June 2017

**LATE NIGHT ENVIRONMENTS: BAR “MORPHING” INCREASES RISKY ALCOHOL SALES IN ON-PREMISE OUTLETS**

May 2017

Niche theory proposes that in areas of high alcohol availability, alcohol sales outlets will compete for patrons by diversifying their operating characteristics to provide a diversity of drinking contexts. We aimed to characterize features of outlet operations that contribute to increased risk of alcohol problems across communities. We conducted ethnographic observations in 97 on-premise outlets across six California cities and interviewed staff and patrons in a subsample of these. We observed outlet managers deliberately altering the environments in 17.5% of establishments. These modifications aimed to increase bar/nightclub effects, enabling venues to “morph” (i.e. alter operating conditions from restaurant to bar, or from bar to club) and display environmental characteristics associated with over-service and alcohol-related problems (e.g. more young male patrons, crowding and dancing). Late night morphing was observed in some outlets in most cities and included outlets operating with restaurant licenses. Staff and patrons identified morphing as a strategy to increase alcohol sales in late night hours. Competition for late night customers may encourage business practices that increase the number of alcohol sales establishments operating under risky circumstances. Community alcohol policies and practices should attend to the potential expansion of risky alcohol sales niches in night-time economies.

**Source:** Drugs: Education, Prevention and Policy

<http://www.tandfonline.com/doi/abs/10.1080/09687637.2017.1327572>

**CURRENT AND BINGE DRINKING AMONG HIGH SCHOOL STUDENTS — UNITED STATES, 1991–2015**

May 2017

...The overall prevalence of current drinking among U.S. high school students declined significantly from 50.8% in 1991 to 44.7% in 2007, then further declined to 32.8% in 2015 (Figure 1). Trend analysis indicated that the prevalence of binge drinking increased from 31.3% in 1991 to 31.5% in 1999, then declined significantly to 17.7% in 2015. From 1991 to 2015, the percentage-point decline in the prevalence of current and binge drinking was greater among male students (current drinking declined 20.5 percentage points, and binge drinking declined 17.9 percentage points) than female students (current drinking declined 15.3 percentage points, and binge drinking declined 9.1 percentage points) ...

The Community Preventive Services Task Force recommends evidence-based strategies for reducing excessive alcohol use, including underage and binge drinking. These include increasing alcohol taxes, regulating alcohol outlet density, and having commercial host liability laws. Moreover, given the association between youth exposure to alcohol advertising and underage drinking, monitoring and reducing youth exposure to alcohol advertising through the implementation of “no-buy” lists (i.e., lists of television programming that risk overexposing youth to alcohol advertising based on the industry’s self-regulatory alcohol marketing guidelines) might also help reduce underage drinking.

**Full report:** <https://www.cdc.gov/mmwr/volumes/66/wr/mm6618a4.htm>

**Source:** CDC/MMWR

**DRINKING JUST ONE GLASS OF WINE OR OTHER ALCOHOLIC DRINK A DAY INCREASES BREAST CANCER RISK, FINDS A MAJOR NEW REPORT BY AICR AND THE WORLD CANCER RESEARCH FUND (WCRF)**

May 2017

Drinking just one glass of wine or other alcoholic drink a day increases breast cancer risk, finds a major new report by AICR and the World Cancer Research Fund (WCRF).

The report also revealed, for the first time, that vigorous exercise such as running or fast bicycling decreases the risk of both pre- and post-menopausal breast cancers. Strong evidence confirmed an earlier finding that moderate exercise decreases the risk of post-menopausal breast cancer, the most common type of breast cancer.

“It can be confusing with single studies when the findings get swept back and forth,” said Anne McTiernan, MD, PhD, a lead author of the report and cancer prevention expert at the Fred Hutchinson Cancer Research Center.

“With this comprehensive and up-to-date report the evidence is clear: Having a physically active lifestyle, maintaining a healthy weight throughout life and limiting alcohol – these are all steps women can take to lower their risk.” ...

**Full cancer research update:** [http://www.aicr.org/cancer-research-update/2017/05\\_31/new-aicr-breast-cancer-report.html](http://www.aicr.org/cancer-research-update/2017/05_31/new-aicr-breast-cancer-report.html)

**Related blog post:** Reducing your breast cancer risk – top three takeaways from new report  
<http://blog.aicr.org/2017/05/25/reducing-your-breast-cancer-risk-top-three-takeaways-from-new-report/>

**Full report:** <http://www.aicr.org/continuous-update-project/reports/breast-cancer-report-2017.pdf>

**Source:** American Institute for Cancer Research

*Related Media Coverage:*

Washington Post: Just one alcoholic drink a day increases risk of breast cancer, study says  
[https://www.washingtonpost.com/news/to-your-health/wp/2017/05/23/just-one-alcoholic-drink-a-day-increases-risk-of-breast-cancer-study-says/?utm\\_term=.1274bcef073a](https://www.washingtonpost.com/news/to-your-health/wp/2017/05/23/just-one-alcoholic-drink-a-day-increases-risk-of-breast-cancer-study-says/?utm_term=.1274bcef073a)

USA Today: One small drink a day increases breast cancer risk, study shows  
<https://www.usatoday.com/story/news/nation-now/2017/05/23/one-small-drink-day-increases-breast-cancer-risk-study-shows/338572001/>

CNN: A drink a day tied to higher breast cancer risk, report says  
<http://www.cnn.com/2017/05/23/health/breast-cancer-risk-alcohol-study/>

## ALCOHOL ADVERTISING COMPLIANCE ON CABLE TELEVISION, JANUARY – MARCH (Q1) 2016

### BACKGROUND

Excessive alcohol consumption contributes to an average of 4,350 deaths among people under age 21 each year, and is associated with many other health risk behaviors, including smoking, physical fighting, and high-risk sexual activity. At least 25 longitudinal studies have affirmed that youth exposure to alcohol advertising is associated with the initiation of alcohol consumption by youth, the amount of alcohol consumed per drinking occasion, and adverse health consequences.

To help limit youth exposure to alcohol advertising, the alcohol industry has established voluntary guidelines for the placement of alcohol advertising on television that require ads to be placed only on programs with an underage audience (i.e., under age 21) that is less than 28.4% of the total audience. However, an analysis by Ross et al. found that, from 2005 through 2012, underage youth were exposed to more than 15 billion alcohol advertising impressions that aired on programs that did not comply with the alcohol industry's placement guidelines, and that almost all of the resulting non-compliant advertising impressions (96%) aired on cable television programs.

The Federal Trade Commission (FTC) recommends that alcohol advertisers adopt “no buy” lists to avoid placing alcohol advertising on programs that could violate the industry's voluntary placement guidelines. To test the potential impact of this industry practice, Ross et al. developed three no-buy list criteria consistent with FTC recommendations, including avoiding advertising on programs that were known to have previously violated the alcohol industry's placement guidelines (i.e., were serially non-compliant); programs that ran during time periods that were known to be popular among underage youth (i.e., high-risk network-dayparts); or programs that were known to have a small number of adult viewers (i.e., low-rated). They subsequently tested the potential impact of these three no-buy list criteria on youth exposure to alcohol advertising, and estimated that by consistently using these criteria, advertisers could eliminate most of the non-compliant alcohol advertising exposure on cable television.

The purpose of this report is to: 1) assess non-compliant alcohol advertising on cable TV that aired during an eight-quarter period from the second quarter (Q2) of 2014 through the first quarter (Q1) of 2016 (i.e., April 2014 to March 2016) based on the three no-buy list criteria developed by Ross et al.; and 2) identify the 25 alcohol brands, programs, and network-dayparts that were responsible for the largest amount of non-compliant alcohol advertising exposure, and the distribution of this exposure based on no-buy list criteria.

**Full report:** [http://www.camy.org/docs/resources/reports/alcohol-advertising-monitoring/CAMY\\_CableTV\\_2016\\_Q1.pdf](http://www.camy.org/docs/resources/reports/alcohol-advertising-monitoring/CAMY_CableTV_2016_Q1.pdf)

**Source:** Center on Alcohol Marketing and Youth

## THE ADVERSE INFLUENCE OF ALCOHOL IN SUICIDES

May 2017

Although there is a growing body of data linking alcohol use to suicide, recent research looked into how alcohol retail density levels and blood alcohol concentration (BAC) contributes to the problem.

“Previous research has usually looked at alcohol pricing or alcohol availability — which is the density of outlets — and overall rates of suicide,” said Dr. Norman Giesbrecht, co-researcher in the study and emeritus scientist at the Centre for Addiction and Mental Health in Toronto. “Because [the study] used this unique data from the National Violent Death Reporting System (NDVRS), it was able to also dig a little more to indicate whether the people who committed suicide had alcohol in their system. In other words, whether they were BAC positive or the BAC was above the legal limit for driving. So it was more focused in terms of the relationship between physical alcohol availability and specific types of suicide, namely alcohol related-suicides.”

The NDVRS is supported by the Centers for Disease Control and Prevention and is a surveillance system that was created to provide comprehensive data on violent deaths. The researchers used the database from 14 states to gather information on off-premise and on-premise use of alcohol — places such as liquor stores or bars, respectively. To account for density, the amount of alcohol outlets per square mile or population was considered.

The researchers looked at 51,547 suicide decedents and overall, 34 percent of those who committed suicide had alcohol in their system and 22 percent had an elevated BAC (> 0.08 g/dl). **They also determined that in the U.S. the density of both types of retail alcohol outlets increased the rates of suicides were linked to alcohol — especially among men, Native Americans and Alaska Natives...** [emphasis added]

**Full article:** <https://www.drugaddictionnow.com/2017/05/17/the-adverse-influence-of-alcohol-in-suicides/2/>

**Source:** Addiction Now

## FROM BUDWEISER TO HEINEKEN, ALCOHOL BRANDS ARE RAMPANT IN HOLLYWOOD FILMS

May 2017

... Alcohol brand placement has nearly doubled over the past two decades, the authors find, and most of that is likely paid product placement.

"More than 80 percent of movies contain depictions of alcohol use," says Dartmouth University pediatrician James D. Sargent, who has been combing films for their depictions of violence, tobacco, drugs and drinking for more than 20 years. While this percentage remained relatively unchanged during those two decades, the presence of specific brands depicted on screen increased dramatically.

Sargent argues that the vast majority of alcohol depiction in films now is likely product placement. He found that roughly 44 percent of the 2,000 films studied showed real alcohol brands over the 20-year period studied. Moreover, the depiction of alcohol brands increased 96 percent in the movies studied, from 140 appearances in the top 100 films in 1996 to 282 appearances in the top 100 films of 2015 ...

**Full article:** <http://www.smithsonianmag.com/science-nature/budweiser-heineken-alcohol-brands-are-now-rampant-hollywood-films-180963207/>

**Source:** Smithsonian Magazine

## **DRINKING BEYOND THE BINGE THRESHOLD: PREDICTORS, CONSEQUENCES, AND CHANGES IN THE U.S.**

May 2017

**Introduction:** Binge drinking, five or more drinks on an occasion for men and four or more for women, marks risky alcohol use. However, this dichotomous variable removes information about higher, more dangerous consumption. This paper examines predictors, consequences, and changes over a decade in drinking one to two times, two to three times, and three or more times standard gender-specific binge thresholds, labeled Levels I, II, and III. **Methods:** In 2001–2002 and 2012–2013, respectively, 42,748 and 36,083 U.S. respondents aged ≥18 years were interviewed in person in cross-sectional waves of the National Epidemiologic Survey on Alcohol and Related Conditions (response rates, 81% and 61%). Respondents were asked their past-year maximum drink consumption per day, categorized as Levels I, II, or III. Predictors and whether Levels II and III were associated with more negative consequences were analyzed in 2012–2013 data. **Results:** In 2001–2002, 23% of adults reported past-year binge drinking, with 15% peaking at Level I, 5% at Level II, and 3% at Level III. In 2012–2013, those percentages increased significantly to 33% bingeing, and 20%, 8%, and 5% bingeing at Levels I, II, and III, respectively. After adjusting for alcohol use disorder, the strongest predictor of Level I, II, and III bingeing, Level III versus I and non-binge drinkers had higher odds of past-year driving after drinking and, after drinking, experiencing physical fights, injuries, emergency department visits, arrests/detentions, and other legal problems. **Conclusions:** Level II and III—relative to Level I—bingeing is associated with more negative alcohol consequences and may be increasing nationally. Research needs to explore prevention and counseling interventions.

**Full study** [free full text]: [http://www.ajpmonline.org/article/S0749-3797\(17\)30161-7/fulltext](http://www.ajpmonline.org/article/S0749-3797(17)30161-7/fulltext)

**Source:** American Journal of Preventive Medicine

## **ANYTIME, ANYPLACE, ANYWHERE: ADDRESSING PHYSICAL AVAILABILITY OF ALCOHOL IN AUSTRALIA AND THE UK**

May 2017

... International evidence consistently points towards the availability of alcohol as an important mediating variable in the prevalence of alcohol-related harm. Availability theory points to a number of interrelating factors that influence access to alcohol, including:

- how easy it is to physically obtain retail alcohol (physical availability)
- how affordable alcohol is (economic availability)
- social norms and provision of alcohol via informal means such as parties and social gatherings (social availability), and
- the perceived availability of alcohol, including responses to alcohol marketing (psychological availability)

Policy measures targeting the physical availability of alcohol in particular are one of the most effective ways to reduce alcohol-related harm. The World Health Organization (WHO) lists interventions that restrict the availability of retail alcohol among the three ‘best buy’ policies to reduce alcohol harm, alongside increases in price and bans on alcohol advertising. Specific interventions designed to restrict the availability of retail alcohol include minimum purchase age laws, spatial policies such as controls on the number and density of alcohol outlets, and temporal controls to regulate the days and hours of alcohol sale...

**Full report:** <http://www.ias.org.uk/uploads/pdf/IAS%20reports/rp25052017.pdf>

**Source:** Institute of Alcohol Studies

## **THE ROLE OF ALCOHOL PROBLEMS IN THE ASSOCIATION BETWEEN INTIMATE PARTNER ABUSE AND SUICIDALITY AMONG COLLEGE STUDENTS**

May 2017

**Objective:** Intimate partner abuse is a prevalent public health issue among college students and has been associated with suicidality and alcohol abuse. Evidence suggests that alcohol-related problems mediate the relationship between intimate partner abuse and suicidality, but it is limited to suicidal ideation among women. We aimed to expand the applicability of an existing mediation model by incorporating multiple indicators for intimate partner abuse and suicidality using a nationally representative sample of college students. **Method:** We used data from the National College Health Association Survey (N = 88,568). Key variables included involvement in intimate partner abuse (psychological, physical, and sexual), involvement in alcohol-related problems, and suicide-related behaviors (self-harm, ideation, and attempt). **Results:** We used structural equation modeling to test the mediation model. Results showed that alcohol-related problems partially mediated the association between abusive relationship involvement and suicidality. Furthermore, this association was equally present across men and women. **Conclusions:** Results demonstrate that psychological, physical, and sexual abuse involvement lead to self-harm, suicidal ideation, and suicide attempts via problematic alcohol use. The partial mediation by alcohol-related problems suggests the potential benefit of treatment focusing on both problematic alcohol use and intimate partner abuse in preventing suicidality.

**Source:** Psychology of Violence

<http://psycnet.apa.org/psycinfo/2017-18885-001/>

## **PREVENTING INTIMATE PARTNER VIOLENCE ACROSS THE LIFESPAN: A TECHNICAL PACKAGE OF PROGRAMS, POLICIES, AND PRACTICES**

May 2017

... Alcohol-related policies represent another potential way to reduce risk for IPV at the neighborhood/community level. Alcohol outlet density, defined as the number of locations where alcohol can be purchased, has been consistently linked to higher rates of IPV. For example, in a population-level survey of U.S. couples, an increase of 10 alcohol outlets per 10,000 persons was associated with a 34% increase in male-to-female partner violence. Policies that work to reduce a community's alcohol outlet density are one example of an approach that might help reduce community rates of IPV.

**Full report:** <https://www.cdc.gov/violenceprevention/pdf/ipv-technicalpackages.pdf>

**Source:** CDC

## **INFLUENCES OF AGE, SEX, AND MODERATE ALCOHOL DRINKING ON THE INTRINSIC FUNCTIONAL ARCHITECTURE OF ADOLESCENT BRAINS**

February 2017

The transition from adolescent to adult cognition and emotional control requires neurodevelopmental maturation likely involving intrinsic functional networks (IFNs). Normal neurodevelopment may be vulnerable to disruption from environmental insult such as alcohol consumption commonly initiated during adolescence. To test potential disruption to IFN maturation, we used resting-state functional magnetic resonance imaging (rs-fMRI) in 581 no-to-low alcohol-consuming and 117 moderate-to-high-drinking youth. ... **Functional network rewiring in moderate-to-high-drinking adolescents may impede maturation of affective and self-reflection systems and obscure maturation of complex social and emotional behaviors.** [emphasis added]

**Source:** Cerebral Cortex

<https://academic.oup.com/cercor/article-abstract/doi/10.1093/cercor/bhx014/2972122/Influences-of-Age-Sex-and-Moderate-Alcohol>

## COUNTING THE COSTS OF DRINKING ALCOHOL DURING PREGNANCY

2017

### **Q: What is fetal alcohol syndrome (FAS) and how much do we know about it today?**

A: Alcohol is poisonous to the developing fetus throughout the entire nine months of gestation. When a mother-to-be consumes alcohol, it goes directly to the fetus through her blood stream. These children may be born with fetal alcohol spectrum disorder (FASD), which is an umbrella term that covers all alcohol-related diagnoses, of which fetal alcohol syndrome (FAS) is the most severe and visibly identifiable form. FASD is associated with a wide range of physical, behavioural and learning problems including growth impairments, facial abnormalities, problems with brain function and developmental delays. **Recently our team identified more than 400 conditions that co-occur in individuals with FASD**, spanning 18 of the 22 chapters of the International statistical classification of diseases and related health problems ... [emphasis added]

**Full interview:** <http://cdrwww.who.int/bulletin/volumes/95/5/17-030517.pdf>

**Source:** Bulletin of the World Health Organization