

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

OMAHA COALITION MEETING Wednesday, February 12, 2025 9 a.m.

Please use to sign-in:

AGENDA

- I. Welcome and Introductions
- II. Review of the January 22, 2025 Meeting Minutes (please contact PEM staff with corrections)
- III. Counter Tools Support Services for Coalitions Maria Julian, Counter Tools
- IV. Focus Area Updates
 - a. Local
 - i. Krush Ultra Lounge
 - b. Policy
 - i. General Affairs Committee hearing summaries
 - ii. Alcohol Sales Tax bill
 - iii. Tracking Sheet available at www.projectextramile.org
 - c. Enforcement
 - i. Saturation patrol results
 - d. Youth
 - i. Leadership Network Next meeting: February 24, 2025 at 7 p.m.
 - e. <u>Awareness</u>
 - i. February Research Summary available at www.projectextramile.org
- V. Additional Discussion/Announcements
- VI. Adjournment and Next Meeting Date: March 12th @ 6 p.m.!! 30th Anniversary Recognition Dinner
 Champions Run in Omaha

IMPORTANT UPCOMING EVENTS

Youth Leadership Network Meeting – February 24th at 7-8 p.m. Nebraska Liquor Control Commission Hearings – March 4 & April 1, 2025 2025 Youth Leadership Retreat – June 3-5, 2025

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PROJECT EXTRA MILE

OMAHA METRO AREA COALITION MEETING MINUTES January 22, 2025

- I. Call to Order: Coalition Chair Tom Safranek called the meeting to order at 9:00 a.m.
- II. <u>Welcome and Introductions:</u> Coalition members and speakers in attendance: Sharona Ernst, Palistene Gray-Moore, Derek Schwartz, Tom Safranek, Ashley Meyers, Jason Sharp, Jeremy Leifeld, Tom Giffee, Jeremy Welsch, Jona Beck, Jordan Cedillo, Delaney Ham, and Ryan Wiesen. Coalition members in attendance via Zoom: Ashley Pick, Erin Bone, Lanette Richards, Brian Ortner, Julie Chytil, Jeanne Bietz, Portia Cavitt, Whitney Abbott, Lorelle Mueting, Erin Payton, and Ashely Rowe. Staff members: Chris Wagner, Beatha Kliewer, and Liene Topko.
- III. <u>Approval of Minutes:</u> The minutes from the December 11th meeting were included in the coalition meeting packet. No additions or corrections were made.
- IV. <u>2025 Legislative Session:</u> Liene Topko and Chris Wagner discussed the alcohol-related bills that have been introduced at the Nebraska Legislature:
 - a. <u>LB 124</u> (Holdcroft) changes penalties for a motor vehicle homicide of an unborn child as a result of impaired driving to equal those of MVH DUI of a person.
 - b. <u>LB 178</u> (Clouse) requires mandatory server alcohol training of all individuals engaged in the sale, service, or mixture of alcoholic products as well as those providing security or verifying a customers' age; must be completed within the first 90 days of employment.
 - c. <u>LB 330</u> (Juarez) increases the sales tax of alcoholic products to 15.5% (10% increase) with the proceeds being split 50/50 between the Alcohol Addiction Prevention and Treatment Fund and the Education Future Fund.
 - d. <u>LB 33</u> (Hunt) removes 'near beer' from the definition of beer, products with less than 0.5% alcohol by volume. This would allow youth to purchase and consume these products as well as drive while drinking these.
 - e. <u>LB 97</u> (Fredrickson) allows deferred judgement for CDL or CPL-permit drivers; expands interlock availability beyond motorcycle and vehicle operator's license holders to include CDL license holders.
 - f. <u>LB 113</u> (Quick) increases the number of physical locations certain license holders can hold from 5 to 10; significantly increases how many gallons of product a micro distillery can self-distribute (500 to 5,000/year). This undermines the three-tier regulatory system.
 - g. <u>LB 186</u> (Dover) changes food service requirements in the commons area of an entertainment district and permits pedestrians to cross an open street or highway while carrying an open container so long as they are traveling between two businesses withing an entertainment district.

V. Focus Area Updates

- a. Local
 - i. Topko shared that PEM has been selected to be part of a national research project examining how alcoholic products are being sold. The

- goal is to visit at least 50 off-sale businesses in Douglas County and the organization is seeking volunteers to help.
- ii. Deputy City Attorney Ryan Wiesen shared that Krush Ultra Lounge, a bar downtown Omaha, has been a drain on resources leading the City Council to consider cancelling their liquor license.

b. Policy

- Wagner talked about the Surgeon General's Advisory on Alcohol and Cancer and includes recommendations to update warning labels to disclose cancer risk and updating the dietary guidelines on alcohol to account for cancer.
- ii. Coalition members are invited to submit comments on the Scientific Report of the 2025 Dietary Guidelines Advisory Committee. Comments are due on February 14th.
- iii. PEM provided comments on proposed LCC rules relating to allowing minors 16-18 to carry out alcohol without adult supervision and improving third party shipper records to discourage illegal alcohol deliveries.

c. Youth

- i. The Youth Leadership Network students will be participating in the RAD Collaborative data collection.
- ii. Next meeting is on Monday, January 27th at 7:00 p.m.

VI. Awareness:

- a. The January Research Summary is available at www.projectextramile.org/ResearchSummary
- VII. <u>Additional Discussion/Announcements:</u> N/A
- VIII. Adjournment and Next Meeting Date: The meeting was adjourned at 9:50 a.m.

PROJECT EXTRA MILE2025 Legislative Bill Tracking

Bill#	Sponsor(s)	Description	Bill Status	Additional Information
<u>LB16</u> *	Cavanaugh, J Judiciary Conrad name added	Adopt the Nebraska Consumable Hemp Control Act	<u>Hearing</u> 1/29/25	Creates the Nebraska Consumable Hemp Control Commission using the Nebraska Liquor Control Commission (LCC) commissioners and executive director. Requires monthly meetings to be held. Establishes the licensing and regulatory system as a part of the Nebraska Consumable Hemp Control Act. Designates the Commission to create its rules and regulations.
LB33* Oppose	Hunt <u>General Affairs</u>	Remove nonalcoholic beer from regulation under the Nebraska Liquor Control Act	<u>Hearing</u> 2/3/25	Removes 'near beer' from the definition of beer and specifies that beer does not include nonalcoholic beer, which would allow children to purchase beer with less than 0.5% ABV. It could also be consumed while driving. AM23 – indicates that beer, wine, and spirits are one-half of one percent or more alcohol by volume
<u>LB97</u>	Fredrickson <u>Transportation &</u> <u>Telecommunications</u>	Change provisions relating to deferred judgments and the Motor Vehicle Operator's License Act	Hearing 2/3/25	Sec. 1: Allows deferred judgment for CDL or CLP-permit as long as it would not mask a conviction and lead to noncompliance with federal laws leading to possible loss of federal money. Sec. 22: Expands interlock beyond Class M (motorcycle) or O (vehicle) operator's license holders, including CDL license holders
LB113* Oppose	Quick <u>General Affairs</u>	Change provisions relating to licensees under the Nebraska Liquor Control Act	<u>Hearing</u> 2/3/25	 Increases physical location allotment for holders of a manufacturer's, craft brewery, and micro distillery license from five to ten Allows Nebraska micro distilleries to annually self-distribute up to 5,000 gallons (instead of 500) of their product

Prepared by Project Extra Mile

Last updated: 2/11/2025

LB124* Support	Holdcroft <u>Judiciary</u>	Change penalties for motor vehicle homicide of an unborn child	<u>Hearing</u> <u>1/23/25</u>	 Changes penalties for a motor vehicle homicide of an unborn child as a result of impaired driving to equal those of MVH DUI of a person manslaughter of an unborn child. Enhances the penalty from a Class IIIA felony to a Class IIA felony when death results from an impaired driving crash (maximum changes from 3 years to 20 years). Enhances the penalty from a Class IIA felony to a Class II felony when death results from an impaired driving crash with a repeat offender (changes from 0-20 years to minimum 1 year and maximum 50 years).
LB178* Support	Clouse <u>General Affairs</u>	Require mandatory server training under the Nebraska Liquor Control Act	<u>Hearing</u> 2/3/25	 Requires a mandatory server alcohol training course as a part of the liquor licensing process and allows the LCC to promulgate the rules and regulations governing those programs. Individuals engaged in the sale, service, or mixture of alcoholic liquor, in providing security, or in verifying customers' ages will need a certificate of completion that must be submitted to the LCC within 90 days of the start of employment. The training fee may not exceed \$30. Businesses that do not keep documentation on premises of an employee's certificate or their employment records may have their license suspended, cancelled, or revoked.
LB186+* Oppose	Dover <u>General Affairs</u> Raybould name added	Change provisions relating to entertainment districts under the Nebraska Liquor Control Act	<u>Hearing</u> 2/3/25	 Changes the food service requirement for alcohol consumption in the commons area of an entertainment district to allow consumption as long as at least one holder of an entertainment district (E) license is serving food. Adds language to relax restrictions for entertainment districts located in cities of the first and second class, counties, and/or villages to allow pedestrians to cross an open street or highway while carrying open containers of alcohol as long as those pedestrians are traveling between two businesses that hold an entertainment district license.

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LB330 Support	Juarez <u>Revenue</u>	Change provisions relating to the sales tax rate and create the Alcohol Addiction Prevention and Treatment Fund	Introduced 1/16/25	 Sets the sales tax at five percent pursuant to section 77-2703 except for transactions that occur withing a good life district, then the sales tax is two and three-quarters percent of the transaction. Sets sales tax on alcoholic liquor at fifteen and one-half percent. Requires proceeds of the sales tax from alcoholic liquor to be distributed 50% to the Alcohol Addiction Prevention and Treatment Fund and 50% to the Education Future Fund. Creates the Alcohol Addiction Prevention and Treatment Fund which will be administered by the Department of Health and Human Services to fund prevention and treatment of alcohol addiction.
LB478	General Affairs Committee General Affairs	Provide for an auction permit and a wholesalers shipping license and change other provisions of the Nebraska Liquor Control Act	Hearing 2/3/25	 Creates an auction permit for auction houses to be allowed to sell alcoholic products; requires auction houses to notify the LCC of all auctions and provide inventories of products to be sold. Creates a wholesale shipping license to allow wholesalers outside of Nebraska to obtain a Nebraska shipping license to ship product only to a Nebraska wholesale license holder. Removes fees for the issuance of a duplicate airline, special party bus, pedal pub vehicle, and railroad license. Clarifies that public notice of a liquor license hearings may be published in a legal newspaper in statewide or general circulation in a city, village, or county. Sets the annual brand registration renewal fee to be no more than \$30. Exempts retailers who hold a shipping license for products outside of Nebraska and ship directly to consumers from filing a brand registration report.

^{*} Testimony provided by Project Extra Mile + Emergency clause included

Prepared by Project Extra Mile Last updated: 2/11/2025



RESEARCH SUMMARY Date Compiled: February 2025

Key takeaways from included research:

- A new study sought to investigate effects of alcohol on individuals with alcohol use disorder (AUD) and those subject to negative affects due to having comorbid depressive disorder (DEP). They found that those with AUD consumed an average 8.5 standard drinks vs non-AUD participants only consumed 3.7. Those with AUD reported having increased stimulation and rewarding effects throughout the drinking episode.
- An Australian study monitored the alcohol industry's use of health messages on alcohol products and reports on the frequency and types of government-required and voluntary health messages found on alcohol products. They found high compliance (97-99%) with governmental requirements however voluntary health-related messages were less common (65%). Researchers suggest continuing monitoring to enforce compliance with labeling regulations and assessment of voluntary messaging.
- This study examined differences between planned and unplanned alcohol and cannabis use in
 motives, contexts of use, and sexual and gender minority-specific (SMG) factors. They found that
 while unplanned alcohol and cannabis use were associated with lighter use, unplanned cannabis use
 was associated with more negative outcomes. Social and enhancement motives, as well as drinking
 with other SMG were connected to lower chances of unplanned use, while conformity motives
 increased the likelihood of unplanned alcohol use.
- Researchers in Canada examined whether non-medical cannabis legalization in Canada was associated with initial changes in population-level alcohol consumption. They found that while annual beer sales decreased by 0.06 liters per capita and other beverages increased by 0.05 liters per capita between 2004 and 2022, there were no significant population-level changes in alcohol sales after non-medical cannabis legalization in 2018.
- A team of researchers examined whether prenatal alcohol and tobacco exposure differs by neighborhood environment. They found that lower neighborhood deprivation, less air pollution, higher lead risk, and better perceived safety were linked to prenatal alcohol exposure, while higher neighborhood deprivation and lower perceived safety were linked to prenatal tobacco exposure.

Is drinking alcohol bad for your health? New dietary guidelines will weigh risks and benefits

Written by Deidre McPhillips

Most adults in the United States drink alcohol, but there is steadily growing public concern about the health effects of moderate drinking.

The latest science supports those concerns, but two recent government reports suggest potential benefits exist alongside potential risks – and some experts say that formal dietary recommendations, due to be reviewed this year, could take a more nuanced approach.

It is well-established that excessive alcohol use, including binge drinking and heavy drinking, has significant negative health effects. But recent studies have found that even low levels of drinking may be harmful, and the World Health Organization has said that "no level of alcohol consumption is safe for our health."

The current Dietary Guidelines for Americans, from the US Department of Health and Human Services and US Department of Agriculture, say that men should limit their daily alcohol intake to two drinks or less, and one drink or less for women.

These guidelines are up for review this year, and two recent reports meant to inform that process came to seemingly competing conclusions – continuing a longstanding debate on how to weigh the potential risks and benefits of alcohol.

But public attitudes in the US are already changing.

A new CNN poll conducted by SSRS released Friday finds that half of US adults say that moderate drinking is bad for health, more than double the share who said the same two decades ago. Women and adults younger than 45 are more likely than men and older adults to say that moderate drinking is bad for health, as were Democrats and independents.

Just 8% of US adults say that drinking in moderation is good for your health, according to the new CNN poll, about one-third of the share that said the same in 2005. Another 43% of adults say that moderate drinking makes no difference to health.

There is a known link between alcohol and cancer, and any amount of drinking raises that risk. For Surgeon General Dr. Vivek Murthy, this "direct link" was sufficient to issue an advisory and call for an updated health warning label on alcoholic beverages to highlight it.

"Alcohol is a well-established, preventable cause of cancer responsible for about 100,000 cases of cancer and 20,000 cancer deaths annually in the United States – greater than the 13,500 alcohol-associated traffic crash fatalities per year in the US – yet the majority of Americans are unaware of this risk," Murthy said in a statement earlier this month.

The new CNN poll finds a broad 74% majority of the US public would favor new alcoholic beverage labels warning about the risk of cancer like Murthy suggests. Democrats, women and people of color are especially likely to support a revision of the warning label, but 69% or more adults of all age, gender, partisan and racial groups said they would be in favor.

The CNN Poll was conducted by SSRS from January 9-12 among a random national sample of 1,205 adults drawn from a probability-based panel. Surveys were either conducted online or by telephone with a live interviewer. Results among the full sample have a margin of sampling error of plus or minus 3.2 percentage points.

Weighing risks and benefits

One of the reports meant to inform the next edition of dietary guidelines – requested by Congress and published last month by the National Academies of Sciences, Engineering, and Medicine – reinforced the link between alcohol and cancer, but to varying degrees of certainty. The researchers, who analyzed findings from about two dozen studies, concluded with "moderate certainty" that the risk of developing breast cancer was higher among those who drank in moderation than those who didn't drink at all. There was "low certainty" that the risk of breast cancer and colorectal cancer were higher for those who drank more in moderation than those who drank less, and no association with other throat and neck cancers.

But the same report also found some potential positive associations between moderate drinking and health. Compared with people who never consume alcohol, those who drink in moderation were at lower risk of heart attack and nonfatal stroke. And overall mortality from any cause was also found to be lower among those who drank in moderation compared with those who never drank.

"Many lifestyle choices carry potential risks, and the consumption of alcohol is no exception," Michael Kaiser, executive vice president and director of government affairs for WineAmerica, a nonprofit organization that represents the interests of the wine industry, told CNN in an email.

"We encourage all adults who choose to drink to adhere to the Dietary Guidelines and consult with their healthcare providers. No one should drink to achieve health benefits, and some people should not drink at all," he said, adding that the organization supports the use of this study to inform the guidelines as Congress intended and as previously done.

The other report, published last week by an independent panel convened by HHS' Interagency Coordinating Committee on the Prevention of Underage Drinking, also found lower risk of stroke among those who had an average of one drink per day, a lower risk of diabetes among women who drink at this level, and increased risk for certain types of cancer.

But it conversely found that the risk of dying from alcohol use begins at low levels of average use and increases as levels of alcohol consumption increases.

Many experts respect the complexity of the science, but warn against viewing drinking alcohol as a categorically healthy habit.

"It's misleading to say that the science isn't settled," said Dr. Katherine Keyes, a professor at the Columbia University Mailman School of Public Health whose research focuses on substance use epidemiology.

"There were differences in methodology and that's why there are some differences in the results. But when you pull apart the studies, the underlying science is consistent," said Keyes, who was part of the independent panel convened by HHS. "There are some conditions where we did see a benefit or an inverse relationship at very low levels, but they're really outweighed by the conditions where you see not a benefit."

Dr. Ned Calonge, chair of the committee that wrote the National Academies report, warns that the link his group found between lower all-cause mortality and moderate drinking should not be interpreted as a summary of the relationship between alcohol and health – quite the opposite, in fact.

"All cause mortality is, I would say, a problematic outcome, because it includes so many different outcomes, which increases the potential risk of bias associated with things called confounding factors, other factors that might be responsible for the outcome," said Calonge, who is also an associate dean for public health practice and professor of epidemiology at the Colorado School of Public Health and professor of family medicine at the University of Colorado School of Medicine.

Research on the health effects of alcohol has some significant holes, which contributes to broader possibilities for interpreting the data.

"Moderate" drinking is not consistently defined, and grouping people into different categories – such as zero to three drinks per day – could skew averages when the outcomes may be very different for people at the low end of that category and the high end of that category.

The National Academies report addressed this in their finding about breast cancer risk, noting that higher amounts of drinking are associated with higher risk of breast cancer than lower amounts – even within levels considered to be "moderate."

The gold standard for scientific research is a randomized controlled trial that actively monitors direct comparisons between scenarios with little external variability, but most studies on alcohol's effects are based on observation without intervention.

When reviewing findings from observational studies, the strongest conclusions are drawn from strong associations between two factors, Calonge said. But the associations found in the National Academies report – the relative risks in the positive and negative directions – were not very strong, he said.

"We can't prove cause with observational studies," Calonge said. "These effects are important from a public health standpoint, but we can't get above moderate certainty because there could be additional research that has different findings."

Doctor's guidance on alcohol: moderation

Despite the gaps in research, many experts say the evidence of risk is too strong to be ignored.

"Even if you were to align and agree that a line of evidence is closer to the truth for one disease state, you would then look over and recognize that if you just look at a different disease outcome, the findings might go in a completely different direction," said Dr. Ahmed Tawakol, a cardiologist at Massachusetts General Hospital.

If a new drug was being studied to reduce heart disease and the clinical trials revealed that it also raised the risk of developing cancer, that drug would never be approved, he said.

"When you use that same frame of mind in reference to alcohol, we'd say that alcohol appears to have some mechanistic actions that are beneficial, but at the same time, it comes at a

consequence of really unacceptable side effects," he said. "It becomes clear that alcohol shouldn't be considered something that you do for the purpose of health."

Some research suggests that part of the way alcohol use may reduce the risk of heart attacks is the impacts it has on the limbic system, such as limiting stress signals in the brain. But there are less risky ways to achieve that same goal, Tawakol said, such as exercise that comes with multiple benefits.

Still, Tawakol says that he doesn't usually take a strong stance against alcohol when advising his patients.

"I worry when I see this kind of black and white approach," he said. "If you choose to drink alcohol, make sure it's done in moderation, and also put it in the context of other lifestyle factors so that you can further buffer the potential adverse effects."

Despite broad support of a new warning label on alcoholic beverages, US adults are virtually split on whether the government should provide health recommendations to the public or leave it to Americans to make up their own minds, according to the new CNN poll.

And many are already making their own choices. About 4 in 10 adults say that they don't drink at all, while about 1 in 8 say that they've participated in Dry January – with more than half of that group saying they're doing so this year. This idea is more popular among younger Americans, with nearly 1 in 5 adults younger than 45 participating in Dry January at some point.

Nebraska State Patrol records 135% surge in DUI arrests around Omaha area

Written by Dan Crisler

The Nebraska State Patrol's crackdown on drunken driving led to a surge of arrests in the Omaha area in 2024.

The State Patrol's Troop A recorded a 135% increase in driving under the influence arrests between 2023 and 2024 across Douglas, Sarpy, Washington, Cass and Dodge Counties. Troop A made 209 DUI arrests in 2023 and 491 arrests in 2024, according to Lt. Jeremy Thorson.

Troop A's crackdown on DUI offenders contributed to a 20% increase in arrests made by state troopers across Nebraska. Thorson said troopers made 1,435 DUI arrests in 2024 — a jump from the 2023 figure of 1,197 arrests.

Thorson said Troop A made it a point to crack down on drunken driving in 2024. Grants, including those from the National Highway Traffic Safety Administration, awarded to the State Patrol helped fund the law enforcement agency's efforts. Thorson said the State Patrol got a \$15,000 grant to pay troopers to work overtime.

"It's important for us to go out and try to enforce the DUI laws," he said.

The successful crackdown happened even though Troop A maintained about the same number of patrol troopers — 28 — between 2023 and 2024.

Thorson said the number of DUI arrests has fluctuated over the past few years. Since 2016, Troop A has recorded fewer than 200 arrests in some years to more than 400 in others.

"It just kind of ebbs and flows," he said.

The Omaha Police Department, the largest local law enforcement agency in Troop A's coverage area, saw little difference in its number of drunken-driving arrests between 2023 and 2024. Omaha police officers made 1,135 DUI arrests in 2024 — nine more than they did in 2023.

Police Lt. Danny Flynn, who's stationed in the department's traffic unit, credited grants and overtime pay authorized by Police Chief Todd Schmaderer with keeping Omaha's officers patrolling the streets during peak periods of drunken driving.

"Obviously we always want numbers to decrease. But the fact that we're at nine (more arrests) tells me cracking down on DUIs is a priority of ours," Flynn said.

The Douglas County Sheriff's Office also reported a stable number of DUI arrests dating back to 2020. Last year, deputies made 142 DUI arrests, compared with 153 in 2023.

Spencer Head, a spokesperson for the Sheriff's Office, said the Sheriff's Office's Community Action Team and the agency as a whole has "put a lot of effort into DUI prevention and awareness as we engage with the community." Head also noted sheriff's deputies primarily make DUI arrests in unincorporated Douglas County, where there are fewer vehicles.

Law enforcement agencies reported a total of 6,323 DUI offenses across Nebraska in 2023, according to the Nebraska Department of Transportation. The 2023 total is generally in line with recent historical data dating back to 2017. The lone exception came in 2020 — the height of the COVID-19 pandemic — when DUI offenses dipped below 6,000 to 5,453.

To Thorson, the prevalence of drunken drivers is perplexing given the many options for safe transportation.

"It's something I can't make a lot of sense out of," he said. "It's not like we banned Uber or Lyft. There are still Happy Cabs out there."

Thorson said drunken driving is one of the most impactful crimes.

"Our families drive on these roads. Our friends drive on these roads," he said. "There's nothing more than I can think of (as) chaotic and devastating than what can be caused by drinking and driving. ... Trying to get these drivers who have been drinking off the road is very important to us."

Research shows a higher alcohol tax could lead to fewer drunk driving fatalities

Written by Alexa Skonieski

It's no secret drunk driving is a problem in New Mexico. According to Alcohol.org in 2023, New Mexico ranks within the top five states in the country with the most drunken driving fatalities. So how do we fix it?

While it wouldn't end drunk driving, University of New Mexico Economics Professor Brady Horn says a higher alcohol tax is a step in the right direction.

Horn, graduate student Ana Milan Hinostroza, and senior lecturer David Dixon started researching alcohol policy in the state several years ago through a Research and Public Service Projects (RPSP), a state initiative to address New Mexico issues.

They researched everything from drinking age laws to liquor licenses. Lastly, they focused on alcohol taxes. New Mexico already has an excise tax on alcohol; however, through their research, they found an increase in alcohol taxes could reduce alcohol-related fatalities.

"An economist can point out the economic rationale for why we should have alcohol taxes. It's pretty simple: alcohol causes negative externalities," Horn said. "When there are markets with negative externalities, they produce too much of that good. An alcohol tax can nudge behavior where fewer people will drink alcohol. This will result in fewer negative externalities, meaning less crime, domestic violence, and less drinking and driving."

Horn says this research started when New Mexico State Senator Antonio Maestas requested UNM's Department of Economics to research contemporary economic issues within the state. From there, the alcohol tax research was born and white papers were published in 2022 and 2023. Horn would later present this study to the New Mexico legislature in the fall of 2024, where he said there was mixed reaction to the concept.

"Everyone agrees we want to reduce the harms from alcohol, some people just don't think taxation is the way to do it," he said. "My role is to inform people and let them make their own decisions."

Horn says there are numerous ways to tax alcohol throughout the country, such as the Ad Valorem tax, a percentage of the price of a drink. New Mexico has the most common type of alcohol tax, an Excise Tax, which taxes per gallon of beer or liter of wine paid for by the companies that sell the alcohol. According to the New Mexico Taxation and Revenue Department, beer is 41 cents per gallon and wine is 45 cents per liter.

"We're taxing these companies, many of which are outside New Mexico, for the alcohol being sold here," Horn said. "However, the economic research is clear that if you tax a company, they will pass some or all of that tax onto consumers. Thus, just because we tax producers doesn't mean New Mexico consumers aren't paying any of that tax."

He says New Mexico's alcohol taxes are generally standard, maybe even a bit lower, than other taxes on items like Tobacco.

According to his research, the proposed 25-cent per-drink alcohol tax could reduce alcohol use by up to 1.77% and increase tax revenue by \$132 million. In terms of fiscal and social impacts, the per-drink tax is no different from an equivalent increase in alcohol excise tax. Also found in the research, Horn says a hypothetical ten-cent per-gallon increase in beer excise taxes could reduce 2.84 alcohol-related traffic fatalities in New Mexico each year.

After studying alcohol taxes in different states, Horn says the research is clear and convincing that a higher excise tax on alcohol would reduce alcohol-related fatalities. However, Horn acknowledges that alcohol is a complex good with both benefits and costs. Thus, any policies must keep that in mind.

"The important reason that alcohol is different is that consumption affects others who did not drink alcohol through negative aspects such as drinking and driving, domestic violence, or crime. When this happens, economists characterize this as a form of market failure and recommend some market intervention," Horn said.

"This is why it is particularly important from an economist perspective. It's not just individuals who consume alcohol that will have worse health outcomes, that's all within someone's decision, but it's hurting other people."

According to the New Mexico Department of Public Safety, alcohol is involved in 40% of all fatal traffic crashes in the state making alcohol-related traffic fatalities the single largest factor in this state's traffic deaths.

Surgeon General Urges Updating Health Warning Labels on Alcohol Products to Reflect Cancer Risk

Written by Alene Buranova

An advisory issued last month by the US Surgeon General warns of the explicit link between alcohol consumption and cancer and calls for measures for increasing awareness of alcohol's contribution to cancer diagnoses.

In the advisory, Surgeon General Dr. Vivek Murthy notes that alcohol consumption is the third leading preventable cause of cancer in the United States. It contributes to almost 100,000 cancer cases and nearly 20,000 deaths every year. Drinking alcohol increases the risk for at least seven types of cancers, most notably breast, colon and rectum, esophagus, larynx, liver, and throat cancers. Troublingly, Murthy writes, while evidence of the link between cancer and alcohol has been mounting for decades, fewer than half of Americans are aware of the relationship.

Murthy's recommendations for increasing public awareness include calling on public health professionals and community groups to create public education campaigns, asking healthcare providers to inform their patients about the link and promote alcohol screenings and treatment, and most imminently, updating the Surgeon General's health warning label on alcoholic beverages.

David Jernigan, a professor of health law, policy, and management in the Boston University School of Public Health, studies the effects of alcohol and how alcohol marketing influences consumers. He says the current guidelines and messaging around alcohol and cancer are far behind what the research suggests.

Why? For one, "there's no warning label [that says alcohol can cause cancer] on alcohol products," Jernigan says. "Alcohol is also our favorite drug—we're not well-disposed to hear bad news about it." Finally, he adds, "you have billions of dollars being spent on marketing designed to give the complete opposite message, which is that alcohol is great and appropriate in virtually every situation."

But at the end of the day, Jernigan says, "Alcohol is a carcinogen. Most people don't know that, so we need stronger warning labels on alcohol bottles [among other measures] so people are more aware."

Jernigan spoke to BU Today about the advisory, health warning labels, and how to reduce your risk of alcohol-attributable cancers.

Q&A with David Jernigan

BU Today: Why do we need to update the warning labels on alcohol products?

Jernigan: The existing warning label is terrible. It flies in the face of everything we've learned from tobacco about how to do warning labels. It's not specific about the health risks of drinking alcohol. It has what I call the "five dirty words": "and may cause health problems"—which tells you nothing. And I can tell you that those words were added in the back room at the behest of the alcohol industry to protect them from product liability lawsuits. The other problem is that the label is located off to the side and the print is absolutely tiny. When it was implemented in the early

1990s, I remember telling the press that Congress passed a warning label, not an eye test. That's in contrast to tobacco health warning labels, which are boxed and prominent [on products].

If all we did was add "and may cause cancer" to that warning label, it would be a tiny step forward—but we're so far away from what we've learned is effective from tobacco that what are the chances of that actually happening? That would require Congressional action. The language in the alcohol warning label is mandated in the Alcoholic Beverage Labeling Act, which was passed in the late 1980s. That act also said that the Treasury Department, which actually has the most regulatory authority over alcohol in the federal government [not the Food and Drug Administration], should report back to Congress if there are changes in the science that are sufficient to require a change in the warning label. Since the warning label was implemented in the early 1990s, Treasury has never once reported back to Congress. A bunch of public health groups and public interest groups actually brought a lawsuit in the early 2000s basically saying, "Treasury Department, will you please obey the law?" and they still never have.

Do you think it's likely the recommendation would ever pass?

It's great that the Surgeon General's advisory is out there; it's certainly gotten a lot of press attention, which is helpful. But that will fade over time, and the current Congress has a lot of priorities that are much higher than trying to change the warning label on alcohol bottles. This is sort of a last gasp from the outgoing Surgeon General. The Wall Street Journal, which is usually an indicator of business and Republican sentiment, has already published a commentary on [the advisory], saying, "Oh, gosh, this is the government interfering in private life again. When will those government busybodies get out of our lives and let us make our own choices?"

I anticipate that's going to be pretty close to what this presidential administration's attitude towards this will be—despite the fact that Donald Trump is a teetotaler and the possible incoming Secretary of Health and Human Services, Robert F. Kennedy, Jr., is in recovery from substance addiction. But still, I don't think it has much hope of having an effect in the short term. At the same time, you have to remember the Surgeon General's report on smoking was issued in 1964. It's taken decades to get [public health messaging around] smoking to where it is now. One would hope it wouldn't take that long for alcohol, but this is an even larger industry than tobacco, and at this point, the structure of alcohol consumption favors inaction by lawmakers. The people most likely to drink and binge drink are white males who have gone to college. That's basically defining the people who write our laws. Alcohol is their favorite drug, in particular.

Even if we never get better warning labels, what are the most pressing things people should know about the link between alcohol and cancer?

The first thing they should be aware of is that for some cancers—this is particularly true of female breast cancers—the risk starts the moment you start to drink. Compared to nondrinkers, women who consume up to a drink a day have a 10 percent greater relative risk [of developing breast cancer]. If that goes up to more than two drinks a day, they have a 32 percent greater relative risk. For males, the big cancers [linked to alcohol] are liver and colorectal. In high-risk populations, like if you've got a family history of cancer, I would add this to the reasons to be concerned. You can't change your genes, but you can change your behavior, and this is one simple thing that people can do to reduce their level of risk.

The thing that we're all pushing for in public health is: let's just inform people. People deserve to have the information, and they deserve to be able to make informed choices. Right now, I think the Surgeon General cites a 2023 study of women between the ages of 18 and 25 where only 28

percent were aware of alcohol as a breast cancer risk, [which is in contrast with] people's awareness of tobacco as a risk. For the mouth, throat, larynx, and esophagus cancers, there's a synergistic relationship with tobacco use. That's because what alcohol does in those parts of the body is it makes it easier for the cancer-causing agents in tobacco to get in, so together, they make your risk even bigger.

What advice would you give to those who want to be more conscious of the way they consume alcohol?

The general advice we have for people is less is better. Whatever you're drinking, drinking less will be better for your health. And what we certainly don't want people doing is to get into the arena of what we define as binge drinking, which for women, is four standard drinks within two hours. For men, it's five standard drinks within two hours. Your risk for all sorts of things, including your cancer risk, starts to go way up at that point—and these curves are really quite dramatic. It's not a straight line. The risks start to climb really, really fast at those levels of consumption.

For the college-age population, your cancer risk is something that develops over time. Same goes for your patterns of drinking. So looking at what you're doing at a younger age around alcohol is really important for thinking about this over the course of your life. If you're a problem drinker in high school, you're going to have much worse problems in college. If you're a problem drinker in college, you are setting in place behavioral patterns that will influence you across your lifespan. There's a lot we still don't know yet. It's not clear if quitting or reducing alcohol will also reduce the risk of all the alcohol-attributable cancers. So the most important thing from a prevention perspective is to not drink very much, if you're going to drink.

City council to votes to make La Vista City Center an entertainment district

Written by Pete Cuddihy

LA VISTA, Neb. — Turning the La Vista City Centre into an Entertainment District would make selling alcohol easier, and La Vista City Council voted in favor of the proposal.

The Astro currently has a liquor license but has to use a different special designated license for each event.

Under a liquor license, you are only allowed to use 12 special designated licenses per year.

The Astro would be able to operate without needing new special designated licenses.