

How to Report on Unhealthy Alcohol Use in a Country Where Drinking is the Norm

Changing the Conversation around Alcohol

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Association of Health Care Journalists Summit on Mental and Behavioral Health

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National Institute
on Alcohol Abuse
and Alcoholism



Disclosure: Ownership of stock in Pfizer Inc.

Who We Are: The National Institute on Alcohol Abuse and Alcoholism

- NIAAA is one of the 27 Institutes and Centers comprising the National Institutes of Health and the largest funder of alcohol research in the world.
- Our mission is to generate and disseminate fundamental knowledge about the adverse effects of alcohol on health and well-being and apply that knowledge to improve the diagnosis, prevention, and treatment of alcohol-related problems, including alcohol use disorder, across the lifespan.
- NIAAA provides leadership in the national effort to reduce alcohol-related problems by:
 - **Conducting and supporting** a wide range of basic, translational, and clinical alcohol research
 - **Coordinating and collaborating** with other research institutes, agencies, and organizations engaged in alcohol-related work
 - **Translating and disseminating** research findings to health care providers, researchers, policymakers, and the public

Overview

- **Setting the Stage**
- **Scope of the Problem**
- **Improving Health and Reducing Stigma**
- **Drinking Trends and Cultural Shifts**
- **Alcohol and Women's Health**
- **Alcohol and Older Adult Health**
- **NIAAA Resources**

Quote

“Most middle- and high-income countries globally have become largely inured to the endemic premature mortalities related to more commonly used substances such as alcohol and tobacco. While these account for a much larger number of deaths and economic and social harms than opioids each year, the devastation wreaked by these substances, their casualties, and the associated blood and tears are all relatively willingly absorbed into the social fabric.”

John F. Kelly Ph.D. and Sarah E. Wakeman M.D.

Comparison of Alcohol and Opioids

Alcohol	
Past-year use	177,278,000
% of population	62.5% in 2023
DSM-5 AUD	28,859,000
% of population	10.2% in 2023
ED visits All that list alcohol	4,274,523 Annual average 2016-2021
Hospitalizations All that list alcohol	1,987,498 Annual average 2016-2021
Deaths	178,307 Annual average 2020-2021
	61,063 Acute causes (e.g., injuries)
	117,245 Chronic causes (e.g., liver)

Opioids	
Past-year use	9,072,000
% of population	3.2% in 2023
DSM-5 OUD	5,679,000
% of population	2.0% in 2023
ED visits All that list opioids	2,149,474 Annual average 2016-2021
ED visits Due to overdoses	309,416 Annual average 2016-2021
Deaths	74,521* Annual average 2020-2021
	63,559 Synthetic opioids involved
	Heroin 3,283 or Rx opioids 7,426 w/o synthetics

Sources: [NSDUH 2023 Tables 2.26A&B](#) for alcohol, [Tables 1.1A&B](#) for opioids, [Tables 5.1A&B](#) for AUD and OUD, [2021 Nationwide Emergency Department Sample](#), [CDC Alcohol-Related Disease Impact](#)., [NIDA Drug Overdose Data](#)

*Note that the values for the three opioid types sum to more than the total because some synthetic opioid deaths also included heroin and/or Rx opioids

Deaths Involving Alcohol Are Increasing

- Death certificates listing alcohol increased 25.5% in 2020 and another 10% in 2021 before declining slightly by 3% in 2022.
- There were 13,524 alcohol-related traffic fatalities in 2022 – 31% higher than a decade earlier.
- Alcohol was listed in 1 in 6 (16%) drug overdose deaths in 2020 and 2021.
- Intoxicating levels of alcohol (BACs $\geq 0.1\%$) are found in 21% of deaths from suicide, 37% from falls, 31% of drownings.

Sources: [NSDUH 2023 Tables 2.26A&B](#), [2021 Nationwide Emergency Department Sample](#), [CDC Alcohol-Related Disease Impact](#), [National Highway Traffic Safety Commission](#), [Alpert et al 2022](#) and [National Center for Vital Statistics](#)

Note that emergency department visit and hospitalization numbers reflect all visits in which alcohol was listed as a factor

Alcohol Misuse is Associated with More Than 200 Diseases and Injury-Related Conditions

Acknowledging Health Risk at All Levels

The New York Times

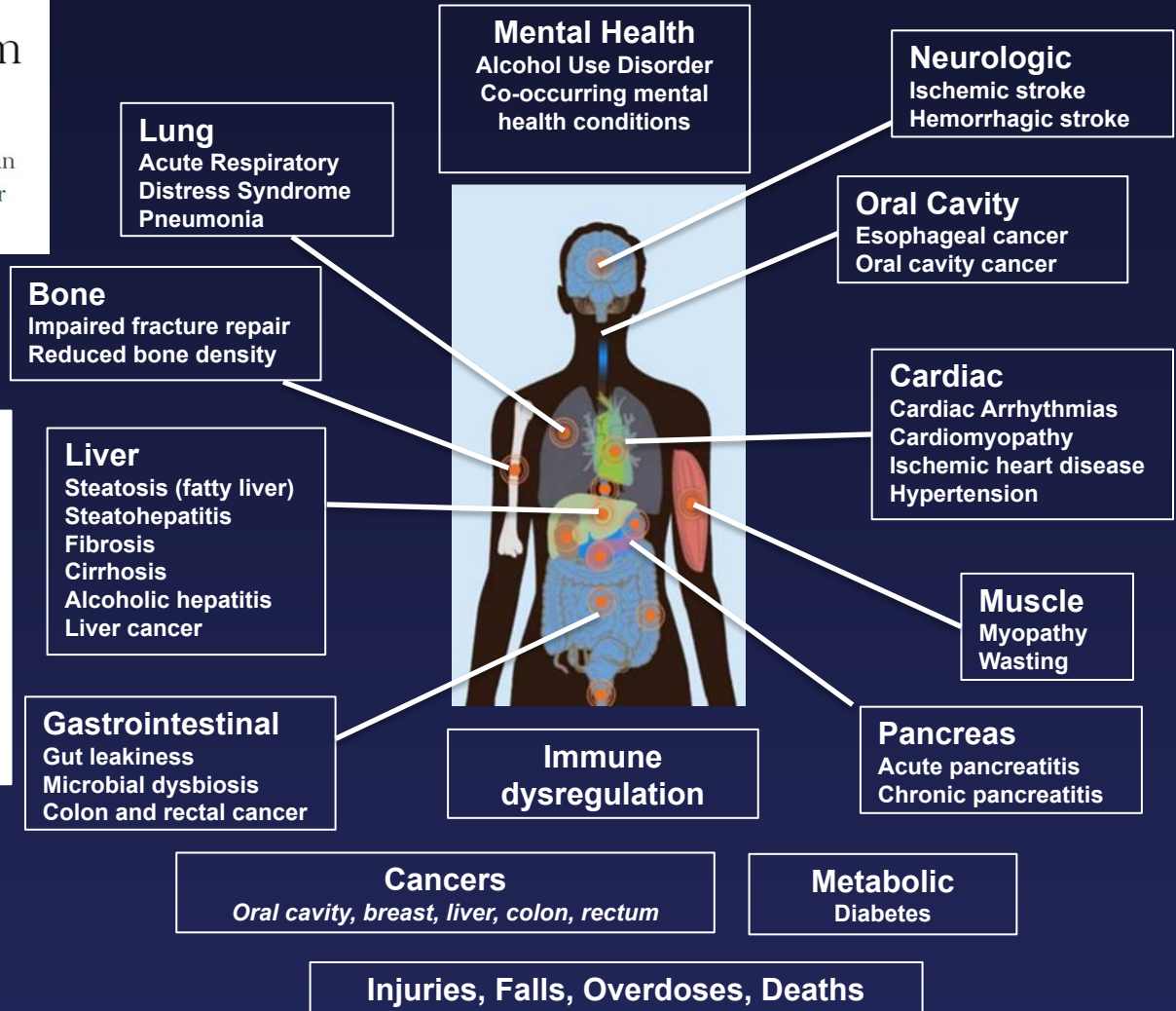
Even a Little Alcohol Can Harm Your Health

Recent research makes it clear that any amount of drinking can be detrimental. Here's why you may want to cut down on your consumption beyond Dry January.

health

January 11, 2023

Drinking Alcohol Increases Cancer Risk—But Very Few Americans Are Aware of the Link



Alcohol and Cancer

- Alcohol is a carcinogen
- In the US, about 5.6% of cancer cases and 4.0% of deaths from cancer can be attributed to alcohol ([Islami et al., 2018](#)).
- Alcohol is the third largest contributor to all cancer cases for women (6.4%; about 50,110 cases per year) and the fourth largest contributor for men (4.8%; about 37,410 cases per year) ([Islami et al., 2018](#)).
- For women, it appears the risk of breast cancer increases by around 5-15% with a single standard US serving of alcohol per day ([Floud et al., 2023](#); [LoConte et al., 2017](#); [NCI, 2021](#)).
 - Breast cancer is the second leading cause of cancer death in women – Only lung cancer kills more women each year
- Unfortunately, awareness of the link between alcohol and cancer is low.
 - A survey by NCI found that about 70% of people are unaware that alcohol can cause cancer and about 10% believe that wine actually reduces the risk of cancer ([Seidenberg et al., 2023](#))

What Is a Standard Drink?

In the United States, one "standard" drink contains 14 grams of pure alcohol.

12 fl oz of
regular beer

=

12 fl oz of
hard seltzer

=

5 fl oz of
table wine

=

1.5 fl oz of
distilled spirits
(gin, rum, tequila,
vodka, whiskey, etc.)



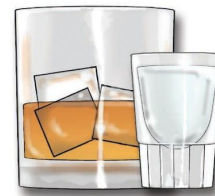
about 5%
alcohol



about 5%
alcohol

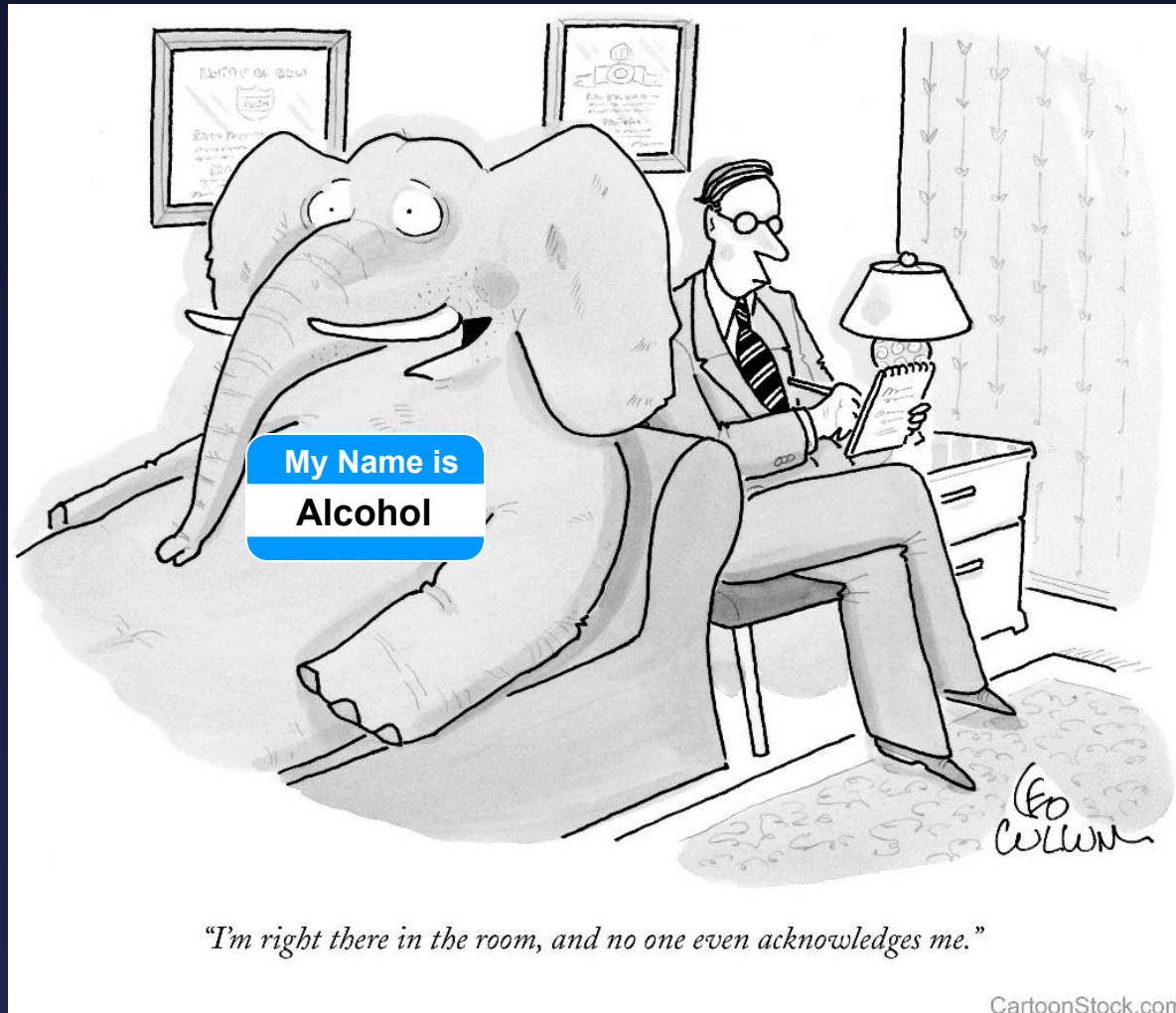


about 12%
alcohol



about 40%
alcohol

Changing the Conversation to Include Alcohol



“I’m right there in the room, and no one even acknowledges me.”

Words Matter

NIAAA Terminology Recommendations

We can help alleviate the stigma associated with alcohol-related conditions by consistently using non-pejorative, non-stigmatizing language to describe these concerns and the people who are affected by them.

- Use **alcohol use disorder** instead of *alcohol abuse*, *alcohol dependence*, and *alcoholism*
- Use **alcohol misuse** instead of *alcohol abuse* when referring broadly to drinking in a manner that could cause harm
- Use **person-first language** to describe people with alcohol-related problems (e.g., **person with alcohol use disorder** instead of *alcoholic*, **person in recovery** instead of *recovering alcoholic*)
- Use **alcohol-associated liver disease** instead of *alcoholic liver disease*

Treating Alcohol Consumption as a Vital Sign as Part of Routine Healthcare

- Alcohol consumption is an under-appreciated contributor to many health conditions and is often overlooked by health professionals in primary care and other healthcare settings.
- Approaching alcohol use as a vital sign means integrating alcohol screening, brief intervention, and referral to treatment into routine care



NIAAA created and is promoting The Healthcare Professional's Core Resource on Alcohol to help meet this goal.

Implementing alcohol as a vital sign in all healthcare settings has the potential to:

- **Identify and address problematic alcohol use early**
- **Reduce stigma by asking all patients about their alcohol use**
- **Reduce stereotyping of patients**
- **Increase opportunities to improve a patient's healthcare by addressing how alcohol consumption at various levels may contribute to or exacerbate their specific health conditions**
- **Normalize conversations about alcohol as part of healthcare**

There Is an Increased Interest in Reduced Drinking and Periods of Abstinence, and a Growing Popularity of Alternatives to Alcohol



The Washington Post

Do mocktails really help you drink less alcohol?

Nonalcoholic drinks may help those staying sober for Dry January, but they could be a trigger for anyone with alcohol use disorder

S Baltimore Sun

FOOD & DRINK

Not just 'Dry January': More Baltimore bars are offering alcohol-free drinks year-round

Indications that the conversation around alcohol is changing

And the Alcohol Industry has Taken Notice – Niche Markets and Mainstream Companies are Promoting No and Low Alcohol Products



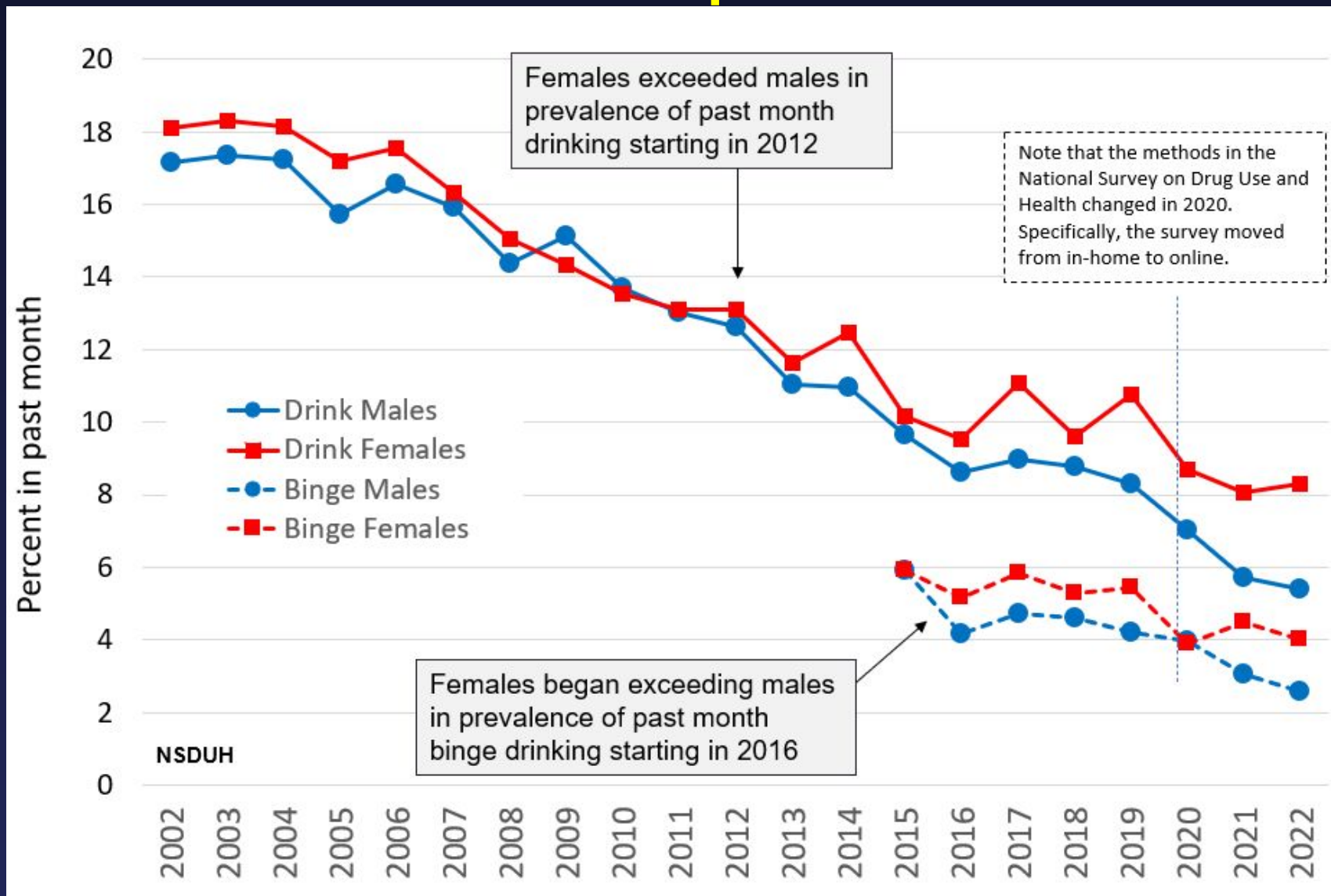
The Demographics of Alcohol Use

- **Interest in drinking less is being driven more by younger people in their teens and 20s than older adults**
- **Alcohol use is generally increasing among adults beginning in their late 20s and beyond**
- **For all age groups the percent of women drinking is approaching or has surpassed the percent of men who drink**

The Demographics of Alcohol Use

- **The percentage of female and male adolescents who drink each month has dropped by half over the past 20 years.**
- **A greater percent of adolescent girls (12-17) are drinking and binge drinking compared to their male counterparts.**

A Greater Percent of Adolescent Girls (12-17) are Drinking and Binge Drinking Than Their Male Counterparts

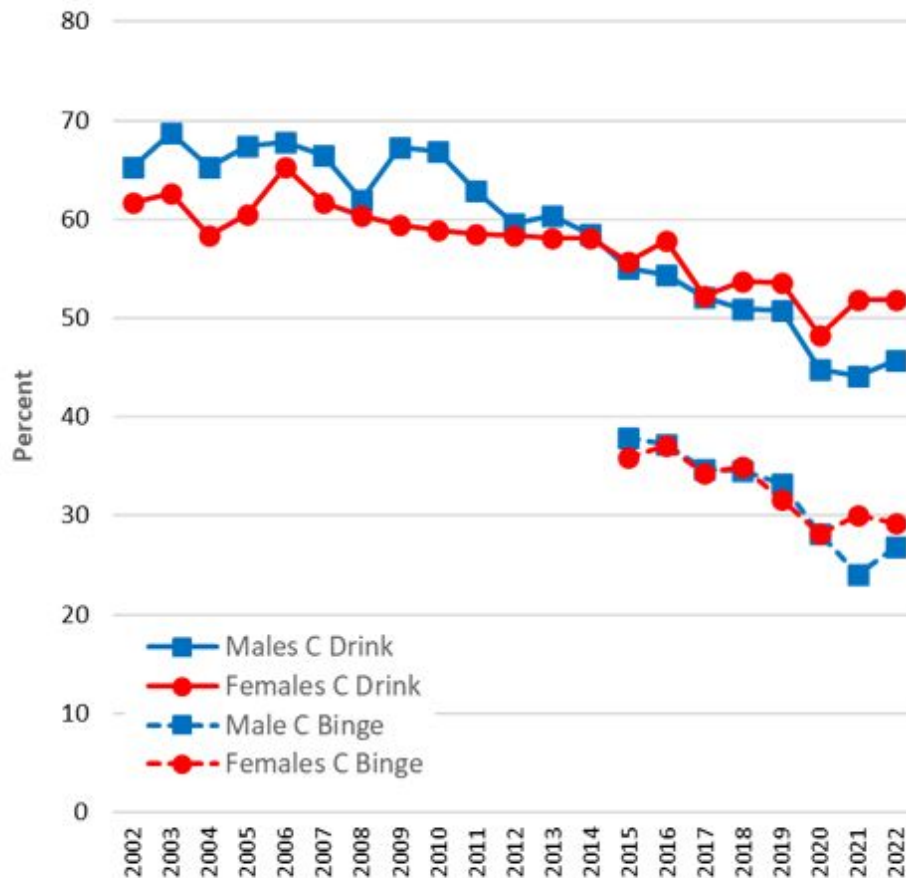


The Demographics of Alcohol Use

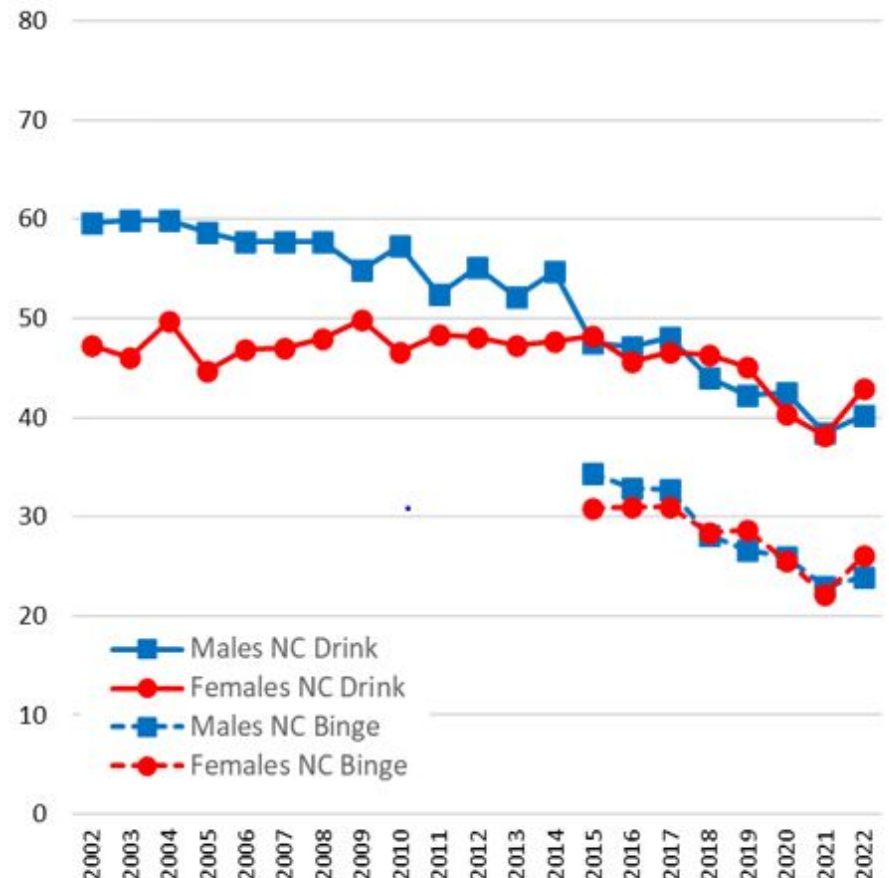
- **The pattern continues, with alcohol use decreasing among college aged individuals—but with a greater percent of women ages 18-22 drinking and binge drinking compared to their male counterparts**

Females in College and Not in College Are Now More Likely to Drink and Binge Than Their Male Peers

Females and males 18-22 in college



Females and males 18-22 not in college

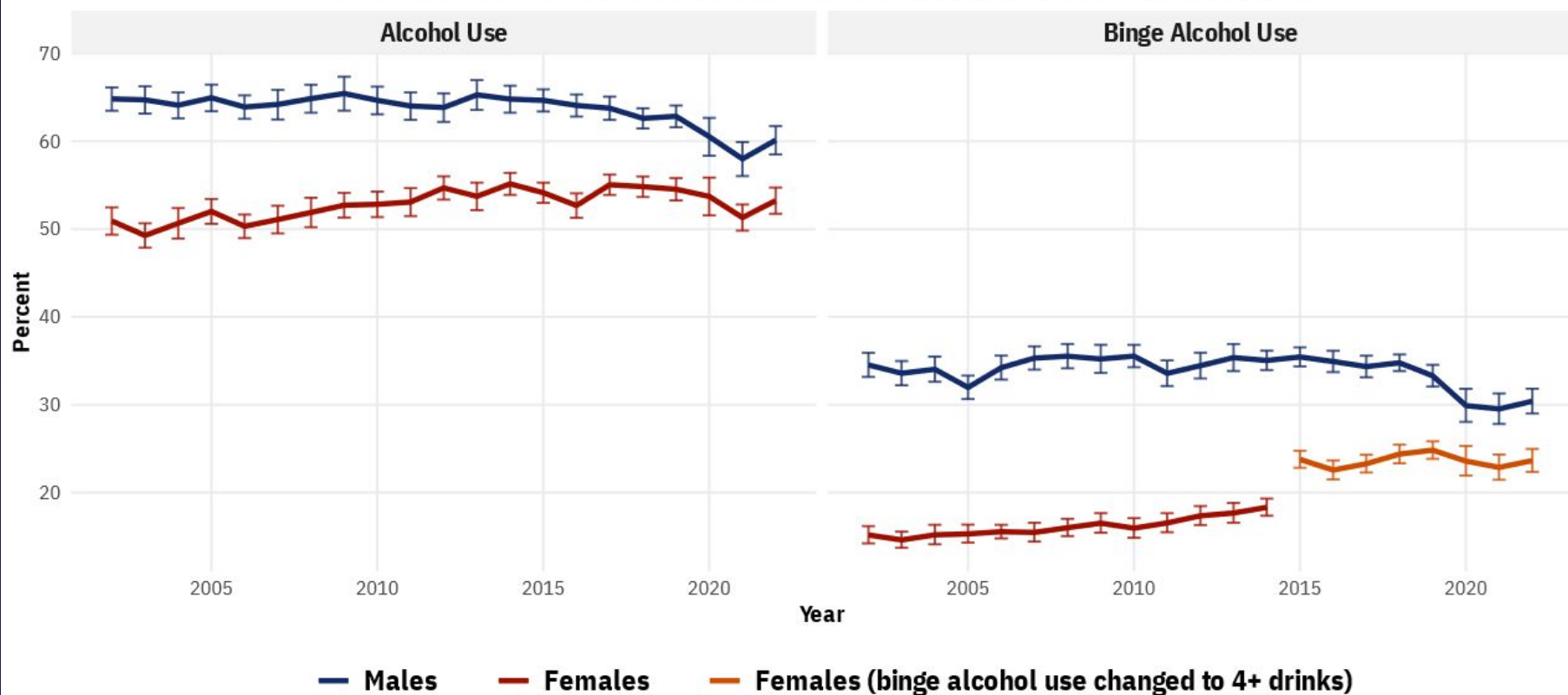


Source: National Survey on Drug Use and Health, 2002-2022; Note that the methods changed in 2020. In particular, the survey changed from in person to online. It is not clear how this might have affected outcomes.

For Adults Ages 26-64, Male and Female Drinking Patterns are Converging

The prevalence of past month alcohol use and binge drinking increased slightly for females and decreased slightly for males.

Past-Month Alcohol Use and Binge Alcohol Use, by Sex, Among People Aged 26–64



(2002–2022 National Survey on Drug Use and Health)

Source: National Survey on Drug Use and Health, 2002-2022

See Jager, J. , Mal-Sarkar, T. , Patrick, M. E., Rutherford, C. and Hasin, D. (2019), Is There a Recent Epidemic of Women's Drinking? A Critical Review of National Studies. *Alcohol Clin Exp Re*, 43: 1344-1359. doi:10.1111/acer.14082 **so:** Keyes, K. M

Changing the Conversation Around Alcohol: A Woman's Health Issue

Why Focus on Women and Girls?

- Among people in all age groups, gaps in alcohol use and harms between females and males are narrowing.
- There are differential health risks of alcohol for women.
- Women report different motives for drinking from men.
- Women are receiving mixed messages about alcohol and their health and well-being.

We are learning there are heightened health risks for females

Studies suggest that women are more likely than men to experience a variety of alcohol-related harms at comparable doses, including:

- Hangovers (Vatsalya et al. 2018)
- Blackouts (Hingson et al., 2016)
- Liver disease (Guy and Peters, 2013)
- Brain atrophy (Ceylan-Isik et al., 2010)
- Cognitive deficits (Flannery et al., 2007)
- Cardiomyopathy (Fernández-Solà and Nicolás-Arfelis, 2002)
- Faster progression of AUD (Diehl et al., 2007)
- Certain cancers (Liu et al, 2015)
- Larger increases in alcohol-related ED visits, hospitalizations and death for women than men over past 20 years (White et al. 2020)

Risk-severity paradox:

Women experience greater harms at lower doses of alcohol over shorter periods of time

Women are less likely to receive a brief intervention for problematic alcohol use (Mintz et al. 2021)

Women are less likely than men to receive treatment for AUD (Gilbert et al., 2019)

Why Are Gender Gaps in Drinking Narrowing?

- It appears that adolescent females are more motivated to drink to cope with negative emotions than adolescent boys, while males are more motivated to drink as a result of impulsivity and sensation seeking (Hammerslag and Gulley, 2016)
- Does higher self-reported stress and higher rates of anxiety, depression and PTSD for women motivate alcohol use?
 - Job/career stress
 - Need for ‘me time’
 - Parenting stress

Alcohol Marketing and Alcohol Use Among Women – Cause, Effect, or Both?

- Alcohol marketing increasingly focuses on women.
- Does the marketing drive changes in alcohol use by women or does it reflect changes in alcohol use by women?
- Most likely both. Ads try to appeal to a receptive target audience and in doing so promote more alcohol use.
 - For example, ads that try to sell a product by appealing to women drinkers who value their independence and “me time” also send the message that women who value independence and self-care drink alcohol.
 - Ads also promote camaraderie among women centered on alcohol.
 - For girls who have not started to drink, such ads create positive expectations about alcohol and can increase the intent drink at some point in the future (e.g., Smith and Foxcroft, 2009).

Marketing Efforts Highlight the Desire For Independence, Success, Friendships, and Self-care 2010-2020s



van gogh
behavioral
scrapbook:

DRINKS & DRINKING FROM A
WOMAN'S PERSPECTIVE



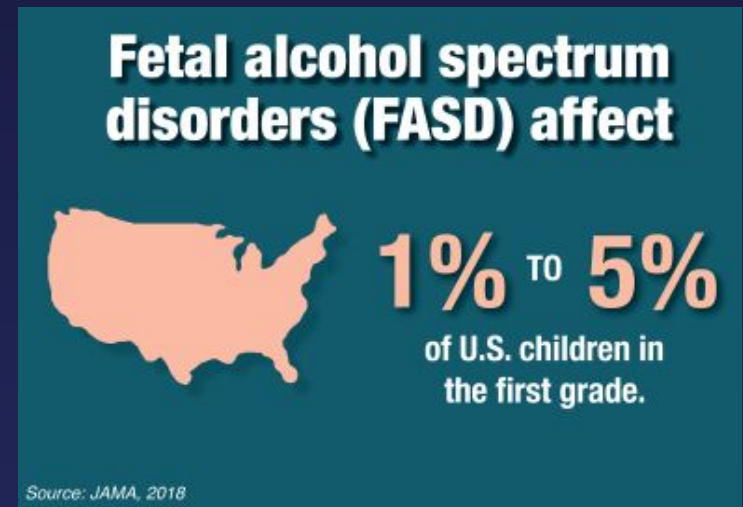
The Flip Side of Self-Care: Drinking to Cope

- **Women are about twice as likely to develop anxiety disorders, PTSD, and depression than men (APA, 2017)**
- **Women are more likely to experience trauma – for instance 1 in 4 women experience completed or attempted rape (CDC, 2022)**
- **Women are more likely to experience domestic violence**
- **About 12% of households are run by single parents and the vast majority of single parents (82%) are women (PEW, 2018)**
 - **About 25% of these households are below the poverty line.**
- **Even in two partner homes, women do more of the domestic chores and child rearing (PEW, 2023)**
- **Women are exposed to more discrimination at work (42% vs 22%) (PEW, 2017)**
- **These differences could help increase motivation to drink to cope, which places women at an increased risk of developing AUD**

What About Alcohol Use During Pregnancy?

Alcohol use during pregnancy and FASD

- About 1 in 7 (14%) pregnant people reported any alcohol use and 1 in 20 (5%) report binge drinking (4+ drinks) in the past 30 days (Gosdin et al., 2022)
- About 40% also reported current use of one or more other substances - most commonly tobacco and marijuana
- People are more likely to drink during pregnancy if they are struggling with anxiety, depression, trauma or other substance use disorders (Leis et al., 2011; Chapman et al., 2024)
- Perhaps as many as 1 in 20 elementary school-aged children have Fetal Alcohol Spectrum Disorder (FASD), which encompasses an array of physical, intellectual, behavioral, and learning disruptions stemming from exposure to alcohol during prenatal development (May and Chambers, 2018)



Challenge: Preventing Alcohol-Exposed Pregnancies without Shaming the Pregnant Person

Stigma is a barrier to care

“Stigma, blame, and shame attached to consuming alcohol during pregnancy for women is a real and significant barrier to accessing support, information, resources, and care for themselves, their child(ren), and their families.” ([Ninomiya et al, 2023](#))

Fear of punitive policies can delay or prevent prenatal care

Punitive policies, such as mandatory referral to child welfare agencies if alcohol use is detected during pregnancy, cause people most in need of support to delay or avoid seeking prenatal care ([Subbaraman and Roberts, 2019](#))

Policies and prevention strategies need to be supportive

Policies should be rooted in evidence and provide support, such as access to treatment and other resources, rather than highlighting potential punishment ([Wolfson and Poole, 2023](#))

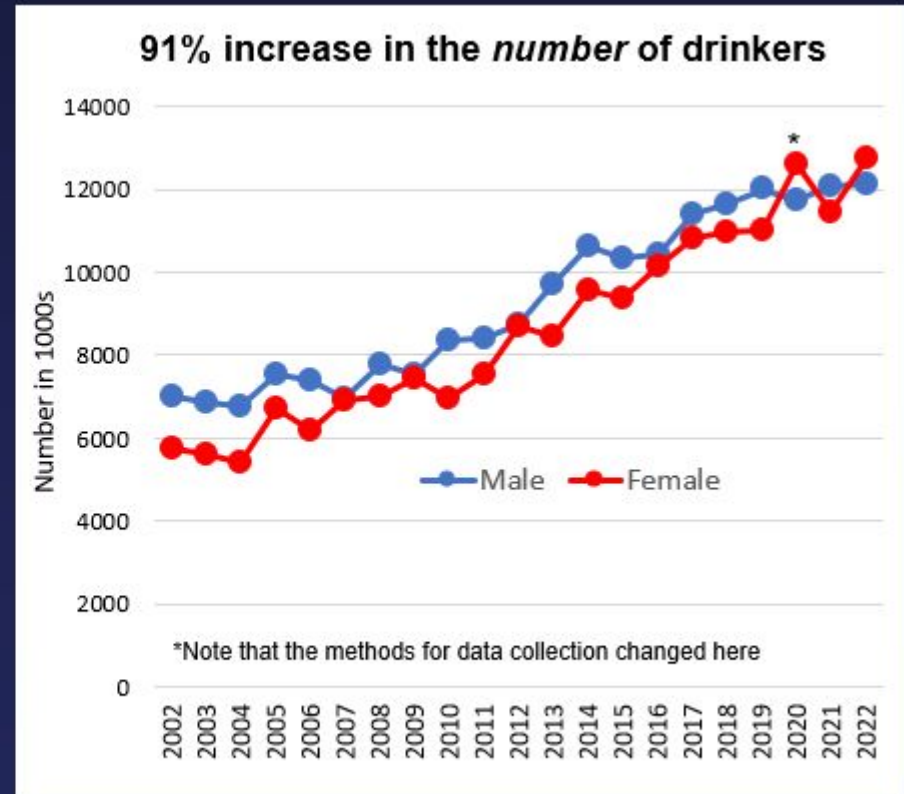
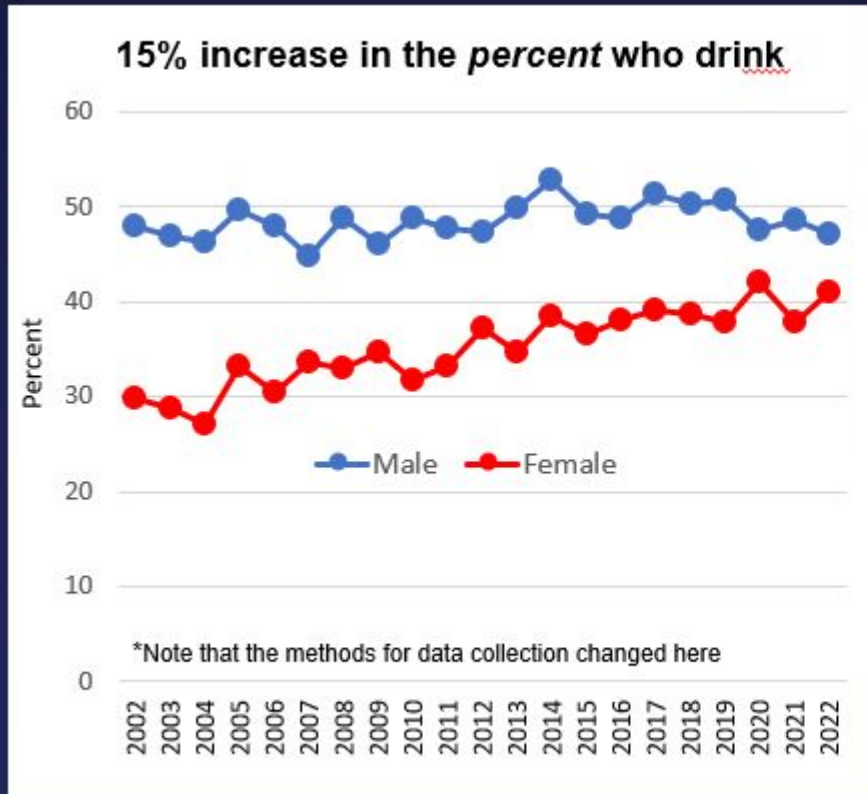
As stated by the American College of Obstetricians and Gynecologists, prenatal care providers should be trained and reimbursed for their efforts to screen, counsel, and connect pregnant patients who drink to appropriate care ([Manriquez et al, 2019](#))

It is important to consider prenatal alcohol use in the broader context of an individual's life and address issues that might be driving prenatal alcohol and other substance use, such as anxiety, depression and trauma ([Leis et al., 2011](#); [Chapman et al., 2024](#))

Drinking Patterns are Converging for Adults Aged 65+

The **percentage** of people 65+ who drank alcohol in the past month increased 15% overall from 2002-2022, **with increase for women (37%) but not men (-1.7%)**.

Due to the rapid increase in the size of the population 65+, the **number** of people that drank alcohol increased 91% overall between 2002-2022.

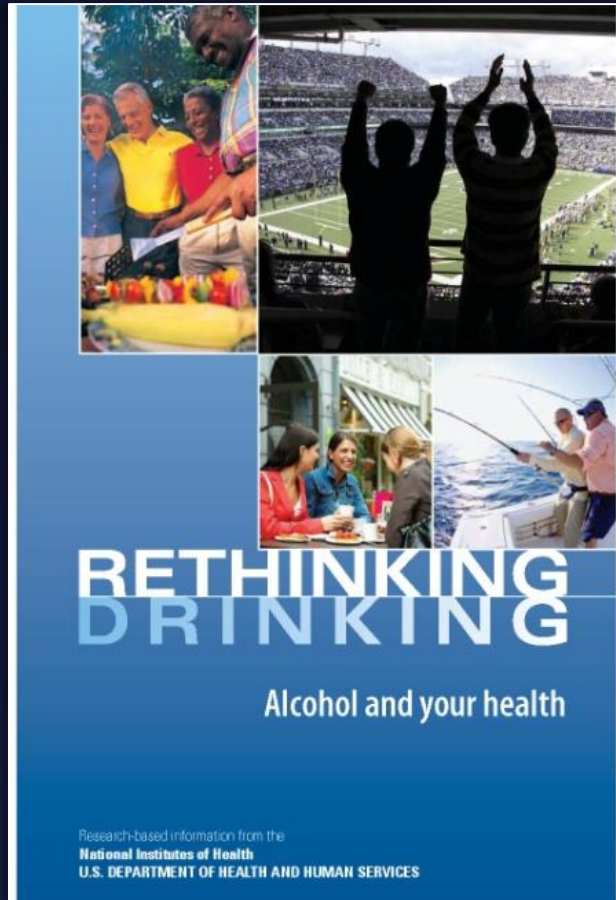


Source: National Survey on Drug Use and Health, 2002-2022

Concerns About Alcohol Use By Adults Aged 65+

- Alcohol affects behavior and health differently as we age. Health consequences of alcohol tend to shift from acute causes (injuries) to chronic causes (e.g., cancer, heart disease) with age
- Older adults:
 - Are more sensitive to the sedative effects of alcohol, as well as to the effects of alcohol on reaction time, balance, attention, and driving skills
 - Experience reductions in body weight and body water leading to higher BACs
 - Take more medications that may interact with alcohol
 - Have an increased risk of injury from falls that is compounded by alcohol
- Both alcohol and aging:
 - Involve widespread inflammation that can contribute to cardiovascular diseases and cancer
 - Disrupt sleep

NIAAA Resources: Rethinking Drinking and the Treatment Navigator



<https://alcoholtreatment.niaaa.nih.gov/>

<https://www.rethinkingdrinking.niaaa.nih.gov/>

Healthcare Professional's Core Resource on Alcohol

- NIAAA launched this online resource in 2022. It covers the basics of what every healthcare professional needs to know about alcohol, including:
 - The many ways that alcohol can impact a patient's health
 - Strategies for alcohol screening and interventions
- For health care providers who are not addiction specialists, it can help overcome barriers to care for patients with alcohol problems, including ways to counteract stigma in their practice.
- It was developed with input from 70 contributors including practicing physicians and clinical psychologists.
- It provides free CME/CE credits for physicians, physician assistants, nurses, clinical psychologists, and pharmacists.



niaaa.nih.gov/health-professionals-communities/core-resource-on-alcohol

NIAAA Facts and Statistics

Your Source For Updated Alcohol Statistics



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Alcohol's Effects on Health

Research-based information on drinking and its impact.

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In this Section

[Alcohol Use in the United States](#)

[Underage Drinking in the United States \(ages 12 to 20\)](#)

[Alcohol and Young Adults Ages 18 to 25](#)

[Alcohol Use Disorder \(AUD\) in the United States](#)

[Alcohol Treatment in the United States](#)

[Alcohol and the Human Body](#)

[Alcohol and Pregnancy in the United States](#)

[Consequences for Families in the](#)

Alcohol Facts and Statistics



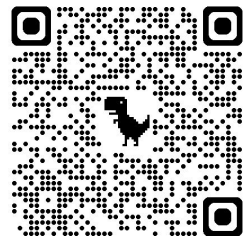
Updated: 2023

[Spanish / En español](#)

Learn up-to-date facts and statistics on alcohol consumption and its impact in the United States and globally. Explore topics related to alcohol misuse and treatment, underage drinking, the effects of alcohol on the human body, and more.

[Alcohol Use in the United States: Age Groups and Demographic Characteristics](#) >

Find up-to-date statistics on lifetime drinking, past-year drinking, past-month drinking, binge drinking, heavy alcohol use, and high drinking.



THANK YOU!

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Special thanks to:

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Laura Manella

Bridget Williams-Simmons

Laura Brockway-Lunardi

Devin Plote

Fred Donodeo

Effective Evidence-Based Therapies for Alcohol Use Disorder Are Available

- Treatments include behavioral treatments, medications, or a mixture of both.
- There are different levels of care/intensity:
 - **Outpatient:** Regular office visits for counseling, medication management, or both
 - **Intensive outpatient or partial hospitalization:** Coordinated outpatient treatment for complex needs
 - **Residential:** Low or high intensity programs in 24-hour treatment settings
 - **Intensive inpatient:** Medically directed 24-hour services; including management of withdrawal symptoms



There are Several Types of Behavioral Treatments for Alcohol Use Disorder

- **AUD-focused behavioral health treatment aims to help patients:**
 - Set goals
 - Identify triggers that could prompt drinking
 - Develop skills to stop or reduce drinking
 - Manage emotions and stress
 - Build relationships that will support treatment goals
- **Specific evidence-backed approaches include:**
 - Cognitive-behavioral therapy (CBT)
 - Motivational enhancement therapy
 - Contingency management approaches
 - Twelve-step facilitation therapy and Mutual Support Groups (e.g. Alcoholics Anonymous, SMART Recovery, LifeRing)



Three Medications Have Been Approved in the U.S. for Treatment of AUD

- **Acamprosate**, which acts on the glutamatergic neurotransmitter system to alleviate the emotional discomfort and insomnia that can happen as the brain adjusts to abstinence
- **Naltrexone**, which works by blocking the opioid receptors in the brain that are involved in the rewarding effects of alcohol
- **Disulfiram**, which interferes with alcohol metabolism by blocking the enzyme aldehyde dehydrogenase (ALDH), causing uncomfortable physical symptoms when alcohol is consumed

These non-addicting medications can help prevent a return to heavy drinking and promote abstinence.



ACAMPROSATE

A medication that helps people get relief for some of the negative symptoms of alcohol withdrawal



NALTREXONE

A medication that reduces alcohol cravings



DISULFIRAM

A medication that can help people avoid alcohol by causing unpleasant symptoms if you drink

Alcohol Use and Its Consequences: Disparities and Misconceptions

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Assistant Professor of Psychiatry

Massachusetts General Hospital, Harvard Medical School



HARVARD
MEDICAL SCHOOL



MASSACHUSETTS
GENERAL HOSPITAL



Designed by Freepik

Why should we
talk about
alcohol use?

Alcohol use is here to stay!
It is tied to social events, celebrations,
and relaxation in many cultures.

Why does it matter?

- **Alcohol is a toxin!**
- **Crosses the cell wall:** Alcohol readily and quickly crosses the cell wall (even the blood-brain barrier), disrupting the structure and function of the cell.
- **Liver Damage:** Alcohol harms the liver, causing inflammation, fatty liver, and cirrhosis.
- **Brain Impairment:** Alcohol disrupts brain function, leading to cognitive issues and memory loss.
- **Neurotransmitter Disruption:** Alcohol disrupts neurotransmitters, impairing judgment and coordination.
- **Alcohol Poisoning:** Excessive drinking can result in life-threatening alcohol poisoning.
- **Habit forming:** Alcohol is habit-forming and can lead to dependence and addiction, making control over consumption difficult.

Outline

- Disparities in Alcohol Use and Its Consequences
- Misconceptions about Alcohol Use
- Implications for Treatment and Recovery and how Journalists can Help

Socioeconomic inequalities shape drinking habits and consequences



NUTRITION



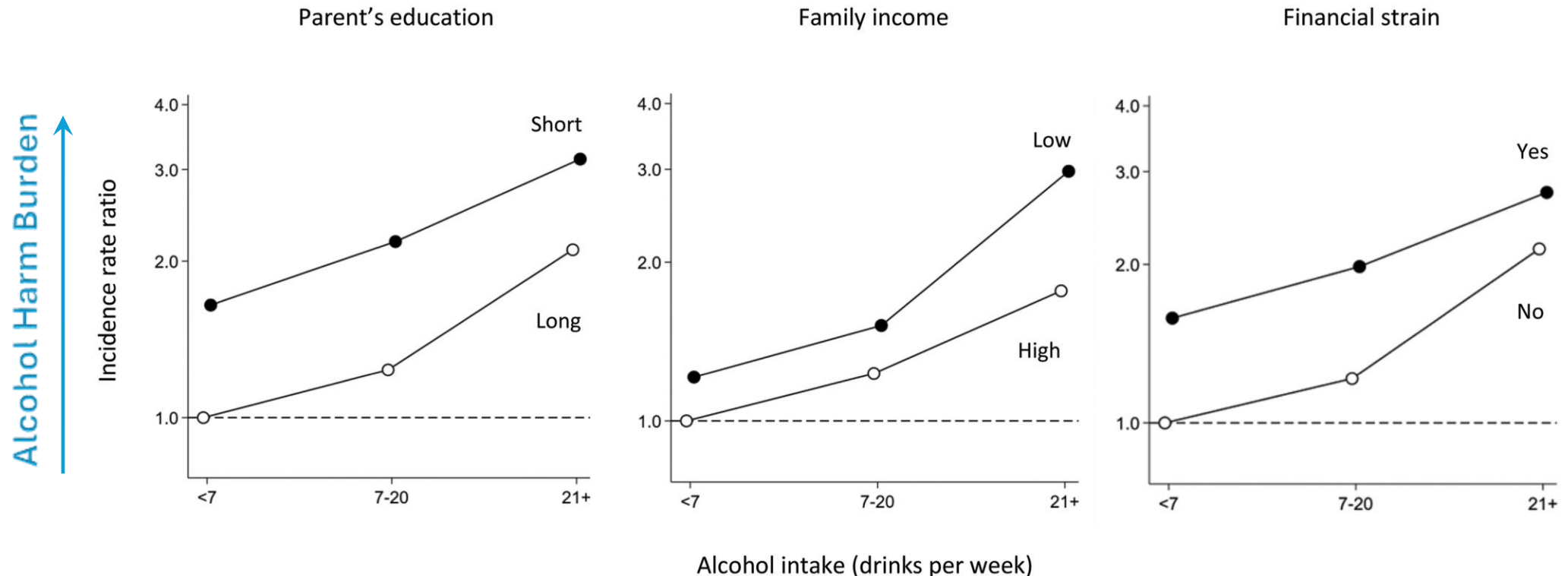
EDUCATION AND
AWARENESS



HEALTHCARE ACCESS

Socioeconomic inequalities in alcohol-related harm in adolescents

A national cohort study of 68,299 Danish youth between 15 to 19 yrs



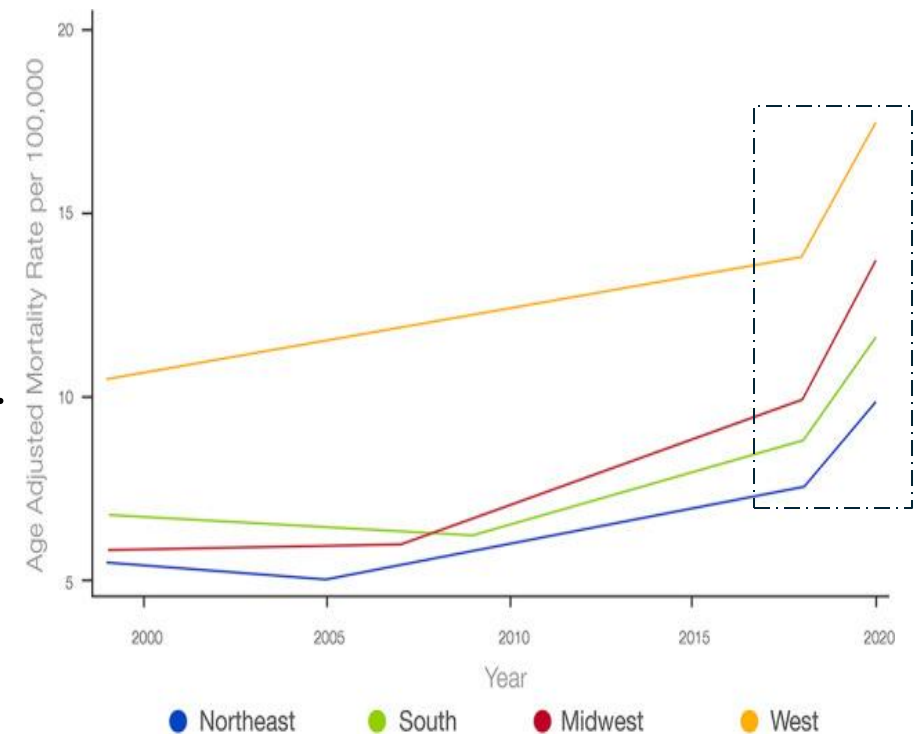
Incidence rate ratios of alcohol-attributable hospital contacts by weekly alcohol intake and socioeconomic position.

Racial, Ethnic and Regional Disparities :1999–2020

Alcohol affects people unevenly across different races and regions in the US

- **Deaths:** 605,948 alcohol-related deaths (1999–2020).
- **Highest Rate:** American Indians/Alaska Natives
- **Region:** Census Midwest Region
- **Trends:**
 - Since 2018, deaths up by 14% yearly across most groups.
 - Recent rates have relatively leveled among American Indians/Alaska Natives
 - Non-Hispanic Whites: 14.3% annual rise (2018–2020).
 - Non-Hispanic Blacks: 17% annual rise.

Recent death trends across census regions



Cultural Influences

Cultural norms

- Stigma and binge drinking

Religious beliefs

- alcohol use ban

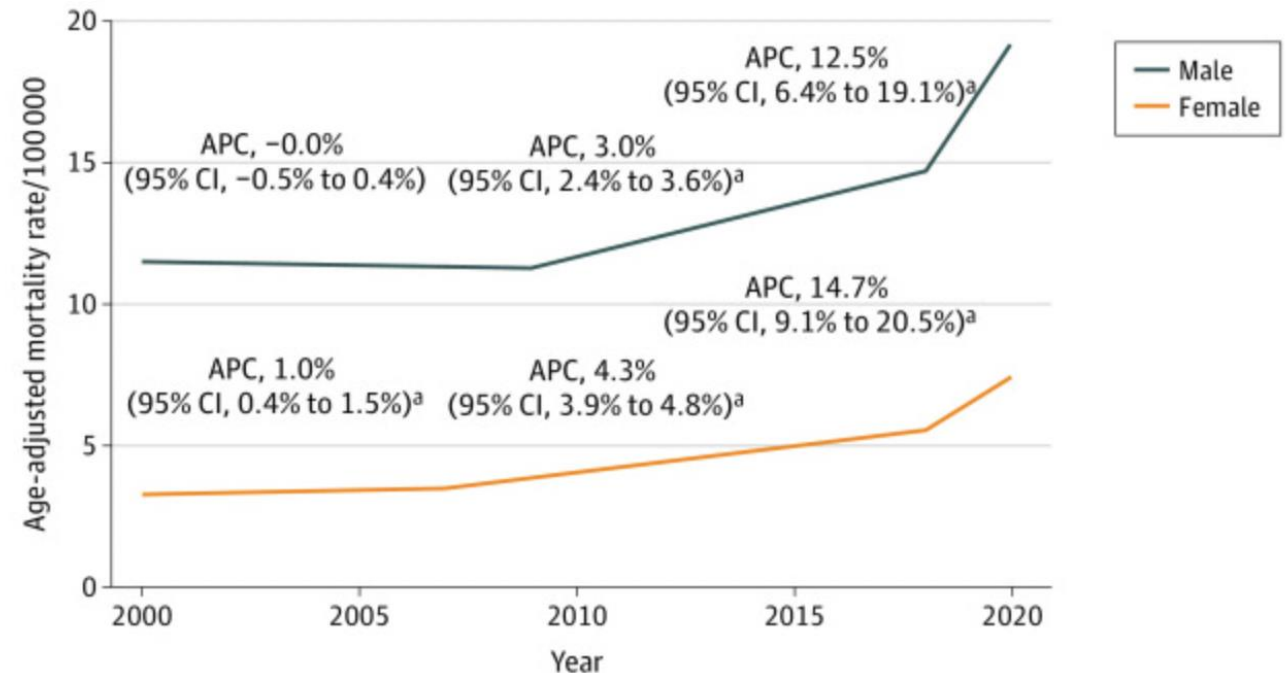
Gender roles

- women face stigma

Alcohol Use in Women – Shifting Patterns

- Alcohol use among women is rising, closing the gap with men.
- Women face higher health risks from alcohol at lower consumption levels.
- Increasing rates of alcohol-related deaths among female individuals

Temporal Trends in Alcohol-Related Mortality Rates by Sex, US, 1999-2020.



APC indicates annual percentage change.

^a $P < .05$; 95% CI does not include zero.

Misconceptions about Alcohol Use

- “Moderate drinking is harmless or beneficial.”
 - Even small amounts increase cancer, cardiovascular disease, and liver disease risks.
- “Moderate drinking protects against cognitive decline.”
 - Alcohol disrupts brain function, leading to cognitive issues, memory loss and mental health issues over time.
- “Alcohol is a good remedy to cope with pain”
 - Alcohol numbs emotions but delays healing, worsening mental health and leading to addiction.
- "Alcohol isn't as addictive as other drugs"
 - Alcohol is as addictive as heroin or cocaine, leading to dependence with frequent or heavy use.
- “Alcohol use only affects the drinker.”
 - Alcohol impacts families, communities, and public services.



Cognitive Decline

Extensive research on alcohol's impact on cognition and key brain regions in alcohol use disorder.

Limited research on light or moderate alcohol consumption's effects.

Uncertainty exists on alcohol's link to cognitive decline in older adults.

No consensus across studies on the alcohol-cognition relationship.

Cognitive Decline



No linear, but **quadratic association** between drinking and cognitive decline measures.



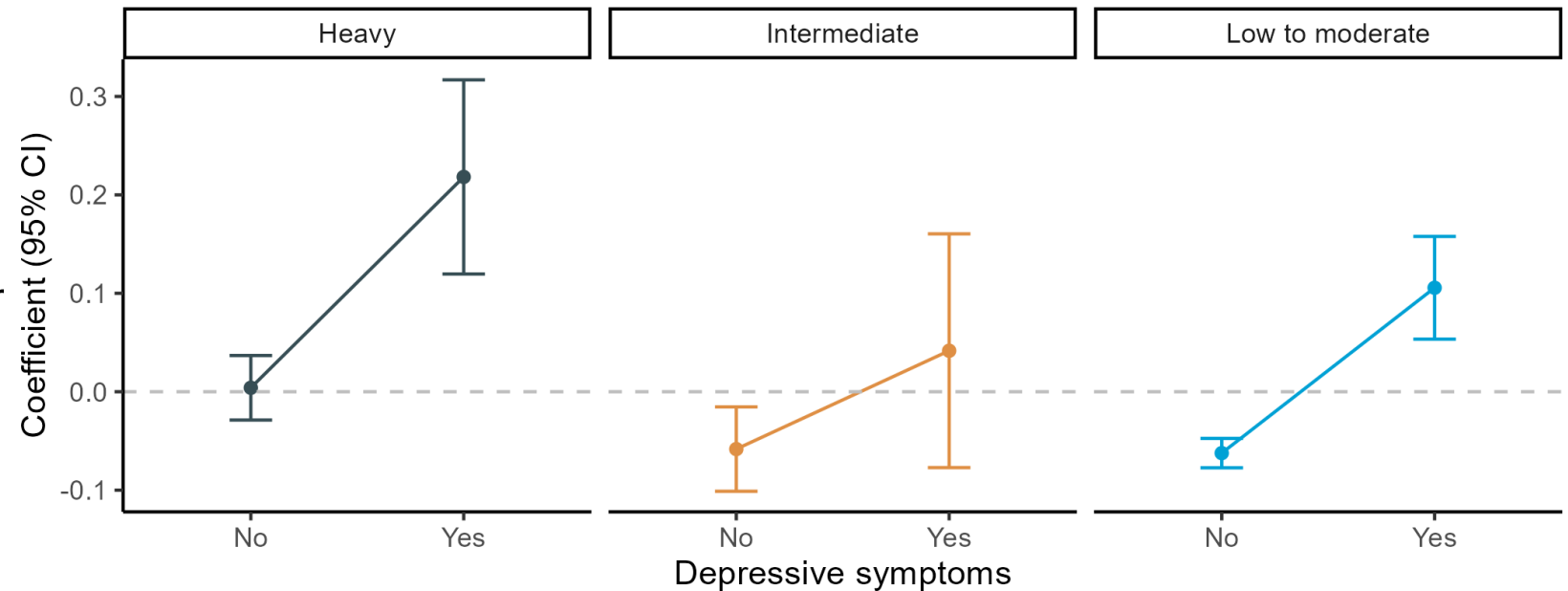
Low to moderate drinking linked to **less decline** in mental status and word recall ($p < 0.001$) compared to no drinking.



Heavy drinking linked to **more mental status decline** ($p < 0.05$).

Cognitive Decline

The effect of all levels of alcohol consumption on cognitive decline is **greater** in older adults with **significant depressive symptoms**.



Chronic Pain

Alcohol Use as a Coping Mechanism



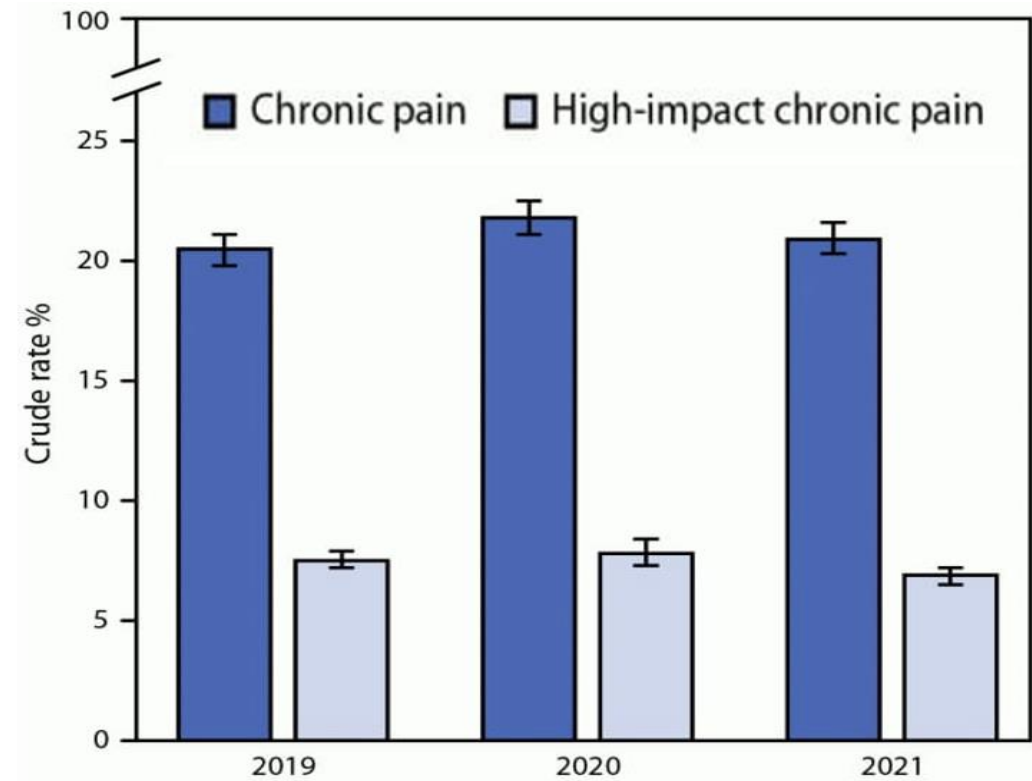
Chronic pain is a highly prevalent condition in the US.



Individuals with chronic pain may use alcohol to cope.

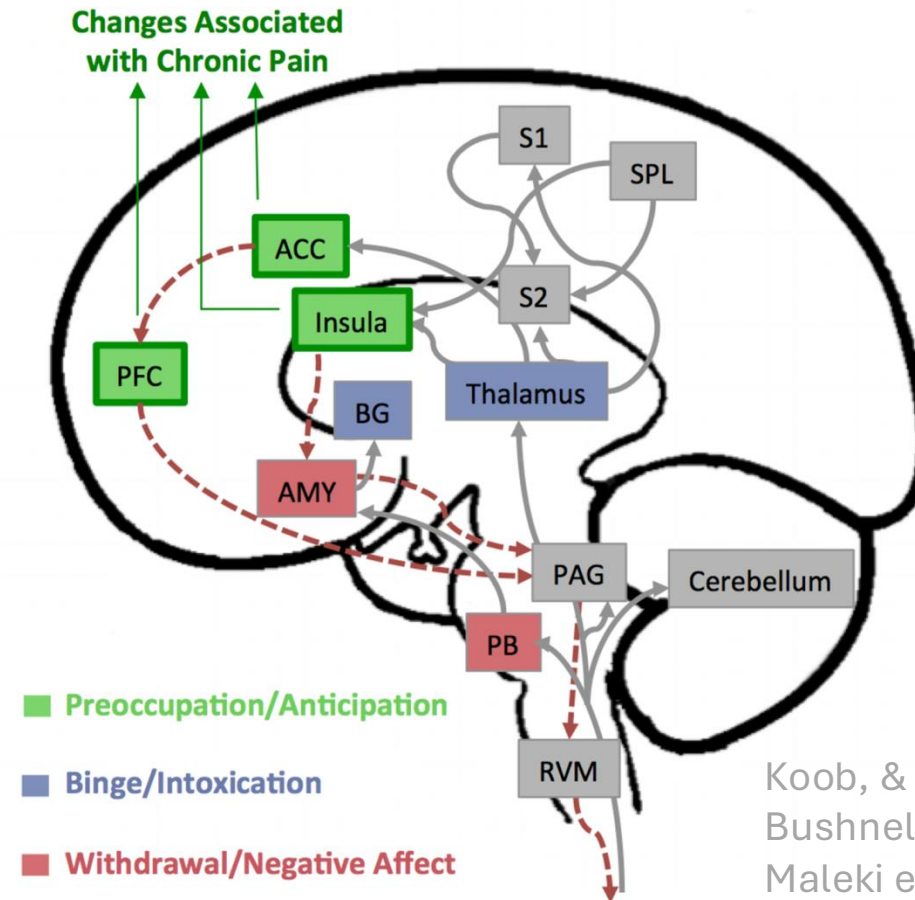


This behavior can lead to substance use disorders, higher tolerance, and dependence.



SAMHSA, Center for Behavioral Health Statistics and Quality

Common and Overlapping Neurocircuitry in Chronic Pain, Mood Disorders and Alcohol Use Disorders



Koob, & Volkow, *Neuropsychopharmacology*, 2010
Bushnell, Ceko, & Low, *Nat Rev Neurosci*, 2013
Maleki et al., *Neuropsychology*, 2019

Brain regions and pathways involved in alcohol use behavior are distributed throughout the brain and overlap with circuitries involved in chronic pain and affective mood disorders, reflecting a shared neurobiological foundation.

Implications for Treatment and Recovery

- **Screen for problematic alcohol use:** Especially when pain and mood disorders are present
- **Tailored Recovery:** consider socioeconomic and cultural differences.
- **Address Inequities:** High-risk marginalized groups need better access to alcohol-related care and tailored treatments.
- **Challenge Misconceptions:** Correcting myths about moderate drinking can prevent long-term harm.
- **Women-Specific Care:** Rising alcohol use among women requires targeted treatment.
- **Reduce Stigma:** Reducing stigma can encourage seeking help.
- **Improved Access:** Highlighting resources encourages more people to seek support.



Social Media: When algorithms fail in profiling recovery

Question:

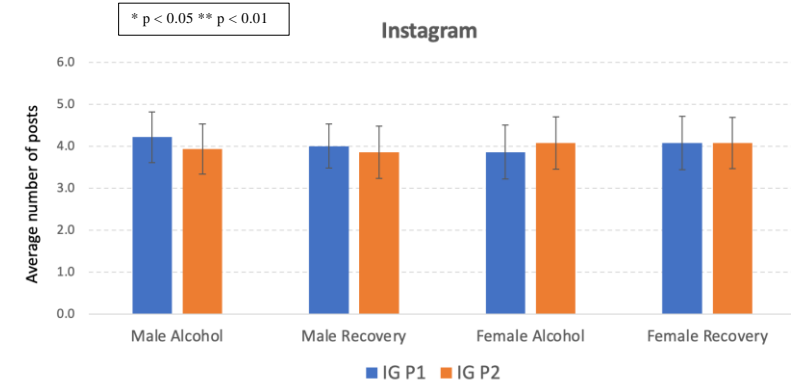
How social media algorithms may be potentially harmful to individuals seeking recovery from alcohol use disorders

Design:

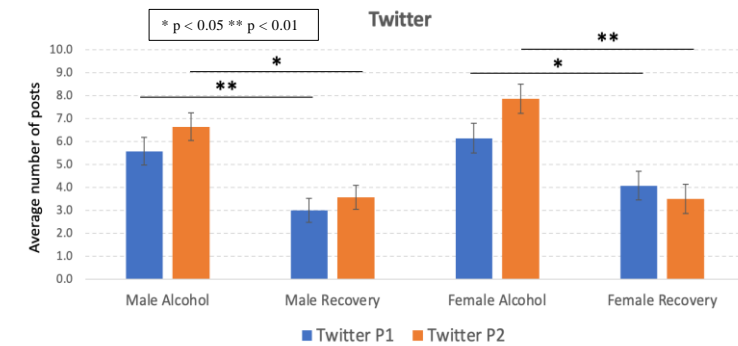
- **Alcohol Only Accounts:** Followed top 20 spirit brands consumed by Millennials in Q1 2022.
- **Recovery Accounts:** Followed 19 alcohol brands plus Massachusetts recovery resources.

Findings:

- **Instagram Posts:** No difference in alcohol brand related posts received on Instagram.
- **Twitter Engagement:** Twitter showed a 37% difference in alcohol brand related posts for recovery-seeking users.
- **Ad Settings:** Changing ad settings (e.g., "see less alcohol ads") on IG had no effect on posts.



(a)



(b)

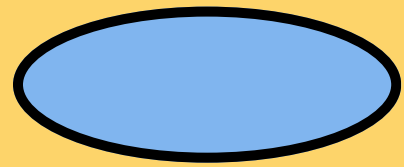
Ways Journalists can help

- Investigate and report on false claims and the true health risks of alcohol.
- Expose how alcohol companies and social media promote harmful content.
- Educate the public on alcohol misuse and dispel common myths.
- Interview experts to clarify alcohol-related health issues.
- Reporting may lead to reforms in alcohol marketing and social media exposure.



Summary

- Alcohol's impact is widespread and unequal.
- Social, economic, and cultural factors drive alcohol-related harm.
- Misconceptions encourage drinking and sometimes risky drinking.
- Rising use among women and older adults adds to the challenges.
- Addressing these problems needs deeper understanding and tailored solutions.
- We're in an era of misinformation, where algorithms dictate the information we see.



REPORTING ON ALCOHOL USE RESPONSIBLY

Jordan Gass-Pooré

Podcast Producer and Investigative Journalist

BEST PRACTICES FOR JOURNALISTS COVERING ALCOHOL USE DISORDER

MAIN POINTS

- 1** Use first-person language.
- 2** Avoid stereotypes.
- 3** Put findings in context.
- 4** Include sources who use alcohol or have alcohol use disorder.

IMPROVING COVERAGE

Language can impact an entire group of people.

Show how people can and do change.

The way you talk about data.

RESOURCES

Reporting on Addiction: aims to decrease stigma and improve the media's portrayal of addiction and recovery.

Changing The Narrative: strives to dismantle the misconceptions surrounding drug use and addiction.

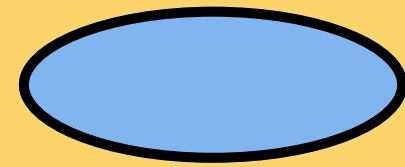
REPORTED ESSAYS

I have 45 minutes to write this.

If I don't do it by then, I'll chicken out and go back outside for another smoke.

There's this memory that keeps playing in my head that I've tried to suppress many times, but the more I try to block it out, the slower it gets. My dad is sitting next to me in the car. He's yelling, not quite at me because his eyes are on the road and the bottle in his hand. I couldn't even get his attention when he was mad at me.

I'm 4 years old. I don't know yet that the clear liquid in the bottle he's drinking from is gin. I think it's water. My dad drives the car magically; his hands aren't on the steering wheel. One hand holds the bottle, the other hand rests outside the window, a cigarette between his fingers.



THANK YOU!

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