

DOCUMENT RESUME

ED 344 152

CG 024 145

TITLE Preventing Underage Drinking: A Dialogue with the Surgeon General. Hearing before the Select Committee on Children, Youth, and Families. House of Representatives, One Hundred Second Congress, First Session (November 15, 1991).

INSTITUTION Congress of the U.S., Washington, DC. House Select Committee on Children, Youth, and Families.

REPORT NO ISBN-0-16-037743-9

PUB DATE 92

NOTE 53p.

AVAILABLE FROM Superintendent of Documents, U.S. Government Printing Office, Congressional Sales Office, Washington, DC 20402.

PUB TYPE Legal/Legislative/Regulatory Materials (090)

EDRS PRICE MF01/PC03 Plus Postage.

DESCRIPTORS *Adolescents; *Alcohol Abuse; Alcoholism; Delinquency; *Drinking; Hearings; *Prevention

IDENTIFIERS *Congress 102nd

ABSTRACT

This document presents the testimony of Surgeon General Antonia Novello of the U.S. Public Health Service, and related materials from a congressional hearing examining underage drinking. In her opening statement, Chairwoman Patricia Schroeder reviews the incidence of underage drinking and notes the role of the advertising industry in promoting drinking. Surgeon General Novello's testimony notes the pervasiveness of underage drinking and discusses the problems created by exposing adolescents to mixed messages on drinking. Novello contrasts the health message that the use of alcohol by young people can lead to serious health consequences with the advertising messages that promote drinking. She examines the problem of labeling that makes it difficult to distinguish alcoholic from nonalcoholic beverages on store shelves; designated drivers, and teenagers who ride with drinking drivers; and adolescents' lack of knowledge about alcohol. Actions taken by the Surgeon General to combat the problem of underage drinking are reviewed, and the problems encountered in enforcing the National Minimum Drinking Age Act of 1984 are discussed. Novello describes actions taken by individual states to prevent underage drinking. The role of advertising in promoting underage drinking is emphasized throughout the document. Included in the document are a fact sheet on preventing underage drinking; the prepared statement of Michael Kavanaugh, sheriff of Roanoke County, Virginia; comments by John Calfee, associate professor of Marketing, School of Management, Boston University; and a report from the Office of Inspector General, U.S. Department of Health and Human Services. (NB)

 * Reproductions supplied by EDRS are the best that can be made *
 * from the original document. *

CG

PREVENTING UNDERAGE DRINKING: A DIALOGUE WITH THE SURGEON GENERAL

ED344152

HEARING BEFORE THE SELECT COMMITTEE ON CHILDREN, YOUTH, AND FAMILIES HOUSE OF REPRESENTATIVES ONE HUNDRED SECOND CONGRESS FIRST SESSION

HEARING HELD IN WASHINGTON, DC, NOVEMBER 15, 1991

Printed for the use of the
Select Committee on Children, Youth, and Families



U.S. DEPARTMENT OF EDUCATION
Office of Educational Research and Improvement
EDUCATIONAL RESOURCES INFORMATION
CENTER (ERIC)

- This document has been reproduced as received from the person or organization originating it.
- Minor changes have been made to improve reproduction quality.
- Points of view or opinions stated in this document do not necessarily represent official OERI position or policy.

U.S. GOVERNMENT PRINTING OFFICE
WASHINGTON : 1992

51-718

For sale by the U.S. Government Printing Office
Superintendent of Documents, Congressional Sales Office, Washington, DC 20402
ISBN 0-16-037743-9

CG024145

BEST COPY AVAILABLE

SELECT COMMITTEE ON CHILDREN, YOUTH, AND FAMILIES

PATRICIA SCHROEDER, Colorado, *Chairwoman*

GEORGE MILLER, California	FRANK R. WOLF, Virginia
WILLIAM LEHMAN, Florida	CLYDE C. HOLLOWAY, Louisiana
MATTHEW F. McHUGH, New York	CURT WELDON, Pennsylvania
TED WEISS, New York	LAMAR S. SMITH, Texas
BERYL ANTHONY, Jr., Arkansas	JAMES T. WALSH, New York
BARBARA BOXER, California	RONALD K. MACHTLEY, Rhode Island
SANDER M. LEVIN, Michigan	BOB McEWEN, Ohio
J. ROY ROWLAND, Georgia	MICHAEL BILIRAKIS, Florida
GERRY SIKORSKI, Minnesota	SCOTT L. KLUG, Wisconsin
ALAN WHEAT, Missouri	RICHARD JOHN SANTORUM, Pennsylvania
MATTHEW G. MARTINEZ, California	DAVE CAMP, Michigan
LANE EVANS, Illinois	FRANK D. RIGGS, California
RICHARD J. DURBIN, Illinois	BILL BARRETT, Nebraska
DAVID E. SKAGGS, Colorado	Vacancy
BILL SARPALIUS, Texas	
TIM JOHNSON, South Dakota	
BARBARA-ROSE COLLINS, Michigan	
JOAN KELLY HORN, Missouri	
JIM BACCHUS, Florida	
DOUGLAS "PETE" PETERSON, Florida	
ROBERT E. "BUD" CRAMER, Jr., Alabama	

COMMITTEE STAFF

KARABELLE PIZZIGATI, *Staff Director*
JILL KAGAN, *Deputy Staff Director*
DANIELLE MADISON, *Minority Staff Director*
CAROL M. STATUTO, *Minority Deputy Staff Director*

(11)

CONTENTS

	Page
Hearing held in Washington, DC, November 15, 1991	1
Statement of:	
Novello, Antonia C., M.D., M.D.H., Surgeon General, U.S. Public Health Service, Department of Health and Human Services, Washington, DC....	8
Prepared statements, letters, supplemental materials, et cetera:	
Calfee, John E., associate professor of Marketing, School of Management, Boston University, Boston, MA, and a report from the Office of Inspector General, U.S. Department of Health and Human Services, comments of.....	34
Kavanaugh, Michael F., sheriff, County of Roanoke, VA, prepared statement of	47
Novello, Antonia C., M.D., M.P.H., Surgeon General, U.S. Public Health Service, Department of Health and Human Services, Washington, DC, prepared statement of	16
Schroeder, Hon. Patricia, a Representative in Congress from the State of Colorado, and chairwoman, Select Committee on Children, Youth, and Families:	
Opening statement of.....	2
Preventing Underage Drinking: A Dialogue With The Surgeon General (a fact sheet).....	4

(iii)

PREVENTING UNDERAGE DRINKING: A DIALOGUE WITH THE SURGEON GENERAL

FRIDAY, NOVEMBER 15, 1991

HOUSE OF REPRESENTATIVES,
SELECT COMMITTEE ON CHILDREN, YOUTH, AND FAMILIES,
Washington, DC.

The select committee met, pursuant to call, at 9:35 a.m., in Room 2226, Longworth Building, Hon. Patricia Schroeder [chairwoman of the select committee] presiding.

Members present: Representatives Schroeder, Johnson and Wolf.
Staff present: Karabelle Pizzigati, staff director; Jill Kagan, deputy staff director; May Kennedy, professional staff; Julie Shroyer, professional staff; Madlyn Morreale, research associate; Danielle Madison, minority staff director; Carol Statuto, minority deputy staff director; Mary Jordan, staff assistant; and Joan Godley, committee clerk.

Chairwoman SCHROEDER. Well, I want to thank everyone for coming, and I am going to go ahead and call the meeting to order.

I think Congressman Wolf is on his way, but we have got Congressman Johnson up, bright and alert, and ready to go.

I know that the Surgeon General has a very busy schedule, so we wanted to thank her so much for being here and tell her how very happy we are that she has come to engage the committee in this dialogue about underage drinking.

I can't tell you how pleased we are, because while we have been looking at a lot of other things, this is a part of the risky behavior of adolescence that we have been ignoring, and ignoring very seriously. Teen drinking, we know, is only increasing, and we thought it was a very opportune time to have this hearing right before the holidays, when there seems to be an opportunity for kids to engage in it even more.

When you see that half the junior high students last year admit that they were drinking, that is very shocking. When you see that underage drinkers consume 35 percent of the wine coolers, as you pointed out, that is really shocking. And when you see that they drink more than a billion cans of beer—that is a lot of beer. Just the thought of it is incredible. It is widespread. It is dangerous.

We know that there are many, many problems, and many more teens every year are showing signs of alcohol dependence, which is pretty frightening.

I want to commend you, when you have been pointing out that the industry is spending \$2 billion a year to link sports, beach parties, sex, all the things that kids want to participate in, to beer and

(1)

wine coolers. I thought that your study was just astounding, and I must admit the packaging of these items shocked me. I did not realize how heavily targeted they had been to attract young people and to really zero in on that market.

That whole good life message I was aware of, because you saw the ads. But I guess, not shopping for it, you didn't see the specific packaging that makes it look like just your regular soft drink; or the fact that grain alcohol was used in certain places. All those things were amazing.

This committee has really been looking at the risky business of adolescence. We feel this is a society that has ignored adolescents. I think it is partly because for every single person being an adolescent was a very painful period of life. And so you don't want to deal with adolescence because you almost have to deal with that part of your life that was painful, and we have tended to ignore young people.

So I just want to say that you are a real hero in that you have really launched this ambitious campaign to reduce underage drinking and to look at how the industry is targeting them. We did a little survey and found that you were the highest level administration official ever that we can find to focus on this issue. So you are breaking new ground, and you are being very courageous. We applaud you and thank you for being here.

[Opening statement of Hon. Patricia Schroeder follows:]

OPENING STATEMENT OF HON. PATRICIA SCHROEDER, A REPRESENTATIVE IN CONGRESS FROM THE STATE OF COLORADO, CHAIRWOMAN, SELECT COMMITTEE ON CHILDREN, YOUTH, AND FAMILIES

Good morning, and welcome to this hearing. Today the Select Committee on Children, Youth, and Families has the privilege of discussing underage drinking—a largely overlooked problem affecting millions of teens—with Surgeon General Antonia Novello.

At a time when we claim to be winning the war on drugs, Dr. Novello has alerted us to the need to increase troop strength in the battle against teenage drinking. She will help us build on what the Select Committee has already learned about preventing risky behavior in adolescents, and lay the groundwork for evaluating future policy.

Eight million students still drink weekly, more than half of junior high school students drank last year, and underage drinkers consume 35% of the wine coolers sold in the United States. On an annual basis, adolescents drink more than a billion cans of beer.

Underage drinking is not only widespread, it is dangerous:

Experts estimate that one-fifth of teens show signs of alcohol dependence.

Alcohol related accidents like car crashes and drownings represent the major killer of those under 18.

Drinking usually comes in a package with other high risk behaviors such as smoking, delinquency, and early, unprotected sexual activity.

But students are not well-informed about the dangers of drinking. Millions of teens don't know that a person can die from alcohol overdose, and almost half think cold showers and coffee can sober up a drunk who has to drive home.

The advertising industry is not ignorant of the hazards of alcohol for teens, yet \$2 billion a year is spent to link sports, beach parties, and sex to beer and wine coolers. This is often the "good life" from a teenager's point of view. Public service announcements tell kids to "think before they drink," but offer nothing specific to think about, and beverage containers have no health warnings or nutritional content information.

In hearings on the "Risky Business of Adolescence" conducted by the Select Committee earlier this year, we learned that prevention works when we combine (1) school-based programs that teach relevant facts and skills with (2) talking to teens one-on-one about their decisions, and (3) community-wide programs to keep them

safe. Parents cannot rest assured that Johnny's drug of choice is "only alcohol," and government must not ignore its obligation to curtail adolescent drinking, a task so central to the "war on drugs."

The Surgeon General has launched an ambitious campaign to reduce underage drinking, representing the highest level Administration attention to this issue in many years. We applaud her efforts, are delighted to have her here to deliver an up-to-the-moment progress report, and seek her advice about new ways the problem can be approached here in Congress, at other levels of government, in our communities, and in the private sector.

Thank you all for joining us.

**PREVENTING UNDERAGE DRINKING:
A DIALOGUE WITH THE SURGEON GENERAL**

A FACT SHEET

ALCOHOL IS THE DRUG OF CHOICE FOR ADOLESCENTS

- In 1990, one out of four youth ages 12-13 (26%) had consumed alcohol. By age 16-17, the proportion of youth reporting alcohol use doubles (49%). By senior year in high school, 90% of students have used alcohol. (National Institute on Drug Abuse [NIDA], 1991)
- In recent years, declines in alcohol use among high school seniors have not corresponded with declines in other illicit drug use. Between 1987 and 1990, the percent of high school seniors reporting marijuana use declined 18% and the percent reporting cocaine use fell 40%, while the percent of students reporting alcohol use declined only 2%. (NIDA, 1991; NIDA, 1988)
- The average age of first alcohol consumption is 12-13 years. Of those students who drink, five out of every six report having had their first drink by age 15. (Department of Health and Human Services [DHHS], 1991)
- Alcohol use varies significantly among different groups of youth. In 1990, among youth ages 12-17, 52% of white youth report having consumed alcohol, compared with 48% of Hispanic and 33% of African-American youth. (NIDA, 1991)

HEAVY DRINKING WIDESPREAD AMONG TEENS; LINKED TO OTHER DANGERS, EVEN DEATH

- Eight million junior and senior high school students (nearly 40% of this population) report weekly consumption of alcohol, including 5.4 million who have "binged" with five or more drinks in a row; 454,000 report an average weekly consumption of 15 drinks. (DHHS, 1991)
- Between 1985 and 1989, approximately 40,600 youth ages 15-24 died in alcohol-related motor vehicle accidents. Nearly seven million students report having accepted a ride with someone who has been drinking; almost half of all students who drink have been a passenger in a car that a friend drove after drinking. (Centers for

Disease Control, 1991; DHHS, 1991)

- In 1988, nearly one in five youth ages 12-17 (17%) showed at least one symptom of alcohol dependency. Among students who report drinking, more than four million drink when they are upset, three million drink alone, and nearly three million students drink when they are bored or to feel high. (DHHS, 1991)
- Alcohol use has been closely associated with smoking, school failure, and early and unprotected sexual activity among adolescents. (Office of Technology Assessment [OTA], 1991)

YOUTH INUNDATED WITH ALCOHOL ADVERTISING, REPRESENT LARGE MARKET

- In 1990, \$752 million dollars was spent on beer and wine advertising and \$291 million dollars was spent on distilled spirits advertising. (Endicott and Brown, 1991)
- High school and junior high school students drink 35% of all wine coolers sold in the U.S. and 1.1 billion cans of beer each year. (DHHS, 1991)
- In one study, alcohol was found to be the most common drug used on television and the most frequently used beverage; alcohol was used in three-fourths (78%) of surveyed television programs, with an average of 10.65 drinking acts per hour. (Wallack, et al., 1987)
- A recent poll conducted on behalf of the alcohol industry-supported Century Council found that three-fourths of people surveyed believe that "alcohol advertising is a major contributor to underage drinking." Similarly, a 1988 survey conducted for the Bureau of Alcohol, Tobacco, and Firearms found that 80% of the population believed that "alcohol advertising influences underage youth to drink alcoholic beverages." (The Wirthlin Group, 1990; Opinion Research Corporation, 1988)

YOUTH LACK INFORMATION NEEDED TO BE SAFE CONSUMERS

- Cisco, which contains 2.5 times more alcohol than other alcoholic beverages, was identified as non-alcoholic by 36% of students recently surveyed. Similarly, among students who report drinking, 42% prefer wine coolers, yet one out of every three students does

not know that all wine coolers contain alcohol. (DHHS, 1991)

- More than 2.6 million students do not know that a person can die from an alcohol overdose and nearly half (46%) of students interviewed believe that taking a cold shower, drinking coffee, or getting fresh air can help a person sober up more quickly. (DHHS, 1991)

DESPITE 21 YEAR LEGAL DRINKING AGE, ALCOHOL READILY AVAILABLE TO TEENS

- Almost two-thirds of students who drink buy their own alcohol; 7 million students report being able to walk into a store to purchase alcohol. (DHHS, 1991)
- During a recent Insurance Institute for Highway Safety study, minors successfully bought alcohol in 44-80% of New York stores and in 97% of Washington, D.C. stores. (DHHS, 1991)

STATE AND FEDERAL RESPONSE INADEQUATE; REGULATION INCONSISTENT

- The National Institute on Alcohol Abuse and Alcoholism, which is the primary federal agency responsible for research on alcohol abuse, devoted only \$6.1 million or 5% of its budget to adolescents. (OTA, 1991)
- A Fall 1989 survey of state substance abuse directors showed at least 1.6 million adolescents in the U.S. need treatment for alcohol and other drug abuse, but only 123,500 are receiving treatment. (National Association of State Alcohol and Drug Abuse Directors, 1990)
- Although *sale* of alcoholic beverages to minors is illegal in all 50 states and the District of Columbia, minors can legally *sell* alcohol without supervision in 44 states, *possess* alcohol in 35 states, *consume* alcohol in 21 states, and *purchase* alcohol in 6 states. (DHHS, 1991)

MODELS OF EFFECTIVE CAMPAIGNS EXIST

- Participants in a comprehensive alcohol and other drug abuse

prevention program for students in grades 6-7 were at least 50% less likely than students in a control group to use alcohol, cigarettes, or marijuana one year after the study. Parents of participating students were more likely to report reduced alcohol use and increased physical activity. The program supplemented peer pressure resistance skills training with parental involvement, community organization, and promotion of local health policy change. (Pentz, et al., 1989)

- Current federal excise tax rates vary considerably by alcohol products. The tax rate per gallon of beer is \$0.58, compared with \$1.07 for wine and \$13.50 for liquor. Studies have shown that raising the tax of a six-pack of beer by 21.5 cents would significantly reduce teenage drinking and highway mortality among youth ages 18-20 by 27%. (Center for Science in the Public Interest [CSPI], 1991; CSPI, 1989)
- A 1989 study showed that countries with bans on spirits advertising have about 10% lower alcohol consumption and motor vehicle fatality rates than countries with no bans, and those that ban advertising beer and wine have about 23% lower alcohol consumption and motor vehicle fatality rates. (Saffer, 1989)

November 15, 1991

Chairwoman SCHROEDER. And let me yield to Congressman Johnson for an opening statement.

Mr. JOHNSON. Thank you.

I have, really, no formal opening statement—I am anxious to go on to the testimony here this morning—other than to commend you, Chairwoman Schroeder, for holding this hearing. I think it is a timely, critically important issue.

As a former prosecutor in a college town and as a father of two teenaged sons, this is an issue that I have had some personal concern about for some time. It has been a matter of longstanding concern to me, both in the state legislature in South Dakota and here in the Congress. It is, I think, a tremendous problem that we face.

I have, as well, some concerns about the unique circumstances of our Native American population and their struggles with alcohol in my home state of South Dakota.

So I am looking forward to the testimony here today, and, hopefully, this will lead us a little further down the road towards a legislative agenda where we can take some constructive steps to deal with this very critical problem. Thank you.

Chairwoman SCHROEDER. So we welcome you again, and Congressman Wolf will be here shortly. Let us yield the floor to you. It is all yours.

STATEMENT OF ANTONIA C. NOVELLO, M.D., M.P.H., SURGEON GENERAL, U.S. PUBLIC HEALTH SERVICE, DEPARTMENT OF HEALTH AND HUMAN SERVICES, WASHINGTON, DC

Dr. NOVELLO. Thank you so much, Madam Chair, Mr. Johnson and Mr. Wolf.

I am pleased to have the opportunity to talk to you about underage drinking and what I have found to be its key issues and its potential solutions.

I have been working on this issue since September of 1990, when I launched what I now realize was a fact-finding mission on my part. I toured the country talking to community leaders, to teachers, to kids and to everyone about the problems of underage drinking.

What I learned in that month has served me well and certainly underscores the basis of all our teen drinking prevention efforts. That is, prevention works best if the message that our youth gets at home is the one he gets at school, is the one he gets in the community and is the one that he gets from his peers. If this clear and consistent message cannot be provided, second best is to have clear and consistent messages from the parent, reinforced by messages in the school.

I also began to learn then, and I relearn every time I look at the issue, how pervasive underage drinking is and how it is truly the mainstream drug used that plagues our communities and our families.

I began to learn then and I relearn everyday how pervasive also are the mixed messages we constantly send our children about alcohol. I agree with Dr. Mason, our Assistant Secretary of Health, when he says we have made tremendous progress in the illicit drug

war, and that is because we are forever sending nonmixed messages.

I can tell you that at this stage of the game we are losing the one on alcohol because we are allowing mixed messages to go on and on.

Our health message is clear. The use of alcohol by young people can lead to serious health consequences far beyond those well-known about drinking and driving—the likes of absenteeism, vandalism, date rape, truancy, theft and random violence, to name a few. But that message directly conflicts with the enticing drumbeat of ads that say drink me and you will be cool, drink me and you will be glamorous, or drink me and you will have fun.

Since September of 1990, I have conducted a very carefully thought-out campaign to try to deal with this issue, and I can tell you that it has culminated in the invaluable series of reports by the Inspector General, Dick Kusserow.

Prior to those reports I have gotten involved, and I can tell you I took the following steps to bring the issue of underage drinking to the American public:

In the fall of 1990, I helped launch the Office of Substance Abuse Prevention's "Pienselo"—an alcohol prevention campaign that was targeted to Hispanic youth, because, as you well know, 90 percent of the billboards in our communities have a picture of alcohol—Halloween advertising was being used by the alcohol industry at that time.

I regret to add that, although my most recent press conference on alcohol advertising occurred just after Halloween, brewers still ran Halloween campaigns with the likes of Elvira and the likes of others, very similar to what they did last year.

In January of 1991, I held a press conference on Cisco, calling for the repackaging of this fortified wine that looked like a wine cooler, but we knew it was equivalent to five shots of vodka.

In spring of 1991, I held a press conference on Spring Break promotional activities on college drinking where I asked the industry to please remove all their ads from the places where they were, and I can tell you that it did very well in Miami Beach, but it didn't do very well in Padre Island.

I can also tell you that, together with the Treasury's Bureau of Alcohol, Tobacco and Firearms, we have worked to do research, to try to assess the effectiveness of the current warning label.

In June of 1991, I released the first set of reports from Inspector General Kusserow—"Youth and Alcohol: Drinking Habits, Access, Attitudes and Knowledge" and "Do They Know What They Are Drinking?"

And the studies showed that at least 8 million American teenagers use alcohol every week, and almost half a million go on weekly binges of five drinks in a row, confirming earlier surveys by the National Institute on Drug Abuse. Junior and senior high school students drink, every year, 35 percent of all wine coolers and 1.1 billion cans of beer, or 102 million gallons.

Many teenagers, as many as four million of those who drink, are using alcohol to handle stress and to handle boredom, and many of them drink alone, breaking the old stereotype of party drinking and peer pressure.

Labeling is a big problem. Two out of three teenagers cannot distinguish alcoholic from nonalcoholic beverages because of the way they appear similar on the store shelves.

And the idea of designated driver has to be looked upon again. Although 92 percent of the adolescents know that drinking and driving is dangerous, 7 million of them still bum rides with their friends, even though they know they are drunk.

Teenagers lack essential knowledge about alcohol too. Very few are getting clear and reliable information about alcohol. They don't know the minimum age; 5.6 million do not know the minimum age for purchasing alcohol, and, worse, almost 2 million do not even know that a law exists.

Alcohol intoxication affects 2.6 million teenagers who do not know that a person can die from an overdose of alcohol. And one-third believe that coffee, taking a shower or getting fresh air can actually sober you up.

Relative strength and equivalencies—this is very hard for me, because the teenagers, 80 percent of them do not know that one shot of whiskey and one can of beer have the same equivalence of alcohol. And at least 55 percent do not know that a can of beer has the same amount of alcohol as four ounces of wine.

Two-thirds of the teenagers who drink, or an equivalent of 7 million, walk into a store, buy the alcohol, and there is no one else to supervise it. And on top of that, 3.4 million of them on the other side of the counter sell it to them without any supervision.

And as we learn, because of the 1935 Federal Alcohol Administration Act, it is against the law, since 1935, to label beer or malt liquor with the content of alcohol.

And as a result of those reports, I have taken the following action: I have established a small, internal task force on alcohol labeling composed of policy and staff officials from HHS, BATF and the FTC. And the purpose of the task force is to formulate recommendations regarding clear alcohol content labeling on all alcoholic beverages, including beer, including wine coolers.

In September of 1991, we released the second report of the IG, and this one was the enforcement of the drinking law: "Laws and Enforcement: Is the 21-year-old Drinking Age a Myth?" And also available is a "Compendium of State Laws on Youth and Alcohol."

The report showed that, as it stands today, minimum drinking law is largely a myth. Two-thirds of the teens who drink, almost 7 million simply walk into a store, buy what they need, and there is no supervision. Therefore, the state laws, as they exist today, they are riddled with loopholes, they are riddled with laxity, and they are riddled with lip service.

The National Minimum Drinking Age Act of 1984 started out with five exceptions. While the Act prohibits the sale to minors, it says that public possession does not include possession for an established religious purpose, when accompanied by a parent or a guardian older than 21, for medical purposes as prescribed by a licensed medical professional, in private clubs or establishments, or when you are legally employed by a duly-licensed manufacturer, wholesaler or retailer.

These exemptions have become loopholes in some cases, and while states have the option to close these loopholes, many have not.

I will give you an example. In five states and the District of Columbia, purchase of alcoholic beverages by minors is not specifically illegal.

In 38 states, because of these loopholes, possession of alcohol by a minor is not specifically illegal.

In 21 states, because of these loopholes, consumption by minors is not specifically illegal.

And the worst of them all, in 44 states of this land, adolescents as early as 17 years of age in some states can sell and serve alcoholic beverages without any supervision, and the law allows that.

So I can tell you—let me be clear about one thing. Unenforcement of the law is not always due to lackadaisical attitudes on the part of the state and the local governments. Many states have absolute difficulty enforcing the law because of budget and staff restrictions, because of low priority to enforce the law, and the lack of Alcoholic Beverages Control Boards or ABC jurisdiction over minors.

Police also point out that parents do not like their children to be arrested for doing what everyone else does.

And one official, describing enforcement of alcohol law, said it is a no-win situation. And another commented, local police have another priority. Their priority is illegal drugs, and, therefore, they ignore alcohol as the most commonly-used drug in this country.

And, by and large, there are only nominal penalties against vendors and minors when the laws are violated. And while vendors may have fines or their licenses suspended, license revocation in this country is a rarity. Licenses have never been revoked unless they have been tied to drugs and/or to prostitution, but not for just selling to a minor.

And the penalties against the youth who violate the law are often not a deterrent. And even when strict penalties exist, the courts are lenient and they do not apply them.

The report not only listed such problems, but definitely it addressed numerous ways by which states in spite of these loopholes are doing the best they can.

In that sense, let me take a moment to share with you what some states are doing. The most important one is 27 states delay, suspend or revoke a driver's license when a young person is drinking or in illegal possession of alcohol. This is considered by experts to be the very most effective approach, if not the most effective approach today. Some require community service or enrollment in a treatment program. And 10 states ask for vendors to require a signed statement if they are doubtful of the legality of the person's identification. This has the benefit of protecting the vendor against penalties, and some states even require signed affidavits when they are not comfortable with the person's ID.

Sting operations have also been used. And education of vendors has helped to reduce sales to minors, too. Eleven states mandate training for vendors. Some other states encourage voluntary programs. However, because the vendors' turnover is so high, to be

able to implement this we have to make sure that management also attends these meetings in which they are trained.

Twenty-three states have civil liability or so-called dram shop laws, and they require lawsuits against persons who provide alcohol to minors. Only South Dakota, I am sorry to say, prohibits such suits.

In 1985, the American Bar Association recommended that all states enact statutes against persons who knowingly sell alcohol to minors. And, in 1985, the Federal government funded the development of a model dram shop law. This model dram shop law allows lawsuits for damages resulting from negligent alcohol sales to minors.

And one state official told us quite clearly, our dram shop law has made industry much more responsive, and you have to make the people empowered in order to effect the vendors' well-being. And for that, dram shop law seems to be a way to go.

On the same note, we are seeing over and over again the potential for the kind of tragedy that happened on the eastern shore in this last summer where Brian Ball got all he wanted to drink for \$3, and he took 26 shots of vodka and died two hours later. I can tell you—parties where underage drinking gets out of hand and no adult is held liable seem to be a problem in this land.

And I can tell you that 10 states have adopted what we call social host laws that hold the parent or the adult liable for any consequences of underage drinking on their property.

Officials have used other effective practices. They send letters to parents about the law. They have parents attend treatment or counseling. They have toll-free lines for complaints. Alabama issues press releases on the names of minors that were arrested for violations. Michigan makes sure that they do sting operations. And many states require notices to be posted listing the penalties for serving to minors and penalties for minors themselves.

This is creative, and this is valuable. At the Federal level we need to publicize such ideas. And, in fact, I have said repeatedly when you look into the 21 year law, these states are in the driver's seat for the closing of the loopholes. The Federal level can only take care of those ones that publicly use false identifications, but the states are the ones who are in the driving seat in everything else.

As a result of states' comments and concerns about the widespread availability of the false IDs, I have met with representatives from the Justice Department, from the FBI, from the Secret Service and from the Postal Service, not to mention the Department of Transportation, trying to see how can we start looking at ways by which the Federal level could help reduce the problems with false identification and with the mailing of false ID kits, which seem to be rampant in the country. And we have been told that anywhere you go you can buy these for at least \$12.

So, that being the case, on November 4 I released the final report, which is the one that deals with "Youth and Alcohol: Controlling Alcohol Advertising That Appeals to Youth."

Concern over alcohol advertising arises because most alcohol advertising goes beyond the one described—describing the specific

qualities of the beverage. It creates a glamorous, pleasurable image that may mislead the youth.

In September, 1991, a poll was done by the Wirthlin Group that showed that 73 percent of respondents in the United States agree that alcohol advertising is a major contributor to underage drinking. And this goes very much with the feeling by all older Americans that the industry is on the wrong track. Also, one of the reasons for which they felt that the industry was on the wrong track was that the alcohol ads target the youth. This finding bolsters the 1988 BATF poll in which 80 percent of the American respondents believe that alcohol advertising influences underage youth to drink alcoholic beverages.

I am very concerned. I am extremely concerned. I cannot help but think of the young people that I see every day that have been involved in accidents, and, really, looking to the way by which injuries really put them in total disadvantage, relevant to their peers. For me, that is devastating. And as I have said, the truth of the agony that drinking brings to youth is quite different from the fantasy and the fun that is depicted in the ads.

And let me be very clear. The kinds of ads that appeal to our young people are appealing to some degree to many of us. And, in that sense, it is different, because our young people in their search for identity, their doubts about their own popularity and their doubts about their own sexual attractiveness—in that awkward moment which is adolescence they are particularly vulnerable.

And that is the part that worries me, because, according to recent research, I can tell you that there are four types of ads that attract youth, and those are the ones that make lifestyle appeals, the ones that have sexual appeals, the ones that use sports figures in them which are heroes or heroines, and those where risky activities are depicted like there was no risk at all, when you do this particular one. Those are the ones where we have the skiing, the boating race, the one that goes into mountain climbing. Many people look at this and believe that it is okay to do this in the presence of drinking, without realizing that there are so many consequences attached to the risk.

The answers on how to limit advertising appeals to youth are not as simple as I suspected. There are many problems here. We found that when you look into the government and the industry control, it is a profoundly complicated problem, and probably, as you say, that is why not many people have gotten involved in the past.

But this is a time in which the Surgeon General is a public health official. She is a public health person, and for that it makes it a little bit more different, because we look into the problem with objectives, goals, time limits, and, most importantly, what is the problem and how to approach it in steps. That is what I have done all the time.

But I can tell you, not only do we have a fragmented and indirect control of the Federal and state level, but the existing voluntary guidelines of the industry are unenforceable as well.

In spite of this, several things are clear. First, we all have a role to play if we are going to solve this problem. And, most importantly, if we are truly committed, then we will make a difference, but if we are just speaking like we have spoken for many years in the

past, then the problem will continue, and then at the end of 20 years we will all be responsible for not having taken the window of opportunity.

Let me summarize the report's findings and tell you the key points. Federal jurisdiction is fragmented among several agencies, BATF, FTC, and even the FDA.

Federal regulations do not specifically prohibit alcohol ads that appeal to youth. The primary goal of BATF and FTC regulation on advertisement is to ensure that consumers receive truthful and accurate information about products.

And the BATF's enforcement authority is limited, because without state regulations that mirror the BATF regulations, BATF has no ability to regulate malt beverage labeling or advertising. Also, unlike vintners and distillers, brewers are not required to obtain permits from BATF, and, therefore, BATF lacks an important tool of enforcement.

States have difficulty adopting legislation to control alcohol advertising. And pressure on state legislators from vested interests can be barriers to regulating alcohol advertising.

And alcohol industry standards do not effectively restrict ads that appeal to youth, and they are unenforceable. They do not specifically address the types of ads the public is concerned about, and the codes are strictly voluntary.

The network enforcement is based on negotiation with advertisers. And while the networks negotiate with the advertisers over the standard, they must also attract advertising revenues to be able to stay in business.

A case study of five ads found that the current regulations and standards have not deterred advertisers from using the ads that appeal to youth.

So what are the solutions?

As you know, I had a press conference on the fourth of this month, and I called for the industry's voluntary elimination of alcohol advertising that appeals to youth on the basis of lifestyles, on the basis of sexual appeal, on the basis of sports figures, and on the basis of risky activities, as well as the advertising with the more blatant youth appeals of cartoon characters and those that have youth slang, absolutely so.

This requires action by all of us. As I said earlier, in order to win the war for the children, we must do away with mixed messages.

I have called upon the industry to voluntarily give up these kinds of ads, ideally by adhering to voluntary codes that are clear and workable, but practically by each manufacturer simply refusing to use these kind of ads.

I call upon states to continue their efforts to limit advertising, and I urge communities to provide the grass root support that makes such limits a reality. And I call upon communities generally to adopt and support creative prevention programs such as the one that I see in Roanoke, Virginia, which is excellent, and also Project STAR that I see in Kansas city.

I urge schools to make alcohol education a part of the curriculum from the earliest grades to college, and I can also tell you that the curriculum must include not only the teaching about alcohol but also teaching resistance education and risk avoidance techniques.

And finally, I urge families, the parents and the children, for once and for all, to talk about alcohol, talk to each other about the ads, and talk to each other about how to distinguish truth from fiction.

For my part, I have invited a small group of CEOs from the most important parts of the industry to meet privately with me to discuss what they can do to eliminate these ads and what we can do together to protect the health of the young people. I am pleased to say that their ready acceptance gives me hope that we might be on the right track.

In conclusion, let me thank Madam Chair, Mr. Johnson and Congressman Wolf for having given me this opportunity to tell you today what I am doing regarding underage drinking. I can tell you that only through the efforts of you, the schools, the parents, the communities, the industry—throughout the country—is the only way in which we will find lasting ways by which we can solve this problem, because we are not only saving the lives of kids, but the quality of those lives, and I believe that today that is the most precious thing that we have to look forward to, the protection of the children.

Thank you very much.

[Prepared statement of Antonia C. Novello, M.D., M.P.H., follows:]

PREPARED STATEMENT OF ANTONIA C. NOVELLO, M.D., M.P.H., SURGEON GENERAL,
U.S. PUBLIC HEALTH SERVICE, DEPARTMENT OF HEALTH AND HUMAN SERVICES,
WASHINGTON, DC

- o Good morning, Madame Chairman. Thank you very much for inviting me. I'm pleased to have the opportunity to talk to you about underage drinking -- and what I have found to be its key issues and potential solutions.
- o I have been working in this issue since September, 1990, when I launched what I now realize was a "fact finding" mission on my part. I toured the country talking to community leaders, to teachers, to kids about the problem of underage drinking.
- o What I learned in that month has served me well -- and certainly underscores the basis of all our teen drinking prevention efforts. That is, prevention works best if the message the young person gets at home is the one he gets at school, and is the one reinforced by his community and his peers.

If this clear and consistent message can't be provided, second best is to have clear and consistent messages from the parents, reinforced by messages in school.

- o I also began to learn then -- and I relearn it every time I look at this issue -- how pervasive underage drinking is, and how it is truly the mainstream drug used that plagues most communities and families.
- o I began to learn then - and relearn every day -- how pervasive also are the mixed messages we send to our children about alcohol. I agree with Assistant Secretary for Health Dr. James Mason when he says we've made progress in the illicit drug war because our youth have gotten consistent messages from their families, their schools, their communities, their nation -- and their media -- regarding the consequences of getting involved with drugs.

We're losing the war on underage drinking, however because we are allowing mixed messages to go on. Our health message is clear -- "use of alcohol by young people can lead to serious health consequences far beyond those well-known about drinking and driving -- absenteeism, vandalism, date rape, truancy, theft and random violence." But that message directly conflicts with the enticing drum beat of ads saying, "drink me and you will be cool. Drink me and you will be glamorous. Drink me and you will have fun!"

- o Since September 1990, I have conducted a carefully thought-out campaign against underage drinking that recently culminated in the invaluable series of reports done for me by HHS Inspector General.

Prior to these reports, the first set of which were released in June, 1991, I took the following steps to bring the issue of underage drinking to the American public:

- In the fall of 1990; I helped launch the Office of Substance Abuse Prevention "Piensalo!" alcohol prevention campaign targeted to Hispanic youth, and held a press conference drawing attention to Halloween advertising used by the alcohol industry. I regret to add that, although my most recent press conference on alcohol advertising occurred after Halloween this year, brewers still ran Halloween campaigns with the likes of Elvira and others quite similar to last year.
- January, 1991; I hold a press conference on Cisco, calling for repackaging of this fortified wine that looked like a wine cooler and had been responsible for quite a number of problems.
- In Spring, 1991, I held a press conference on Spring Break promotional activities and college drinking. Since then Treasury's Bureau of Alcohol, Tobacco, and Firearms has asked for my help and the help of the Public Health Service in assessing current research on the effectiveness of the current warning label.

I. Then, in June, 1991, I released the first set of reports from Inspector General Richard Kusserow -- Youth and Alcohol: Drinking Habits, Access, Attitudes and Knowledge and Do They Know What They Are Drinking?

These studies showed that:

- At least 8 million American teenagers use alcohol every week, and almost half a million go on a weekly binge (or 5 drinks in a row) -- confirming earlier surveys by the National Institute on Drug Abuse.
- Junior and senior high school students drink every year, 35 percent of all wine coolers sold in the U.S. (31 million gallons) and 1.1 billion cans of beer (102 million gallons).
- Many teenagers as many as 4 million of those who drink are using alcohol to handle stress and boredom. And many of them drink alone, breaking the old stereotype of party drinking.
- Labeling is a big problem. Two out of three teenagers cannot distinguish alcoholic from non-alcoholic beverages because they appear similar on store shelves.

- The idea of "designated driver" isn't enough -- Although 92 percent of them know that drinking and driving is wrong, 6.8 million teenagers are still riding with drivers who have been drinking.
- Teenagers lack essential knowledge about alcohol. Very few are getting clear and reliable information about alcohol and its effects. They don't know:
 - Minimum Age: 5.6 million teenagers do not know the minimum legal age for purchasing alcohol or worse still, almost 2 million do not even know a law exists.
 - Alcohol's Intoxicating Effects: 2.6 million teenagers don't know that a person can die from an overdose of alcohol. 1/3 believe that coffee, taking a cold shower, or getting fresh air can "sober you up."
 - Relative Strengths/Equivalencies: This is a hard one on my ego, given that I've been hammering on this one for a year -- but 80% of these teenagers do not know that a can of beer has the same amount of alcohol as a shot of whiskey! And 55% do not know that a can of beer has the same amount of alcohol as a glass of wine!
 - Two thirds of teenagers who drink or an equivalent of 7 million are able to walk into a store and buy their own alcohol (often without being asked to show an I.D.). Our laws are obviously not working.
- And we learned that, because of the 1935 Federal Alcohol Administration Act, it is against the law for beer and malt beverages to carry alcohol content on their labels!

As a result of this first set of reports, I took the following action:

- I established a small, internal task force on alcohol labeling composed of policy and staff officials from HHS, Treasury (BATF), and the FTC.
- The purpose of the task force is to formulate recommendations regarding clearer alcohol content labeling on all alcoholic beverages, including beer and wine coolers.

- II. In September, 1991, we released the second set of IG reports, this one on enforcement of underage drinking laws called, Laws and Enforcement: Is the 21 year -old Drinking Age a Myth? Also available is a Compendium of State Laws on Youth and Alcohol.

This report showed that:

- As it stands today the federally-mandated 21-year old minimum drinking law is largely a myth. Two-thirds of teens who drink, almost 7 million, simply walk into a store and buy alcohol. State laws, allow this because they "are riddled with loopholes, laxity, and lip service."
- The National Minimum Drinking Age Act of 1984 started out with five exemptions. While the act prohibits sales to minors it says that "public possession" does not include:
 - for an established religious purpose
 - when accompanied by a parent, spouse, or legal guardian age 21 or older
 - medical purposes when prescribed or administered by a licensed medical professional or institution
 - in private clubs or establishments, and
 - in the course of lawful employment by a duly licensed manufacturer, wholesaler, or retailer.

These exemptions have become loopholes in some cases, and while states have the option to close these loopholes, many have not. For example,

- In five states and the District of Columbia, purchase of alcoholic beverage by minors is not specifically illegal.
- In 38 states, because of exceptions to the law, possession of alcohol by minors is not specifically illegal.
- In 21 states, consumption by minors is not specifically illegal.
- And in 44 states, minors themselves can sell and serve alcoholic beverages, without adult supervisors.

But let me be clear about one thing. The unenforcement of the law is not always due to lackadaisical attitudes on the part of state and local governments. Many States have difficulty enforcing these laws because of budget and staff restrictions, low priority to enforce these laws, and lack of Alcoholic Beverages Control Board or "ABC" jurisdiction over minors.

Police also point out that parents do not like their children arrested for "doing what everyone else does." One official described enforcement of alcohol laws as "a no-win" situation. And another commented, "Local police have another priority -- [illicit] drugs. They ignore alcohol."

And by and large, there are only nominal penalties against vendors and minors when they violate these laws. While vendors may have fines or their licenses suspended, license revocations are rare unless there is prostitution or illegal drugs tied to it. The penalties against the youth who violate the laws are often not deterrents. Even when strict penalties exist, courts are lenient and do not apply them.

The report not only listed such problems, but identified innovative ways in which states and localities in spite of the loopholes, the key actors here -- have addressed them. Let me take a moment and share with you some of the more innovative ways states have grappled with these enforcement issues.

- Twenty-seven states delay, suspend, or revoke a driver's license when a young person is drinking or in illegal possession of alcohol. This is considered by experts to be a very effective approach, if not the most effective approach, to this problem.
- Some require community service or enrollment in a treatment or counseling program. Ten States ask vendors to require a signed statement if they are doubtful about the legality of the person's identification -- this has the benefit of protecting the vendor against penalties, and some states even require signed affidavits from the minors themselves.
- Sting operations have also been used. These operations consist of sending minors into stores and restaurants to purchase alcohol. If the employee sells alcohol to the minor, an undercover agent will cite or arrest the employee and/or vendor.
- Education of vendors has helped to reduce sales to minors. Eleven States mandate such training for vendors; some other States encourage voluntary

programs. However, the turnover in staff in vendor establishments lessens the effectiveness of this training if management does not also participate.

- Twenty-three States have civil liability or "dram shop" laws which are key. These laws allow lawsuits against persons who provide alcohol to minors. Only South Dakota, prohibits such suits. In 1985, the American Bar Association recommended that all States enact statutes to allow lawsuits against persons who knowingly sell alcohol to minors.

And in 1985, the Federal government funded the development of a model dram shop law. This model law allows lawsuits for damages resulting from negligent alcohol sales to minors. One state official told us quite clearly, "our dram-shop laws have made industry more responsive. You have to empower the people to affect vendors' well-being."

- On the same note, we are seeing over and over again the potential for the kind of tragedy that occurred recently on Maryland's eastern shore where Brian Bali, 15 years old, drank 26 shots of vodka at an "all you can drink" party and died two days later -- parties where underage drinking gets out of hand, and no adult is held liable. Ten states have adopted so-called "social host" laws that hold the host adult or parent liable for any consequences of underage drinking on their property.
- Officials have other effective practices including sending letters to parents about the law; having parents attend treatment or counseling with their child; and toll-free numbers for complaints. Alabama issues press releases with the names of minors arrested for alcohol violations. Michigan publishes the results of vendor sting operations. Many States require that notices be posted listing penalties for serving to minors and penalties for minors themselves. These creative approaches are valuable. At the Federal level, we need to publicize such ideas so that states can adopt them if appropriate to their jurisdictions.

In fact, as I have said repeatedly, the states are in the driver's seat when it comes to implementing and enforcing the law. We at the Federal level can do all the talking and publicity of these problems all we want, but the states are the key actors here.

As a result of States' comments and concerns about the widespread availability of false IDs, however, I met

representatives from the Department of Justice, the FBI, the Postal Service, the Secret Service and Transportation to start looking at ways in which we at the Federal level could help reduce problems with false IDs. We are looking into this.

III. Finally, on November 4, I released the Inspector General's final report entitled, Youth and Alcohol: Controlling Alcohol Advertising That Appeals to Youth.

- o Concern over alcohol advertising arises because much alcohol advertising goes beyond describing the specific qualities of the beverage. It creates a glamorous, pleasurable image that may mislead youth about alcohol.

In a September, 1991 poll done by the Wirthlin Group, fully 73 percent of respondents agree that alcohol advertising is a major contributor to underage drinking. Additionally, the majority of Americans think the alcohol industry is "on the wrong track," with one of the reasons being that alcohol "ads target the young." This finding bolsters a 1988 BATF poll in which 80 percent of respondents believe that alcohol advertising influences underage youth to drink alcoholic beverages.

- o I am deeply concerned. I cannot help but think of the young people whose bodies are broken, their lives ruined by injuries related to their own or others' drinking. That is devastating -- and, as I have said, it is a truth quite far from the fantasy and fun depicted in many of these ads.

And let me be very clear. The kinds of ads that appeal to our young people are appealing to some degree to all of us, but our young people, in their search for identity, their doubts about their own popularity and sexual attractiveness, are particularly vulnerable. And that is the part that worries me. According to current research, youth are attracted to ads that:

- make lifestyle appeals -- with attractive models, imaginary peers, and attractive lifestyles to emulate.
- make sexual appeals
- use sports figures -- who usually are youth heroes.
- show risky activities such as skiing, boating, race car driving, mountain climbing -- leading

many people, particularly young people, to think that it is acceptable for people to drink and participate in that activity, and worse, that there are no consequences.

- o The answers on how to limit alcohol advertising's appeal to youth are not as simple as I suspected. Instead, what we found in looking at governmental and industry control, is a profoundly complicated problem. Not only do we have fragmented and indirect controls at the Federal and state level, but the existing voluntary guidelines of the industry are unenforceable as well.
- o In spite of this, several things are clear. First, we all have a role to play in solving this problem. And secondly, if we are truly committed by working together, we can solve it.

Let me briefly summarize the report's key findings to provide some indication of where to start looking for solutions:

- o Federal jurisdiction is fragmented among several agencies -- the Bureau of Alcohol, Tobacco and Firearms (BATF), the Food and Drug Administration (FDA), and the Federal Trade Commission (FTC).
- o Federal regulations do not specifically prohibit alcohol ads that appeal to youth: The primary goal of the BATF and FTC regulations on advertising is to ensure that consumers receive truthful and accurate information about products.
- o The BATF's enforcement authority is limited: Without State regulations that mirror BATF's regulations, BATF has no ability to regulate malt beverage labeling or advertising. Also, unlike vintners and distillers, brewers are not required to obtain permits from BATF. Therefore, BATF lacks an important enforcement tool.
- o States have difficulty adopting legislation to control alcohol advertising: Pressures on State legislators from vested interests can be a barrier to regulating alcohol advertising.
- o Alcohol industry standards do not effectively restrict ads that appeal to youth and they are unenforceable: They do not specifically address the types of ads the public is concerned about, and the codes are strictly voluntary.

- o Network enforcement is based on negotiation with advertisers: While the networks negotiate with advertisers over their standards, they must also attract advertising revenues to stay in business.
- o A case study of five ads found that these current regulations and standards have not deterred advertisers from using ads that appeal to youth.

And what are the solutions?

As you know, at the November 4th press conference, I called for industry's voluntary elimination of alcohol advertising that appeals to youth on the basis of lifestyle appeals, sexual appeal, sports figures, or risky activities, as well as advertising with the more blatant youth appeals of cartoon characters and youth slang.

This requires action by all of us. As I said earlier, in order to win this war for our children, we must do away with mixed messages.

I have called upon the industry to voluntarily give up these kinds of ads -- ideally by adhering to voluntary codes that are clear and workable, but practically, by each manufacturer simply refusing to use these kinds of ads.

I called upon States to continue their efforts to limit youth appeals in advertising, and I urged communities to provide the grassroots support that makes such limits a reality. And I called upon communities generally to adopt and support creative prevention programs such as the one in Roanoke or Project STAR in Kansas City.

I urged schools to make alcohol education a central part of the health curriculum from the earliest grades all the way through college and I must add, this curriculum must include teaching resistance education and risk avoidance techniques.

And, finally, I urged families -- parents and children -- to talk to each other about alcohol, about these ads, about distinguishing truth from fiction.

For my part, I have invited a small, representative group of CEO's from all segments of the alcohol industry to meet privately with me to discuss what they can do to eliminate these ads and what we can do to work together to protect the health of our young people. I am pleased to say their ready acceptances of my invitation give me confidence that we can make progress.

In conclusion, let me thank you, Madame Chairperson, and the members of the Committee for the opportunity to speak to you today about such a pervasive and compelling problem. It is through your efforts, and those of committed parents, schools, communities, and governments throughout this country that we will find and institute lasting solutions that save the lives -- and the quality of those lives -- of our Nation's most precious resource, our young people.

Chairwoman SCHROEDER. Thank you so much. Again, we really, really appreciate your courage and your leadership in this.

Let me yield first to Congressman Johnson.

Mr. JOHNSON. Thank you, Madam Chair.

Have you shared some of your proposals and recommendations with the Secretary of Education? Has all Federal bureaucracy itself got its act together in terms of working towards a strategy where the Secretary of Education, for instance, could be promoting changes in the curriculum and helping to assist with school districts to develop the resources they need? Or is this an issue that to this point largely is over here in your shop?

Dr. NOVELLO. I think your question is excellent, and one of the things that happened the moment that I sent the first report out of these five was that the Department of Education absolutely became part of it. Because one of the data that we found is that 33 percent of the revenues of school papers are paid by the industry, and when that is the case, I want to make sure that there is something in the college that is happening that takes the information from the education part. I have gotten very good responses from the Department of Education, absolutely.

Mr. JOHNSON. Subsequent to your press conference, which has been recent, I appreciate, has there been any response from the industry, other than for the agreement of some of the CEOs to meet with you?

Dr. NOVELLO. I can tell you that I have gotten calls from members of the industry, and when I requested the meeting, somewhere along the way there was this doubt if this would be something that they would agree to. I can tell you I was so pleased, 24 hours after the letter must have been received, they were all accepting the invitation.

It seems to me if you open dialogue within the business community you can bring the problem forth, without having to tell them what to do, and that is why I think that this meeting is key.

Mr. JOHNSON. Is this problem of adolescent alcohol abuse somewhat unique to the United States? There are other countries that don't have the network of laws and restrictions that we—on youthful alcohol consumption in Europe and so on. Is there something unique about the United States that lends itself, despite all the restrictions and the laws we have, to the continuing abuse of alcohol?

Dr. NOVELLO. I will answer your question in two parts.

It seems to me that the United States has a problem with underage drinking, but it is not just the United States. Obviously, it is happening in many countries, and it is in such quantity that 28 countries have decided to put their data together and bring it as a report that will be available in the spring of 1992, suggesting that they also want to look into this in a very cohesive way, so that is good.

Here is my biggest problem—my perception is that this is a rite of passage. The public perception of the problem, perhaps, has not allowed a workable solution for so long, and simply because it exists does not mean that it has to continue.

And perhaps this might be the first time where we are going to look into something that might have a grasp not only on the kids but also in the community. Maybe because we are in this, Con-

gressman Johnson, is that when we blame—when we talk about responsible drinking, does that mean that the one who drinks only is irresponsible?

And in that sense I believe that the problem has to be attacked from so many angles, the parents, the media, the group, the community, even the industry. I don't want the kid to believe that he or she alone is part of the behavior without some of us directly or indirectly helping in making them do this.

Mr. JOHNSON. Have there been efforts to quantify or to in some way evaluate the effectiveness of the various initiatives that you have outlined that some of the states have taken, the driver's license revocation, the community service or counseling program, the sting operations, the vendor education programs? These are all interesting things, but has there been any effort to evaluate their relative effectiveness?

Dr. NOVELLO. When we did our last report, we had a guideline for states, just to look to see what they were doing, all the things that we found, but we also have to give it to the states. This is perhaps the first time where they have been told the problems of their state as it is similar or dissimilar to the other states, and this has just been recently. So I figure that I have to follow these more closely.

The good part is that in spite of all the loopholes and the consequences of whatever they call, either the resources or the people resources, states are doing something about it, and in some cases very good things about it in spite of the odds. But I think we need this across the board, more than just a few, because the problem is too rampant.

Mr. JOHNSON. Would it be possible to formulate model state legislation that the states could draw from where we take the best of what the states have done and give them a laundry list of options? Certainly Federal legislation is a possibility as well, but in the meantime I think you are doing a positive job of helping to educate the states about what other states are doing but, nonetheless, provide them with some model legislation that they can draw from.

Dr. NOVELLO. I will make sure that I follow the public health issue. When it comes to the model legislation, this is why I think that the key is not the states, but the key will be you. And at least the awareness that the problem is so vast. It is something I bring forth in the hearing to see what can be done from your perspective.

But, absolutely, we will need the states to realize that in some cases the loopholes are too rampant, where they were allowed just to be exceptions to the law.

Mr. JOHNSON. Thank you. I appreciate your testimony today. I think it is a very positive contribution.

I yield back.

Chairwoman SCHROEDER. Thank you.

Congressman Wolf.

Mr. WOLF. Thank you.

I want to welcome you, Dr. Novello, and commend you, because I know that this is a very tough issue, and I know that a lot of people in the administration, in Congress, or whatever would rather not take up this issue. These are tough issues, and I do

think it is important that you speak out. So I want to commend you on that.

Let me ask you a couple of questions. Is teenage drinking up or down?

Dr. NOVELLO. It depends on the eyes of the beholder.

Mr. WOLF. Compared to say 20 years ago.

Dr. NOVELLO. When one looks into the survey of the high schools and when one looks into the drug use in America, one realizes that teenage drinking might be diminished more if one looks into the last ten years.

Where it seems not to go down is binge drinking, the drinking of five drinks in a row, and that is not as diminished as we would like.

Mr. WOLF. So then, would you say binge drinking has gone up?

Dr. NOVELLO. It has not stabilized as much as the other drinking, if at all, has not dropped. In that case it is five drinks one after the other.

Mr. WOLF. What do you mean by five drinks?

Dr. NOVELLO. Five drinks one right after the other. This stereotype happens to be something that we don't think about as either a minority or anyone that is poor. That is not the case.

The study showed that the average binge drinker in the United States is 16 years old, is white, is a male and is in the 10th grade. And he takes as much as six drinks in a row. That is the majority.

There is a minority that is 16, that is white, that is male, that is in the 11th grade and takes 16 drinks in a row. So this is a little bit, much more—it really worries me tremendously to get this information out there.

Mr. WOLF. So the average is in the 10th grade?

Dr. NOVELLO. Yes.

Mr. WOLF. Is it leveling off because it has reached a saturation point? For example, a sponge can only hold so much—you can pour more water on the sponge, but it can only hold so much. Do you think it is leveling off because good things are happening, or do you think the problem has reached the saturation level and can't get much worse?

Dr. NOVELLO. I think perhaps the problem is bigger, but it is not perceived as a problem, because, importantly enough, alcohol is not perceived as a drug. So when you look into this, perhaps not even the questions that are adequate are asked relevant to alcohol.

But one thing that was really striking in the report was the kids told me—my first drink, I took it—the study was done between the 7th grade and the 12th grade. Two twelfth graders told me, my first drink I took in a party. The seventh graders told me, my first drink I took it with my parents home with their knowledge or without their knowledge. And sometimes the first drink was taken in the sixth grade.

Maybe as we address this issue, we will realize that it is more rampant, and once we recognize it, we might be able to do something about it. So perhaps the saturation is when you have had too much. The statistics may just be what we find, but not the reality.

Mr. WOLF. What state is doing the best job? If you had to choose one state that you think is doing the very best job, what state would that be?

Dr. NOVELLO. I have asked myself that question many times, and there is not one in particular one can pick out. But there is one program, and I am not telling you because it is Virginia, but there is one program that makes a difference and that is Roanoke, Virginia.

Mr. WOLF. Could you give the committee or our office a copy of the Roanoke Program? What does the Roanoke Program offer?

Dr. NOVELLO. Roanoke apparently had many drastic problems with alcohol, and for the last ten years there has not been a death in Roanoke Valley secondary to drinking, because the community from the Sheriff's Department to the parents' group to the legislation to the schools got together and decided this has to stop. So they found ways by which the kids find fun without drinking and then they get remunerated for that, and that has been a ten year program.

And I sent that myself to the White House to say if you think this is a point of light, then this should be a complete city full of lights because of what they have accomplished.

Mr. WOLF. In Fairfax County we now have the all-night alcohol free graduation parties, and I heard one of the people who organizes these parties talking about a program somewhere in the country where children get credits that they can use in stores. Is that the Roanoke program?

Dr. NOVELLO. The Roanoke program took that from the ones that we find sometimes in places like Miami and places like in Texas. The issue is, sometimes what we have to use is, peer pressure to make them feel good about what they are doing.

And in this particular one they have an ID, and this ID means that when you go to a place and you buy a hamburger and you pay \$1.95 and your next door kid pays 55 cents, it means that there is a show that you are not taking alcoholic beverages, and therefore there are benefits to have the ID.

So the kids get remunerated in what he or she likes. Movies, they are cheaper. Tennis shoes get cheaper. Jogging suits, cheaper. Popcorn gets cheaper. Soda gets cheaper. So it is almost something like, hey, I have something that shows that I am okay. And Roanoke picked that up. Maybe just something that comes with an ID, silent remuneration, when one pays more than another in the same line, it gives you a hint.

Mr. WOLF. I would appreciate it if you could get somebody to come by my office on Monday and drop off that material. I would like to take a look at the program for Northern Virginia, Fairfax, Arlington, Loudoun, and maybe write a letter to all the board of supervisors. We have just had a change in Fairfax County and the new board would perhaps be willing to take a look at the program. So if you could have somebody do that, I would appreciate it.

Dr. NOVELLO. I will.

Mr. WOLF. To followup on Congressman Johnson's question, which country is the best? Is there any country that you think has the least amount of trouble? Maybe it is because of demographics—urban, suburban or rural. Is there any country around the world that is doing very well? I know there are a lot that have problems.

Dr. NOVELLO. The 28 countries that have gotten together because they have a problem, most of them seem to be northern Europe.

But at this moment I have the feeling that the problem does not exempt one country in particular.

But the issue in this, more importantly, is that perhaps the perception in some countries is better, and when we did our analysis, there were 10 million kids who drank and 10 million who did not drink. The ones who did not drink, the difference was simple. The parents taught them the consequences, and they told them where, when and how much. The schools had a curriculum, absolutely, and the media took the message out there in a very comprehensive way. That made a difference between 10 million drinkers and 10 million nondrinkers right here in the United States in their youth. And so maybe that is what we should just be able to expand.

Mr. WOLF. The role of parents, schools.

Dr. NOVELLO. And the media.

Mr. WOLF. And media.

Dr. NOVELLO. Yes.

Mr. WOLF. Did you say BATF is supportive or helpful?

Dr. NOVELLO. Oh, yes. And the FTC, too. Chairman Steiger has been supremely supportive.

Mr. WOLF. Are you optimistic that your meeting with the CEOs will lead to changes in the advertisements?

Dr. NOVELLO. I have to be positive. A positive attitude is going to help you. And the mere notion that they responded back in 24 hours makes me feel that something will be accomplished. Maybe, as they have told me, the industry has told me, this is perhaps one of the first times that they have been called to the table to talk about this, rather than being told what to do, and I believe maybe the way women do politics, but let's bargain.

Mr. WOLF. I believe they should be very sensitive and ought to be interested in this issue.

Do you have a comment, or does the administration have a position on the pending Thurmond/Kennedy legislation?

Dr. NOVELLO. At this stage of the game, I have not looked into this in detail, but the mere notion that it seems to focus on underage is tremendous.

Mr. WOLF. I want to thank you and commend you. The more you can do on a voluntary basis the better. It is an important issue, and I do want to commend you for taking it on.

This town is loaded with land mines. I know people don't generally go where there may be problems, and it is easy to go to the fluff area. But I do commend you because there will be a time when you won't be the Surgeon General, when you will be sitting with your husband when you are 65, and saying gee, you know, when I, 40 years ago, was Surgeon General, if I had only—

Chairwoman SCHROEDER. What a politician.

Mr. WOLF [continuing]. If I had only tried this, I think I could have been successful. But no, I was afraid of what this group or that group would say, or I was afraid of failure, and therefore I didn't try.

So I do really commend you. I think underage drinking is a very difficult issue, and it is a very, very important one. There are probably few that have had a greater impact with regard to young kids and alcoholism, and I commend you for calling in the CEOs.

If you can do it on a voluntary basis with a spirit of reconciliation, you can bring all sides together. My sense is that the CEOs would certainly be interested, knowing that you are as sincere as you are, to try to fashion something and to work it out.

Again, if I could ask you to have somebody bring by information on the Roanoke program, I will mail a copy to all the school boards in Northern Virginia and to all the elected officials in Loudoun, Fairfax, Arlington, Prince Williams, Falls Church, City of Falls Church, and City of Fairfax, asking them to look at it and maybe suggesting a Northern Virginia regional approach, perhaps it could be worked. Thank you very much.

I thank the Chairwoman for holding the hearing.

Chairwoman SCHROEDER. Thank you.

I wanted to ask, in your IG report, you pointed out that about a third of the people who drank wine coolers were teens, and many of these were young women, is that right?

Dr. NOVELLO. Yes.

Chairwoman SCHROEDER. One of the things that you pointed out was the incongruent labeling. Because of that 1935 law, there is no labeling out there at all.

One of the things that seems to slow young girls down is labeling on calories and other such things. Do you think that that would make any difference in the wine cooler area, if we had a different kind of labeling law on that or any other thing?

Dr. NOVELLO. Two issues came out of that. The most important one is that I didn't know that since 1935 this country did not label malt liquor or beer then because it was felt that it would entice you to drink.

But the consumer of 1935 is not the consumer of 1991. So if you really have a law and you want to know what power is in there, I think people need to know what is in the thing that they drink.

But most importantly, my worry is, and to my amazement and to my surprise, two out of three kids could not identify if it was alcoholic versus nonalcoholic, just by the way it appears in the shelves. But the ones that did not touch the alcohol, they said I saw the Surgeon General's warning. I don't know what is wrong with it, but something must be wrong with it.

So if that is the case, the kid's perception of seeing a warning was more important than reading the label, because it either was confusing, it was either going down instead of up, or it is either the same color of what the brand was.

So this is why we said, well, at this stage of the game we have to make sure that we look into labeling as a way by which the kids respond to this, and—or how do we address that? We have gone so long without labeling of malt liquor and beer, and that is when Powermaster came. And when Powermaster came, one of the issues that we realize, for every time you drink one of those Powermasters, you could be drinking as much as three beers when you think you are drinking one.

And that is why we have to get the information to the American consumer. 1935 and 1991 are decades apart as far as I am concerned, as far as what we have done in labeling.

Chairwoman SCHROEDER. Coors in Colorado sued to try to be able to label. Isn't that amazing? You are asking to please give them

permission, and so far I think they have been losing in the court. I do find that an incredible omission.

I never realized that we didn't label. I guess the thought was, in 1935, if there were labeling people would buy the highest alcohol content?

Dr. NOVELLO. They assume that in some cases, people will buy the highest number of alcohol content. And sometimes that is really disrespectful for the consumers' mentality of today which know so many risks.

But even though we tried to ban Cisco, because it was looking like a wine cooler, we were told if you remove it from the shelves, many people will go and buy it, perhaps in the first month, just to see what the product was. Some people went for it. And absolutely not.

And even more so now with the last report of the Commission of the President for AIDS that said that the last four adolescents that contracted AIDS did so because they were drunk with Cisco and forgot to take precautions, so everything turns around.

Chairwoman SCHROEDER. But I just found the labeling so shocking in an era where people are so desirous of that kind of information. I also found in your report the most shocking photographs, that one. I suppose it is because I don't go shop for this type of thing. Isn't that amazing?

When you say teens can't tell the difference—well, I couldn't tell the difference. I mean, that is all there to make it look like it is soda pop. Even the big plastic bottle. It even said that grain alcohol was used in some of these. And that is legal in some states?

Dr. NOVELLO. Yes, and the sad part about it is that when you look into grain alcohol or when you look into wine coolers, there are two jurisdictions, one is FDA, because it is less than 7 percent alcohol, and when it is grain alcohol, it is BATF.

So even in our jurisdiction, trying to do the best, it is confusing. On top of that, if you saw there is a bottle that looks like that jug, you should be able to drink that kind of water.

Chairwoman SCHROEDER. It makes it all look like it is fruit juice, that it is just this happy little fruit juice. Isn't that an amazing photograph? I mean, it is not just teens. I think almost any consumer would walk in and look at that.

Dr. NOVELLO. Some of the kids told us, Madam Chairman, that—remember the law found that 7 million buy over the counter without any supervision, and 3.5 million of them are on the other side selling. So what they do is they take these four little containers and in the front they put the two juices and in the back they put the two wine coolers. So when the person in the counter just checks, he sees the juice, he lets them go. But they already have two wine coolers in the back, because even the person behind the counter does not even know by the way they look if they are or not.

Chairwoman SCHROEDER. So they just mix them all up. It is a wonderful example. So labeling is something we might be able to look at at the national level, but you probably want to wait until you talk to CEOs? I mean you are not requesting that right at the moment.

Dr. NOVELLO. No.

Chairwoman SCHROEDER. That might come out of your meeting. When is this meeting going to happen?

Dr. NOVELLO. December 11th. December 11.

Chairwoman SCHROEDER. That is one of the things I hope you let us know if there are recommendations that come out of there, because the committee would like to be very, very helpful in any way we can. I think another thing that could be helpful that we as parents all do, if we see the members of the industry who aren't targeting kids and who do comply with some of the things you are saying, I think we ought to start printing the good guy list because we could buy from the good guys and not the others.

That may be an indirect way we do it without the heavy hand of the law, request people buy from those honoring this.

I will tell you when you look at that picture, there are some bad apples there. It is very clear what they are trying to do. It is to deceive and slip it through.

I want to thank you so much for being here.

Do you have any more questions?

We are going to keep the record open for two weeks so that, if anyone has anything that they would like to add, subtract, multiply or divide, let us know.

I do think your point—and you can say this as a doctor, that doing this—when you overdo it, it is like turning your body into a chemical waste dump. If you like the Love Canal, you will love binge drinking. I think you can say that with such authority, and I am so pleased you are saying it with such authority.

I think the binge drinking is very frightening, and the isolated drinking is very frightening. I think when you look at young people, they are getting habits they will have for the rest of their life.

This incredible oversight, I think you are picking it up. Anything any of us can do? With that, you are right on target. You never thought we would get out on time, but see what women can do. Thank you very, very much. The hearing is adjourned.

[Whereupon, at 12:30 p.m., the select committee was adjourned.]

[Material submitted for inclusion in the record follows:]

PREPARED STATEMENT OF JOHN E. CALFEE, ASSOCIATE PROFESSOR OF MARKETING,
SCHOOL OF MANAGEMENT, BOSTON UNIVERSITY, BOSTON, MA

On November 15, 1991, Surgeon General Antonio Novello testified before the Select Committee on Children, Youth and Families, on the subject of alcohol advertising and underage drinking. The bulk of this testimony was drawn from a recent report, "Youth and Alcohol: Controlling Alcohol Advertising That Appeals to Youth," which was produced at the request of the Surgeon General by the Office of the Inspector General in the Department of Health and Human Service.¹ I myself was recently invited to testify as a marketing expert in the November 21, 1991 FTC oversight hearings before the Subcommittee on Transportation and Hazardous Materials. Because one topic in these hearings was the effects of alcohol advertising on young persons, I reviewed the HHS report presented by the Surgeon General while preparing for my testimony (Calfée 1991). I would like to present here a more detailed assessment of the HHS report.

The November 1991 HHS report is the latest in a series of HHS reports on the problems of youth drinking.² Unlike the earlier reports, this one focuses on advertising and promotion, with emphasis on the question of whether certain ads may target youth and even cause young persons to drink illegally or inappropriately.

¹ U.S. Department of Health and Human Services (1991e).

² Earlier reports are listed in the references section as U.S. Department of Health and Human Service: (1991a through 1991d).

This report is notable – and regrettable – in two respects, both of which tend to divert attention from constructive approaches to the problems of alcohol abuse. First, the report deplores events in the beer market without noting the dominant trends in that market. If advertising and promotion were having the effect the Surgeon General obviously fears, we would expect to observe regular increases in beer consumption, in underage drinking, and in the number of people losing their lives to accidents involving alcohol. The best available data, however, paint a much different picture. Per capita beer consumption in 1988 was almost exactly what it was in 1976, despite an increase of approximately 100% in advertising between 1976 and 1988 (source: Beer Institute). Survey data from the National Institute of Drug Abuse indicate that the percent of high school seniors who consumed alcohol during the previous month has declined steadily from 72% in 1980 to 57% in 1990. This percentage is now much lower than it was in 1975, despite fifteen years of the kind of advertising that is (incorrectly) believed to encourage underage drinking. Finally, the percentage of drivers involved in fatal automobile accidents with a blood alcohol level greater than .10% has declined from 45.5% in 1980 to 38.1% in 1990 (National Highway Traffic Safety Administration, as cited in *USA Today*, Nov. 15, 1991). Even if no other information were available, these numbers alone should cause us to wonder whether alcohol advertising is a significant force in the drinking behavior of young persons.

Looking beyond simple trend data, a great deal of additional information is available in the form of academic research on the effects of advertising. The highly selective manner in which the HHS report drew on this research is a second notable, and equally disappointing, aspect of that report. In particular, the report omits reference to the two most authoritative available reviews of the literature on alcohol advertising and consumption, one emanating from the Federal Trade Commission (FTC 1985) and the other from the Addiction Research Center, which is funded by the Canadian province of Ontario (Smart 1988). The FTC staff review (1985) concluded that there is "no reliable basis to conclude that alcohol advertising significantly affects consumption," a view that is echoed by the Canadian report, which states, "total advertising expenditures have no reliable correlation with sales of alcohol beverages," and "in general, the evidence indicates little impact of alcohol advertising on alcohol sales or drinking" (Smart 1988, abstract).

Without relying upon or even acknowledging this body of research, the HHS report strongly suggests to the reader that alcohol advertising has a powerful effect on youth drinking. In promoting this inference, the HHS

report cites highly questionable sources. For example, the reports emphasizes national surveys on consumer opinion about the effects of advertising on youth. This is not a reasonable way to decide scientific matters; it is like relying on a Gallup poll to determine whether AIDS can be transmitted by heterosexual activity. Another major source for the HHS study are the nonscholarly comments of "public" interest groups, many of whom have criticized nearly all forms of advertising and, indeed, much of modern business practice. These comments are presented without even identifying the individual or group making the comments. As a result of relying on such sources, the new HHS report provides a grossly distorted picture of what is known about the effects of alcohol advertising, and ignores some of the most important issues in this area.

WHY DO ALCOHOLIC BEVERAGE ADVERTISERS USE THE TECHNIQUES THEY USE?

The alcoholic beverage industry is a classic example of a mature market. As such, it is highly segmented, with numerous brands competing for market share in nearly all segments. An additional factor is that alcohol advertising is severely restricted by regulations that, among other things, prohibit any mention of the physical effects of the product being sold. Faced with these restrictions and the necessity of gaining consumer attention amid overwhelming media "clutter," alcohol advertising adopts the same techniques that are used in numerous other mature markets such as those for automobiles, cosmetics, soap, clothing and many others.³ Prominent among these techniques is the use of attractive settings in which youthful and vigorous models indulge in activities that are enjoyed by most segments of modern society. This advertising technique is so common that, as a recent study illustrated, consumers who see a typical image-rich alcohol ad with the brand name removed find it nearly impossible to guess which product is being advertised (Meyer 1991). It would be a mistake to think that the use of these

³ Cf. Assael 1987, p. 538-539, where he notes that the most important reason for the growth of what he calls "emotional" rather than "rational" appeals in many markets ("particularly for consumer packaged goods") is "an attempt to maintain product distinctiveness in increasingly competitive markets. As a product travels along its life cycle, it loses its uniqueness." He then notes that often, many competitors in the same market use image-based appeals.

splendid images is a sign that the advertising targets young people. It turns out that all of us, not just those in the 14-25 age bracket, like to see ads with gorgeous people having fun (Mazis, et al., 1992).

WHAT IS THE EFFECT OF THIS KIND OF ADVERTISING ON DRINKING BY YOUNG PERSONS?

The HHS report notes in passing (p. 2) that there is little empirical evidence showing that increased alcohol advertising leads to increased drinking or increased abuse of alcohol. Nonetheless, the report suggests (partly through selective citation to the literature) that alcohol advertising which uses exciting, youthful imagery changes the attitudes of young persons, and does so in a way that may lead to increased or inappropriate drinking. This is a very questionable claim. The evidence of a link between alcohol advertising and attitude changes is weak, whereas evidence that advertising does *not* affect consumption is now quite strong.

In support of its claim that advertising affects attitudes and beliefs of young persons, the HHS report cites research that mainly develops several simple points: that pre-adolescent youths tend to recall brand names and other information from alcohol ads, that those who recall more from the ads tend to have more positive attitudes toward drinking, and that among older youths, those who drink or abuse alcohol tend to pay more attention to alcohol advertising than do youths who do not drink (Atkin and Block 1980; Aitken, et al. 1988; Lieberman and Orlandi 1987; Neuendorf 1984; Wallack, Cassady and Grube 1990).

Any finding other than this would be most surprising. Consumers in general tend to pay closer attention to advertising for the products and brands they use or are interested in, regardless of whether they are about to make more purchases. In scientific terms, the problem with the type of research of research cited in the HHS report is that while it is common to find a correlation between the attention paid to advertising for a particular product and consumer attitudes toward or consumption of that product, the correlation may not involve a cause-and-effect relationship. There is a strong possibility – even a likelihood – that consumption (either directly or by friends and family) causes greater attention to advertising, rather than advertising leading to consumption. This difficulty in interpreting such data has consistently been pointed out by scholars in this area, including scholars relied upon by the HHS report and others who are cited by those scholars. In the words of one

researcher cited by the HHS report, "the possibility that drinkers may pay more attention to messages about alcohol beverages than non-drinkers confounds any relations that such surveys might find between exposure and behavior."⁴ Some of these same scholars make an additional point. When researchers attempt to use experimental methods to determine whether the attitude changes (if any) that are induced by advertising carry through to changes in actual consumption, the usual finding, in the words of a well known scholar in the Addiction Research Center in Canada, is that "experimental studies typically show no effect of advertising on actual consumption."⁵ This leaves only the nebulous assertion that advertising which appears to be incapable of affecting the behavior of persons of drinking age nonetheless is able – years later – to affect the behavior of persons who were underage and were not drinking at the time they encountered the ads.⁶ There appears to be no concrete evidence whatever that this long delayed reaction actually occurs.

The HHS report's focus on the attractiveness of alcohol advertising therefore misses the point. The fact that young people (and older people) like to watch alcohol ads does not indicate an attempt to manipulate the thoughts of youth. The ads are fun to watch because in this market, and many another, ads have to be fun if they are to catch the viewer's attention and open an opportunity to gain market share (a truism that applies regardless of the age of the consumers being sought). The fact that alcohol advertising somehow reaches young persons, targeted or not, is also beside the point. Research has consistently shown that for this product as well as most others, changes in fundamental behavior come from something other than pretty pictures, and that in the case of young people considering whether to drink, decisions are dominated by influences other than advertising. It seems apparent that what young people like about alcohol ads is the ads' style, not the products or the messages contained in the ads, as has been pointed out

⁴ Lieberman and Orlandi (1987), *op. cit.*, p. 31. Also see Adlaf and Kohn (1989), p. 749: "Demonstrations of positive correlations between advertising exposures and alcohol consumption in survey studies have ambiguous causal implications, even with statistical control of other variables (e.g., Atkin, Neuendorf and McDermott, 1983; Atkin, Hocking and Block, 1984)."

⁵ Smart (1988). Examples of such experimental research are Kohn and Smart (1984), and Kohn, Smart and Ogborne (1984).

⁶ This is the assertion in Lieberman and Orlandi (1987), *op. cit.*

by an authority relied upon by the HHS study (Wallack, et al. 1991, appendix 3). This is hardly a surprise. If attractive advertising inevitably sold products, modern marketing would be a much simpler business than it is.

In fact, the question of whether total alcohol advertising increases total alcohol sales requires careful research. The HHS study fails to mention all but a tiny portion of the large body of empirical research that has attempted to assess the factors that lead to youthful consumption and abuse of alcohol. This research is of two types. One relies upon surveys, interviews, and closely controlled experiments in artificial settings. This type of research has generally found that parental and peer influences are the overwhelming forces in youth consumption, with advertising either far down the list of factors or, often, not on the list at all.⁷ To ascribe a dominant role to advertising is therefore almost certainly mistaken. There is little reason to think that advertising plays a substantial role in decisions about whether and when to indulge in alcohol. Far more important are the observations and guidance that young persons take from personal interactions. This point is consistent with recent history in this and other countries around the world. In the United States, young persons' awareness of the potential dangers of alcohol (especially when driving) has reached levels very close to 100%, despite the steady increase in alcohol advertising during the past two decades.⁸ These awareness levels compare favorably with the goals set by the Surgeon General for public knowledge of the dangers of lung cancer from smoking after 25 years of government anti-smoking publicity (Shopland and Brown 1987). In nations such as Russia, on the other hand, alcoholism among all age groups has reached tragic proportions without the slightest assistance from advertising. Indeed, available evidence indicates little if any effects from legislated bans on alcohol advertising. The scholar who has most thoroughly investigated the effects of alcohol advertising bans of various types (Smart, 1988) concludes, "The evidence indicates that advertising bans do not reduce

⁷ Again, a good review is Smart (1988).

⁸ Kaskutas and Greenfield (1991). Wallack, et al. (1990), one of the sources relied upon by the HHS report, also note in their Appendix 3 that based on their surveys and focus groups with children who were far too young even to drive, "children are aware of the health consequences of drinking and driving and other high risk activities."

alcohol sales." The Federal Trade Commission review (1985) reaches a similar conclusion.⁹

A second stream of research comes primarily from economists, who have used statistical methods to assess the extent to which advertising causes increases in the consumption of alcoholic beverages. While these studies cannot isolate young persons as well as research based upon surveys, econometric research has the advantage of working with actual behavior in the marketplace rather than with what survey respondents *say* they would do. The results have consistently found that the vast increases in advertising observed in Western nations during the past 30 years or so have caused no more than a marginal increase in consumption, and may well have had no impact at all. I have already cited the well known reports from the staff of the FTC and the Addiction Research Center in Toronto (FTC 1985; Smart 1988). Recent additions to the literature are consistent with these conclusions (Franke and Wilcox 1987; Duffy 1987). Persistent declines in consumption of all types of alcoholic beverages in recent years are also consistent with the bulk of statistical studies on advertising and consumption.

IF ALCOHOL ADVERTISING DOES NOT
INCREASE DRINKING BY YOUNG PERSONS,
WHY DO THEY SPEND ALL THAT MONEY ON ADVERTISING?

One obvious question not dealt with by the HHS report is why sellers of alcoholic beverages pay so much for advertising if the net effect of all the advertising is to leave overall sales unaffected. The answer, which is the same for dozens of mature markets, is that vigorous competition begets vigorous advertising regardless of whether the market is expanding or slack. From the standpoint of any one alcoholic beverage seller, the important question is

⁹ The recent study by Saffer (1991) reaches different conclusions by comparing consumption in nations with and without advertising bans, rather than the more common method of analyzing consumption before and after the imposition of advertising bans in specific countries. Saffer's study is flawed, however, by the failure to provide a sound way to control for the influence of national culture on consumption, and especially, by inattention to the possibility that countries in which consumption is already low (because of culture or other factors) are the very countries that are most likely to implement advertising bans.

whether their advertising will help *their own firm*, not whether it will help the entire industry including their competitors. The firm that does not advertise will almost certainly lose market share to one that does. The firm that does a better job of advertising (along with the other elements of modern marketing) will gain market share while competitors lose sales – something that happens all the time in the alcoholic beverage market. If all the firms advertise, the result in a mature market like this one is likely to be a standoff or a shifting of shares, so that total advertising no more increases sales in the alcohol beverage industry than it does in, say, the hand soap or toothpaste industry. To assume that sales increases always follow from total industry advertising simply makes no sense. If total advertising always increased total industry output by more than the advertising expenditure, the world would know how to maintain economic growth with never a whisper of recession. Unfortunately, a competitive economy is not so easily managed.

REGULATORY PROPOSALS

The HHS report reviews the patchwork state of regulation in the alcohol industry and reports on discussions with "public" interest groups about how to "improve" alcohol advertising. The thrust of the report is that because regulation is divided among various authorities, and alcohol advertising works in subtle ways, probably the only reasonable option is to require "ombstone" advertising that contains little beyond a black-and-white statement of product name, description, price and availability.

This kind of thinking represents a step in the wrong direction. As the Supreme Court has long since recognized in its constitutional rulings, regulation should avoid severe restrictions on commercial speech unless such restrictions arise from compelling needs. But in the alcohol industry, there is little reason to think that advertising is itself a cause of any significant problem. Moreover, there is reason to doubt that advertising regulation in this industry has been entirely helpful in the past. Regulation has typically worked to reduce rather than increase the quantity and quality of information available to youth and other potential consumers. The law now prevents manufacturers of those beverages with least alcoholic content (beer and malt liquor) from making appeals in terms of reduced effects from alcohol, or even mentioning in ads or on labels the mere fact that the beverage contains less alcohol than competing beverages. BATF regulations also prohibit any mention of the large body of epidemiological evidence that suggests alcohol can provide a strongly protective role against coronary heart disease (see

Rimm, et al., 1991, and references therein). The long tradition of prohibiting these and related claims, even if they are completely true, is not encouraging.

Most disturbing is the expansive scope of informational regulation suggested by the final remarks of the Surgeon General and the interest groups she consulted. It is not enough to attack advertising that is false or deceptive. One should consider an assault on advertising that (in the words of the HHS report, p. 14) "merely portrays attractive, affluent people who appear to be having fun." This approach to regulation would contain a profoundly disturbing degree of subjectivity and arbitrariness. Surely such constraints on freedom should be considered only on the basis of clear and convincing evidence of danger, rather than on the extremely tenuous data that a minority of researchers have adduced in the case of alcohol advertising and drinking by youth.

REFERENCES

- Adlaf, E.M., and P.M. Kohn (1989) "Alcohol Advertising, Consumption and Abuse: A Covariance-Structural Modelling Look at Strickland's Data," *Brit. J. of Addiction*, vol. 84, p. 749-757.
- Aitken, P.P., D.R. Eadie, D.S. Leather, R.E.J. McNeill and A.C Scott (1988) "Television Advertisements for Alcohol Drinks Do Reinforce Under-Age Drinking," 83 *Brit. J. of Addiction* 1399-1419.
- Assael, Henry (3rd ed., 1987) *Consumer Behavior and Marketing Action*. PWS-Kent Publishing Co.
- Atkin, Charles and Martin Block (1980), "Content and Effects of Alcohol Advertising," *Final Report submitted to Bureau of Alcohol, Tobacco and Firearms, Federal Trade Commission, National Institute on Alcohol Abuse and Alcoholism, and Department of Transportation*.
- Atkin, Charles, J. Hocking, and Martin Block (1984) "Teenage Drinking: Does Advertising Make a Difference?" *J. of Communications*, vol. 34, pp. 157-167.
- Atkin, Charles, Kimberly Neuendorf and Steven McDermott (1983) "The Role of Alcohol Advertising in Excessive and Hazardous Drinking," *Journal of Drug Education*, 13, pp. 313-26.
- Calfee, John E. (1991) "Prepared Statement for the FTC Oversight Hearings, Subcommittee on Transportation and Hazardous Materials, Committee on Energy and Commerce, U.S House of Representatives," November 21, 1991.
- Duffy, Martin (1987) "Advertising and the Inter-product Distribution of Demand: A Rotterdam Model Approach," 31 *European Economic Rev.* 1051-70.
- Federal Trade Commission, Bureau of Economics and Bureau of Consumer Protection (1985) *Recommendations of the Staff of the Federal Trade Commission Re: Omnibus Petition for Regulation of Unfair and*

Deceptive Alcoholic Beverage Advertising and Marketing Practices, Docket No. 209-46, March 1985.

- Franke, George, and Gary Wilcox (1987) "Alcoholic Beverage Advertising and Consumption in the United States," *Journal of Advertising*, vol. 16, no. 3, pp. 22-30.
- Kaskutas, Lee, and Tom Greenfield (1991) "Knowledge of Warning Labels on Alcoholic Beverage Containers," *Proceedings of the Human Factors Society 35th Annual Meeting*, pp. 441-445.
- Kohn, Paul M., and Reginald G. Smart (1984), "The Impact of Television Advertising on Alcohol Consumption: An Experiment," *Journal of Studies on Alcohol*, vol. 45, pp. 295-301.
- Kohn, Paul M., Reginald G. Smart and Alan C. Ogborne (1984), "Effects of Two Kinds of Alcohol Advertising on Subsequent Consumption," *Journal of Advertising*, vol. 13, pp. 34-48.
- Lieberman, L. R., and M. A. Orlandi (1987) "Alcohol Advertising and Adolescent Drinking," *Alcohol Health Research World*, vol. 12, no. 1, p. 30-33, 43.
- Mazis, Michael, Debra Ringold, Elgin Perry and Daniel Denman (1992) "Perceived Age and Attractiveness of Models in Cigarette Advertisements," forthcoming in *Journal of Marketing*, vol. 55 (January).
- Meyer, Timothy (1991) "Visual Images and Product Associations in Magazine Ads for Alcohol and Tobacco: A Study of Consumer Perceptions," *Proceedings of the American Academy of Advertising*, ed. Rebecca Holman, p. 1-8.
- Neuendorf, Kimberly (1984) "Alcohol Advertising and Media Portrayals," 45 *J. of Studies on Alcohol* 93-100 [as cited in U.S. Department of Health and Human Services, Office of Inspector General (1991)].
- Rimm, Eric, Edward Giovannucci, Walter Willett, Graham Colditz, Alberto Ascherio, Bernard Rosner and Meir Stampfer (1991) "Prospective Study of Alcohol Consumption and Risk of Coronary Heart Disease in Men," 338 *Lancet* 464-468 (Aug. 24).

- Saffer, Henry (1991) "Alcohol Advertising Bans and Alcohol Abuse: An International Perspective," *J. of Health Economics*, vol. 10, p. 65-79.
- Shopland, Donald, and Clarice Brown (1987) "Toward the 1990 Objectives for Smoking: Measuring the Progress with 1985 NHIS Data," 102 *Public Health Reports* 68-73 (Jan.-Feb.)
- Smart, Reginald G. (1988) "Does Alcohol Advertising Affect Overall Consumption? A Review of Empirical Studies," *J. of Studies on Alcohol*, vol 49, no. 4, p. 314-323.
- U.S. Department of Health and Human Services, Office of Inspector General (1991a) "Youth and Alcohol: A National Survey – Drinking Habits, Access, Attitudes, and Knowledge," June 1991, OEI-09-91-00652.
- U.S. Department of Health and Human Services, Office of Inspector General (1991b) "Youth and Alcohol: A National Survey – Do They Know What They're Drinking?," OEI-09-91-00653.
- U.S. Department of Health and Human Services, Office of Inspector General (1991c) "Youth and Alcohol: Laws and Enforcement – Is the 21-Year-Old Drinking Age a Myth?" OEI-09-91-00650
- U.S. Department of Health and Human Services, Office of Inspector General (1991d) "Youth and Alcohol: Laws and Enforcement – Compendium of State Laws" OEI-09-91-00655.
- U.S. Department of Health and Human Services, Office of Inspector General (1991e) "Youth and Alcohol: Controlling Alcohol Advertising that Appeals to Youth," November, OEI-09-91-00654.
- Wallack, Lawrence, Diana Cassady and Joel Grube, "TV Beer Commercials and children: Exposure, Attention, Beliefs and Expectations About Drinking as an Adult," AAA Foundation for Traffic Safety, Fall 1990.

PREPARED STATEMENT OF MICHAEL F. KAVANAUGH, SHERIFF, COUNTY OF ROANOKE, VA

I appreciate the opportunity to enter into the record of your committee, the following description of the Roanoke Valley's Youth Anti-Alcohol Program.

Anyone looking at a map of the Roanoke Valley could easily come to the conclusion that this area of multi-jurisdictions, Roanoke County, Town of Vinton, City of Salem, and City of Roanoke; would show a high level of parochialism. This may be true in some areas of concern, but when the problems of taking care of our young people are brought up, we are a united community.

Citizens of the Roanoke Valley began to be alarmed at the annual tragedy of our young high school students being involved in traffic crashes after attending their proms. In 1981 a small group of concerned citizens organized themselves as the Roanoke Chapter of Virginians Opposing Drunk Driving (VODD). In addition to making public appearances in the interest of raising public awareness of the drunk driving problem, and monitoring the local courts to see how drunk drivers were being prosecuted; they took on the project of trying to see that our young drivers, and their dates, got home safely from the proms and parties that were held after the proms. Using their own personal funds, they had announcements printed and distributed to all of the area high schools, formal wear shops, and florists; letting the students know that they could call a special telephone number, and be guaranteed a free ride home. There would be no questions asked, if they or their dates were in no condition to drive. These adults then sat up until 3:00 or 4:00 o'clock every morning following the proms held by every high school in the valley. The program was so successful that by the third year, SADD chapters were attaching quarters (\$0.25) to the table tents set at each table at the proms.

Five years ago, Salem High School parents went one step further. They organized the first alcohol-free after prom party in the valley. With the help of the Salem Moose Lodge and many area businesses, this event showed that the community will respond to an idea, and make it work.

Four years ago the after prom parties were held by all valley public high schools. They are now being organized as a regular part of the prom season. We hope that these efforts by students and parents, supported by community businesses and organizations, and government agencies; have led to an awareness of the fun can be enjoyed in an alcohol-free environment, rather than being involved in drinking parties. There is no doubt that these community efforts have helped us achieve the fact that during these last 10 years, there have been no serious personal injury auto crashes, much less any fatalities, in the Roanoke Valley involving high school students on prom nights.

A new twist to the prom night alcohol-free party effort was added in 1989, when the Roanoke Area Youth Substance Abuse Coalition (RAYSAC) sponsored two ideas. They wrote letters to all of the local motel and hotel managers asking them to please check their room reservations on prom nights. It was known that students had been renting rooms to hold their own parties. The response from the managers was totally positive. Their past experience had been that the party rooms were usually trashed. Here was the good community reason that they needed to turn away these reservations.

RAYSAC also enlisted the aid of a local auto dealer. A new pickup truck was donated as a grand prize for a finale held after all of the proms. Five names are drawn during the last thirty minutes of each after prom party. These students attend the finale, held at a local shopping center, and they are each given a key. One key fits the truck's ignition. This part of the seasonal effort has expanded every year. In 1989, there were six (6) high schools enrolled in the finale drawing. The word spread so that in 1990, nineteen (19) high schools, both in the Roanoke Valley and in the surrounding counties joined the program, and in 1991, with the co-sponsorship of a local television station, twenty-nine (29) Southwest Virginia schools pledged to the alcohol-free party program in order to be able to participate in the finale. Plans for the 1992 prom season will include approximately thirty-five (35) schools. We are hoping that contributions will allow the awarding of college scholarships, in addition to the truck.

In order to make the student bodies of the local high schools aware of the dangers of drinking and driving, the Roanoke Valley Chapter of the American Red Cross, through its Youth Advisory Committee, has sponsored mock disaster demonstrations at selected high schools, the week before the proms begin. These demonstrations show a realistic fatal crash scenario, complete with students dressed in formal prom wear, made up to show the most gruesome injuries. Local law enforcement, rescue squads, fire departments, and the state medical examiner participate to show the sights, sounds, and smells of a fatal crash. The impact on the students is

dramatic. When they see their friends being cut out of wrecked vehicles, either taken away in ambulances, or laid to the side under sheets; there is a hush over the crowd. Counseling is available through the school guidance departments for those students who have memories revived by the scene.

The Red Cross Youth Advisory Committee has also taken action in the community to help prevent youth alcohol involvement, on a throughout-the-year basis. A double ID program was instituted in 1988, in cooperation with local ABC licensees. With the endorsement of the Virginia Alcohol Beverage Control Board, training of sales clerks and furnishing of store and restaurant materials was begun. These door decals, table tents and other materials call the public's attention to the requirement that two ID's will be required in that firm's alcohol sales. This program has helped thwart the use of false or altered identification items by young people in their efforts to buy alcoholic beverages.

We are proud of the community-wide efforts of the Roanoke Valley over these last ten years to help reduce the involvement of our young people in alcohol use and its many tragic consequences. The 1991 prom season was also an accident free success.

Sincerely yours,



Michael F. Kavanaugh,
Sheriff

○

ISBN 0-16-037743-9



9 780160 377433