



# Maine Alliance to Prevent Substance Abuse

Quarterly Newsletter

Volume I, Issue I  
Winter 2008

## 2008 Legislative Update

This is going to be a very difficult session. Those of us in the prevention field will need to remain watchful to assure that what funds we do receive from the state (out of the Fund for a Healthy Maine) remain intact, and to help those in policy making positions do the right thing for our youth and our future.

In his State of the State Address, Governor Baldacci reaffirmed his opposition to any taxes to balance the budget or to address the projected shortfall of \$95 million. There will be a new economic forecast in February and there is great fear that the downturn will be even more pronounced.

The Dime a Drink alcohol tax bill was voted down by the Taxation Committee in December 2007, but even though the Governor does not support any new taxes,

the issue of an alcohol tax remains on the table for the legislature as it searches for ways to fill in the fiscal gaps.

MAPSA will continue to advocate for an increase in the alcohol tax to create a Maine fund for prevention, but also to produce a disincentive to youth through increased prices for alcohol (See page 2 for more information on alcohol taxes).

Other bills of interest for this session include new ideas such as elevating the Office of Substance Abuse to a Cabinet level so that the Director (would be Commissioner) has integrated access to the other departments such as Education, Judiciary and Corrections to assure that substance abuse prevention and treatment are integrated into the many aspects of state government that are important to prevention and that are impacted by alco-



hol and substance abuse.

A bill to maintain the validity of student drug use surveys has been brought forward by Senator Weston. This is a key factor for many community groups, especially those receiving federal funding.

Representative Ann Perry has introduced legislation to create a prescription monitoring and abuse prevention fund with the settlement money from the state lawsuit against Purdue, the makers of Oxycontin. Currently that money is slated to go to the General Fund.

More information and legislative alerts will be coming in the weeks ahead.

## Courting Youth Online: New Alcohol Ad Tactics

Excerpted from *Marin Institute Alcohol Industry News*

According to a recent report from the [Center on Alcohol Marketing to Youth](#) (CAMY), the number of alcohol ads that young people see on TV and in print has declined since 2001. This may sound like good news, but in fact ad dollars are simply shifting to new media. Indeed, when it came to harnessing the web and other new media to reach Generation Y, 2007 was a big year for the nation's largest alcohol corporations.

After Bud TV, Anheuser-Busch's original "web chan-

nel," failed to deliver the hoped-for number of viewers, the King of Beer's marketing team has been piloting commercials elsewhere on the web -- such as on YouTube, style.com and askmen.com. The company has spent \$8.9 million on internet advertising in the first nine months of 2007, more than double for the same period in 2006. But it doesn't stop there; A-B says it plans to boost its spending on ads and video designed to proliferate on numerous websites by 50 percent next year.

Not to be outdone, Miller Brewing Company has opted out of traditional advertising entirely when it comes to its youth-oriented, citrusy-flavored alcoholic energy drink Sparks. Instead of TV ads, Miller hopes to reach "young hipsters who are drinking less beer than their baby boomer parents and are more likely to tune out mainstream ad campaigns." The company uses online techniques such as social networking to market the Sparks brand, while sponsoring parties and art openings.

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### Upcoming :

#### Town Hall Events March through April

- ⇒ First Lady Karen Baldacci and Attorney General Steven Rowe will be traveling across Maine this Spring to highlight the Surgeon General's Call to Action on Underage Drinking.
- ⇒ Close to 30 Town Halls will be held in collaboration with local leaders and Community Coalitions.
- ⇒ See what you can do to make changes in your community for the future of our youth.
- ⇒ Go online to find out more at [www.masap.org/site/prevention.asp](http://www.masap.org/site/prevention.asp)



## Worthwhile Reading for Prevention Specialists: *Paying the Tab*. New book outlines need for alcohol taxes and reduced access.

*Paying the Tab*, the first comprehensive analysis of this complex policy issue, calls for broadening our approach to curbing destructive drinking. Over the last few decades, efforts to reduce the societal costs--curbing youth drinking and cracking down on drunk driving--have been somewhat effective, but woefully incomplete. In fact, American policymakers have ignored the influence of the supply side of the equation. Beer and liquor

**“Alcohol is too cheap, and it's costing all of us.”**

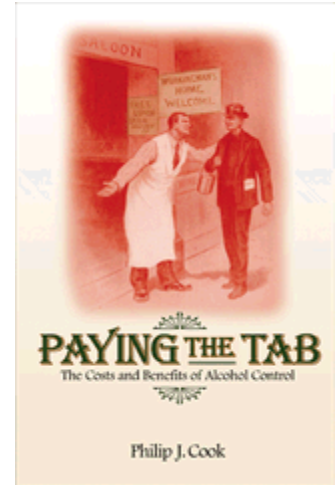
are far cheaper and more readily available today than in the 1950s and 1960s.

Philip Cook's well-researched and engaging account chronicles the history of our attempts to "legislate morality," the overlooked lessons from Prohibition, and the rise of Alcoholics Anonymous. He provides a thorough account of the scientific evidence that has accumulated over the last twenty-five years of economic and public-health research, which demon-

strates that higher alcohol excise taxes and other supply restrictions are effective and underutilized policy tools that can cut abuse while preserving the pleasures of moderate consumption. *Paying the Tab* makes a powerful case for a policy course correction. Alcohol is too cheap, and it's costing all of us.

**Philip J. Cook** is professor of public policy and economics at Duke University and former director of the university's Sanford Institute of Public Policy. His books include *Gun Violence*, *The Winner-Take-All Society*, and *Selling Hope*.

From Princeton University Press



**Paying the Tab:  
The Costs and  
Benefits of Alcohol  
Control**  
By Philip J. Cook

## Is Alcohol Undertaxed?

Monday, January 14, 2008 - Bangor Daily News Editorial

Almost everyone agrees that smoking is bad for the health. And it is clear that raising tobacco taxes has helped to reduce smoking.

With alcohol, there is no such agreement. For older people, regular moderate drinking has been found to reduce the incidence of heart attacks and strokes. Yet the downside includes drunken driving, crime, violence, loss of income, health problems and premature death. National statistics put the total annual cost of alcohol abuse (including alcohol-related traffic accidents, crime prevention and lost earnings) at \$148 billion. Drug abuse costs \$143 billion. There is a war on drugs but not really any war on alcohol.

Unlike tobacco taxes, the real

tax rates on alcoholic beverages — adjusted for inflation — have gone down. And, although the alcohol content is the same for a can of beer, a shot of spirits and a glass of wine, taxes vary. A serving of liquor is taxed at twice the tax on beer. A glass of wine is taxed at three times as much as a can of beer. And beer accounts for 55 percent of American alcohol consumption. A new book, "Paying the Tab: The Costs and Benefits of Alcohol Control," makes the case for equalizing and increasing the tax on alcoholic beverages as a means of improving public health and safety. The author, Philip J. Cook, a professor of public policy and economics at Duke University, sums up his conclusions in one sentence:

"Alcoholic beverages are too cheap for our own good."

Control of drinking in America has had a long and troubling history. Alexander Hamilton, as the first treasury secretary, pushed through a whisky tax in 1790 as an essential revenue measure. It led to the Whisky Rebellion of 1794 but also helped limit widespread drinking and later helped pay for World War I.

Prohibition, the so called "Noble Experiment," led to bootlegging and a surge of gangsterism and is generally viewed as a failure, although it did cut back on drinking. When it ended, state laws aimed at control. In Oregon, advertising alcoholic beverages was prohibited, but taverns evaded the law by taping over a neon sign so that it said "BEEP" instead of "BEER." Another sign said, "We can sell it but we can't spell it."

Professor Cook includes masses of statistics and analysis on such matters as consumption of alcohol by various groups and "elasticity" of prices related to taxes. He praises such organizations as Alcoholics Anonymous and MADD (Mothers Against Drunk Driving) but concludes that higher taxes on drinking would be an effective additional control mechanism.

Throughout, he balances individual freedom against the public good. He winds up with a plea, not to bring back Prohibition, but to raise taxes to "ease the struggle to limit abuse, enhance the public health and safety and ultimately increase our collective standard of living."

With calls for higher cigarette taxes, it is something to think about.

<http://bangornews.com>



## New Study Reveals More Than 3 Million Adolescents and Young Adults Have Used Non-Prescription Cough and Cold Medicines to Get High at Least Once in Their Lifetimes

The level is comparable to LSD, and more than the reported use of methamphetamines, among those aged 12 to 25. White youths were more than three times as likely as Black youths to have misused these drugs during the past year.

About 3.1 million people in the United States aged 12 to 25 (5.3 percent of this age group) have used over-the-counter (non-prescription) cough and cold medicines to get high at least once in their lifetimes, according to a report by the Substance Abuse and Mental Health Services Administration (SAMHSA).

Newly analyzed data from the National Survey of Drug Use and Health (NSDUH) show the number is comparable to those who say they have used LSD (3.1 million), and is significantly greater than the number who reported having tried methamphetamines (2.4 million).

Overdosing on many cough and cold medications may result in serious life-threatening adverse reactions. Adverse reactions include blurred vision, loss of physical coordination, intense abdominal pain, vomiting, uncontrolled violent muscle spasms, irregular heartbeat, delirium and death.

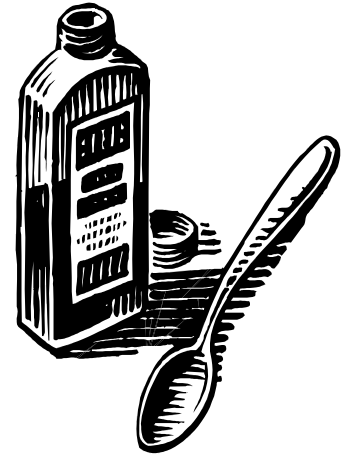
The NSDUH survey also found that the number of 12-to-25-year-olds who reported misuse of non-prescription cough and cold medicines in the past year (1 million) exceeded the number claiming to have used methamphetamines (740,000) and LSD (485,000) in the past year. The number was somewhat lower than the number of young people reporting that they had used the drug Ecstasy (1.5 million) in the past year.

The survey, conducted by SAMHSA, is the largest of its kind and involves interviewing nearly 67,000 peo-

ple from around the nation, including almost 45,000 persons aged 12 to 25.

"While increasing attention has been paid to the public health risk of prescription drug abuse, we also need to be aware of the growing dangers of misuse of over-the-counter cough and cold medications, especially among young people," said SAMHSA Administrator Terry Cline, Ph.D. "The scope and danger posed by these medications requires a broad scale public health campaign—a campaign involving everyone, including the medical community, industry, parents and young people."

Although non-prescription cough and cold medications are generally safe when taken for medicinal purposes and as directed on their labeling, they can induce severe dissociative, "out-of-body" experiences when they are consumed in amounts far in excess of their recommended dos-



### Ro-bo Shots?

ages. These reactions are similar to the effects of the well-known hallucinogens phencyclidine (PCP) and ketamine ("Special K").

The full report is available on the Web at <http://oas.samhsa.gov/2k8/cough/cough.cfm>. Copies may be obtained free of charge by calling SAMHSA's Health Information Network at 1-877-SAMHSA-7. Request inventory number NSDUH08-0110. For related publications and information, visit <http://www.samhsa.gov/>.

## Get the Truth About the 21 Law

As the nation's current debate on the 21 Minimum Drinking Age Law rages on, it's easy to mistake opinions as facts. Here is where you can get the straight truth on why the law is important to you—regardless of your age—and how it saves lives

You will also find information on how alcohol affects the teen brain, the realities of underage drinking, facts to common myths and a history of the drinking age law. There is also a wealth of information, resources and tips for par-

ents, educators and communities on preventing underage drinking.

Arm yourself with the truth and then decide.

<http://www.why21.org/>



Together, we can make a difference - get the facts!



## Quarterly Newsletter

### Maine Alliance to Prevent Substance Abuse\*

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**Building a unified statewide voice for substance abuse prevention.**

On the web at  
[www.masap.org/site/prevention.asp](http://www.masap.org/site/prevention.asp)

**MAPSA** is a statewide grassroots network created in 1999 to provide an advocacy voice for substance abuse prevention in Maine.

**MAPSA** represents service providers, agencies, coalitions and others who have an interest in and a commitment to substance abuse prevention.



**MAPSA** is an affiliate program of the Maine Association of Substance Abuse Programs

**Go Online to join today!**

\* Formerly known as the Maine Association of Prevention Programs

Watch for information about the **Second Annual Prevention Convention** to be held in the Fall 2008.

## ACTION ALERT - Alcohol Labels

Tell the Alcohol and Tobacco Tax and Trade Bureau of the U.S. Department of Treasury (TTB) to require labels that will be more effective in educating consumers about the alcohol and nutritional content of the drinks they ingest.

### What's At Stake?

Alcoholic beverages remain the only major category of consumable goods that lack basic consumer information on container labels. The proposed rule would mandate disclosure of alcohol and calorie content, serving size, and number of servings per container and require an informational panel similar to the nutrition panels found on food labels.

Key improvements are necessary, including: more prominent and consistent alcohol-content disclosure; highlighted calorie information; and the inclusion of guidelines on moderate drinking.

More research is necessary to determine the best label design and content to help consumers measure, monitor, and moderate their alcohol consumption. As proposed, the "Serving Facts" panel would essentially provide only nutrition information about America's leading drug.

Please submit comments online at:

<http://www.regulations.gov/fdmspublic/component/main?main=DocumentDetail&d=TTB-2007-0062-0001>

OR through the mail to:

Director, Regulations and Rulings Division, Alcohol and Tobacco Tax and Trade Bureau  
P.O. Box 14412, Washington, DC 20044-4412

Serving size: The serving size is usually less than most people eat. If you eat 2 servings, make sure you double the calories and all of the daily values. When comparing foods, make sure the serving sizes are the same.

**Fat:** This lists the total amount of fat in one serving. Try to limit the amount of saturated fat and trans fat you eat.

**Cholesterol:** Try to eat less than 300 mg each day.

**Sodium:** Try to eat less than 2400 mg of sodium (salt) each day.

**Carbohydrates:** These help give you energy. They are found in bread, pasta, potatoes, fruits, and vegetables. Good sources of fiber include fruits, vegetables, whole grains, peas, and beans. Try to eat 25 to 35 g of fiber per day.

**Protein:** Protein helps build muscle. It is found in meat, nuts, eggs, fish, and dry beans. Try to eat lean cuts of meat.

**Calories:** A calorie is a measure of energy use. Also listed is the number of calories from fat. The general rule is that no more than 30% of your calories should come from fat.

**% Daily Value:** This shows how much of the recommended amounts of these nutrients are in one serving (based on a 2,000 calorie diet). These percentages make it easy to compare one brand with another. Just make sure the serving size is the same. The goal is to eat no more than 100% of each nutrient each day.

**Vitamins and Minerals:** This shows you how much of the recommended amount of certain vitamins and minerals are in the food. Your goal is to reach 100% for each vitamin and mineral every day.

**Recommended amounts:** Here you can see the recommended daily amount for each nutrient for 2 calorie levels—a 2,000 calorie and a 2,500 calorie daily diet. Your recommended daily calories may be higher or lower, depending on your age, gender, and how active you are. However, notice that the recommended amount of sodium and cholesterol are the same no matter how many calories you eat a day.

Nutrition Facts		Amount per serving	
Serving Size 1 cup (120 g)		Calories 130	
Servings Per Container 3		Calories from fat 60	
			% Daily Value*
Total fat	6.5g		10%
Saturated Fat	2.5g		12%
Trans Fat	1g		10%
Cholesterol	30mg		10%
Sodium	240mg		10%
Total Carbohydrate	15g		5%
Dietary fiber	2.5g		10%
Sugars	3g		
Protein	3g		
Vitamin A	10%	Vitamin C	5%
Calcium	15%	Iron	5%

\*Percent Daily Values are based on a 2,000 calorie diet. Your daily values may be higher or lower depending on your calorie needs. Calories: 2,000 / 2,500

Total Fat Less than 65g 10g  
Saturated Fat Less than 20g 5g  
Cholesterol Less than 300mg 30mg  
Sodium Less than 2,400mg 240mg  
Total Carbohydrate 300g 15g  
Dietary Fiber 25g 2.5g

Calories per gram:  
Fat 9 / Carbohydrate 4 / Protein 4

When have you seen this?

.....on this?



**Comments are due by January 27, 2008.**