

RESEARCH SUMMARY
Date Compiled: August 2023

Key takeaways from included research:

- The COVID-19 pandemic increased alcohol purchasing across the United States and the related harms. Researchers examined prevention policies during the pandemic as well as capacity to respond to alcohol-focused alcohol policy changes. They found that the pandemic exacerbated capacity limitations for alcohol harm prevention efforts and created new barriers to public health messaging. Researchers also suggested that states must have dedicated leadership and increase prioritization of these issues to reduce alcohol consumption and the associated harms.
- A study examined the global prevalence and burden of disease in disability-adjusted life years (DALYs) for alcoholic cirrhosis (AC) and alcoholic liver cancer (ALC). They found that Central Asia and East Europe contributed the highest age-standardized incidence, prevalence, death, and DALYs which have increased sharply in the past 30 years. Despite overall improvements in health, researchers called for greater prevention efforts of AC and ALC in middle and middle-high Socio-demographic Index (SDI) regions in Central Asia and East Europe while the focus in low SDI regions ought to be medical resources.
- A study conducted in Australia examined the changing social position of alcohol use among young people to identify how it has become framed as posing significant risk to them. Through interview, researchers found that discourses of risk and individual responsibility shape the socio-cultural value of alcohol among youth and therefore risk avoidance has become more prevalent through restraint and control as it relates to alcohol consumption.
- Another Australian study examined how drinking patterns are associated with risky gambling. They concluded that occasional heavy episodic drinking (HED) and monthly HED were associated with any gambling while frequent HED was not significantly associated, however the opposite was true when examining risky gambling, higher frequency of HED was associated with higher likelihood of risky gambling. Researcher emphasized the need for policies to discourage alcohol use while gambling.
- A British study examined whether alcohol dependence during adolescence increased the risk of depression in young adulthood. They found a positive association between alcohol dependence at age 18 and depression at age 24. Researchers concluded that psychosocial or behavioral interventions that reduce risk of alcohol dependence in youth could contribute to preventing depression in young adults.

QUALITATIVE STUDY OF STATES' CAPACITY TO SUPPORT ALCOHOL PREVENTION POLICIES DURING THE COVID-19 PANDEMIC IN THE USA

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Introduction: The onset of the COVID-19 pandemic accelerated rates of alcohol purchasing and related harms in the USA. The increases followed governors' emergency orders that increased alcohol availability, including the allowance of alcohol home delivery, alcohol to-go from restaurants and bars, and curbside pickup from retailers.

Methods: Semi-structured interviews were conducted with 53 participants involved in state-level alcohol prevention policy across 48 states. Interviewees' perspectives on changes to alcohol prevention policies during the COVID-19 pandemic, including capacity to respond to alcohol-focused executive and legislative changes to alcohol availability, were explored. Initial codes were developed collectively and refined through successive readings of transcripts using a phenomenological, action-oriented research approach. Themes were identified semantically after all transcripts were coded and reviewed.

Results: Four themes were developed including: (i) alcohol prevention policies and capacity during COVID-19; (ii) industry-related challenges during COVID-19; (iii) limited pre-COVID-19 alcohol prevention capacity; and (iv) needs to strengthen alcohol prevention capacity.

Discussion and Conclusions: The pandemic exacerbated states' capacity limitations for alcohol prevention efforts and created additional impediments to public health messaging about alcohol health risks related to greater alcohol availability. Participants offered a myriad of strategies to improve alcohol prevention and to reduce alcohol-related harms. Recommendations included dedicated federal and state prioritisation, more funding for community organisations, greater coordination, consistent high-quality trainings, stronger surveillance and widespread prevention messaging. States' alcohol prevention efforts require dedicated leadership, additional funding and support to strengthen population-based strategies to reduce sustained alcohol-related harms associated with increases in alcohol availability.

Source: Haley, S.J., Peddireddy, S., El-Harakeh, A., Akasreku, B., & Riibe, D. (2023). Qualitative study of states' capacity to support alcohol prevention policies during the COVID-19 pandemic in the USA. *Drug Alcohol Rev.* 2023. <https://doi.org/10.1111/dar.13714>

THE GLOBAL BURDEN OF ALCOHOLIC LIVER DISEASE: A SYSTEMATIC ANALYSIS OF THE GLOBAL BURDEN OF DISEASE STUDY 2019

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Abstract

Alcohol use is a major risk factor for the burden of mortality and morbidity. Alcoholic cirrhosis (AC) and alcoholic liver cancer (ALC) are most important and severe liver disease outcomes caused by alcohol use. The objectives of the current study were to investigate the global prevalence and burden of disease in disability-adjusted life years (DALYs) for AC and ALC, based on data from the Global Burden of Disease (GBD). Incidence, prevalence, death, and DALYs for GBDs in different locations, years, sex, and age groups were estimated using DisMod-MR 2.1 and a generic Cause of Death Ensemble Modeling approach. The correlations between the age-standardized incidence rate or age-standardized death rate and gender, sociodemographic index (SDI), and alcohol usage were conducted by Generalized Linear Models. Globally, the changes of age-standardized rates of indicators were not much significant over the 30-year period. However, the changes varied widely across regions. Central Asia and East Europe contributed the highest age-standardized incidence, prevalence, death, and DALYs and increased sharply by past 30 years. Generalized Linear Models (GLMs) showed male gender as a risk factor of AC, with the relative risk of incidence of 1.521 and relative risk of death of 1.503. Globally, there were improvements in overall health with regard to

GBDs over the 30 years. However, the prevention of AC and ALC should be promoted in middle and middle-high SDI regions, especially Central Asia and East Europe, whereas more medical resources should be provided to improve treatment levels in low SDI region.

Source: Zhang, N., Xue, F., Wu, X. N., Zhang, W., Hou, J. J., Xiang, J. X., ... & Zhang, X. F. (2023). The global burden of alcoholic liver disease: a systematic analysis of the global burden of disease study 2019. *Alcohol and Alcoholism*, agad046. <https://doi.org/10.1093/alcalc/agad046>

RISK AND RESTRAINT—THE KEY TO UNDERSTANDING THE DECREASING USE OF ALCOHOL FOR YOUNG PEOPLE IN HIGH INCOME COUNTRIES?

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Introduction: In this article we seek to understand the changing social position of alcohol use for young people in Australia by identifying how alcohol has become framed as posing a significant risk to their bodies and futures.

Methods: Forty interviews were conducted with young people aged 18–21 years from Melbourne, Australia, who had previously identified as light drinkers or abstainers. Drawing on insights from contemporary sociologies of risk, we explored how risk was discussed as a governing concept that shaped young people's views of alcohol, and how it encouraged or necessitated risk-avoidance in daily life.

Results: Participants drew on a range of risk discourses in framing their abstention or moderate drinking along the lines of health, wellness, wisdom and productivity. They reiterated social constructions of heavy or regular alcohol use as irresponsible, threatening and potentially addictive. The focus on personal responsibility was striking in most accounts. Participants seemed to have routinised ways of practicing risk avoidance and coordinated drinking practices with other practices in their everyday life, with alcohol therefore 'competing for time'.

Discussion and Conclusions: Our findings endorse the idea that discourses of risk and individual responsibility shape the contemporary socio-cultural value of alcohol for young people. Risk avoidance has become routine and is manifested through the practice of restraint and control. This appears particular to high-income countries like Australia, where concerns about young people's futures and economic security are increasing, and where neoliberal politics are the foundations of governmental ideology.

Source: Pennay, A., Caluzzi, G., Livingston, M., & MacLean, S. (2023). Risk and restraint—The key to understanding the decreasing use of alcohol for young people in high income countries?. *Drug and Alcohol Review*. <https://doi.org/10.1111/dar.13709>

ASSOCIATIONS BETWEEN HEAVY EPISODIC DRINKING, DRINKING WHILE GAMBLING, AND RISKY GAMBLING

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Abstract

Introduction: Understanding how patterns of drinking are associated with risky gambling in Australia is needed to inform an effective approach to minimise harm. **Methods:** This cross-sectional questionnaire study reports on 2,704 subsampled participants who completed survey questions about their patterns of drinking. With logistic regressions, we examined whether frequency of heavy episodic drinking (HED) and alcohol use while gambling were associated with risky gambling while controlling for sociodemographic variables. **Results:** Occasional HED and monthly HED were associated with any gambling (versus no gambling), but frequent HED was not significantly associated with gambling. The opposite pattern was found when predicting risky gambling. Occasional HED (i.e. less than

monthly) was not significantly associated, but a higher frequency of HED (at least weekly) was associated with a higher likelihood of risky gambling. Drinking alcohol while gambling was associated with risky gambling, over and above HED. The combination of HED and use of alcohol while gambling appeared to significantly increase the likelihood of risky gambling. Conclusions: The association of HED and alcohol use while gambling with risky gambling highlights the importance of preventing heavy alcohol use among gamblers. The links between these forms of drinking and risky gambling further suggests that individuals who engage in both activities are specifically prone to gambling harm. Policies should therefore discourage alcohol use while gambling for example by prohibiting serving alcohol at reduced prices or to gamblers who show signs of being affected by alcohol and informing individuals of the risks associated with alcohol use while gambling.

Source: Smit, K., Jiang, H., Rockloff, M., Room, R., MacLean, S., & Laslett, A. M. (2023). Associations Between Heavy Episodic Drinking, Drinking While Gambling, and Risky Gambling. *Journal of Gambling Studies*, 1-14. <https://doi.org/10.1007/s10899-023-10235-w>

THE ASSOCIATION OF ALCOHOL DEPENDENCE AND CONSUMPTION DURING ADOLESCENCE WITH DEPRESSION IN YOUNG ADULTHOOD, IN ENGLAND: A PROSPECTIVE COHORT STUDY

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Background: The role of alcohol use in the development of depression is unclear. We aimed to investigate whether alcohol dependence, but not high frequency or quantity of consumption, during adolescence increased the risk of depression in young adulthood.

Methods: In this prospective cohort study, we included adolescents who were born to women recruited to the Avon Longitudinal Study of Parents and Children in Avon, UK, with delivery dates between April 1, 1991, and Dec 31, 1992. Alcohol dependence and consumption were measured at about age 16 years, 18 years, 19 years, 21 years, and 23 years using the self-reported Alcohol Use Disorders Identification Test, and at about age 18 years, 21 years, and 23 years using items corresponding to DSM-IV symptoms. The primary outcome was depression at age 24 years, assessed using the Clinical Interview Schedule Revised. Analyses were probit regressions between growth factors for alcohol dependence and consumption and depression, before and after adjustments for confounders: sex, housing tenure, maternal education, maternal depressive symptoms, parents' alcohol use, conduct problems at age 4 years, being bullied from age 12–16 years, and frequency of smoking cigarettes or cannabis. Adolescents were included in analyses if they had data from at least one timepoint for alcohol use and confounders.

Findings: We included 3902 adolescents (2264 [58·0%] female; 1638 [42·0%] male) in our analysis, and 3727 (96·7%) of 3853 participants with data on ethnicity were White. After adjustments, we found a positive association between alcohol dependence at 18 years of age (latent intercept) and depression at 24 years of age (probit coefficient 0·13 [95% CI 0·02 to 0·25]; $p=0\cdot019$), but no association between rate of change (linear slope) and depression (0·10 [−0·82 to 1·01]; $p=0\cdot84$). There was no evidence of an association between alcohol consumption and depression (latent intercept probit coefficient −0·01 [−0·06 to 0·03]; $p=0\cdot60$; linear slope 0·01 [−0·40 to 0·42]; $p=0\cdot96$) after adjustments.

Interpretation: Psychosocial or behavioural interventions that reduce the risk of alcohol dependence during adolescence could contribute to preventing depression in young adulthood.

Source: Hammerton, G., Lewis, G., Heron, J., Fernandes, G., Hickman, M., & Lewis, G. (2023). The association of alcohol dependence and consumption during adolescence with depression in young adulthood, in England: a prospective cohort study. *Lancet – Psychiatry*. [https://doi.org/10.1016/S2215-0366\(23\)00138-4](https://doi.org/10.1016/S2215-0366(23)00138-4)