

American Council on Alcohol Problems  
2376 Lakeside Drive  
Birmingham, AL 35244

# The American Issue

January—March, 2011

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## **Money—A Most Interesting Word** Dr. John Moore, MICAP

Since persons normally understand this word, so commonly used, I decided to look it up in “Webster’s New Universal Unabridged Dictionary.” Interesting. There were twenty definitions or statements about money. I decided to stick with a few of the ten synonyms: cash, assets, wealth and riches.

Christians accept the Bible as God’s authoritative Word, so I sought the help of “Strong’s Exhaustive Concordance of the Bible.” Money is first mentioned in Genesis 17:12. Money is mentioned twenty-one times in the Old Testament and six times in the New Testament from Genesis to First Timothy 6:10.

Through my life as a Christian, and most of my life as a Pastor, I find it interesting that the secular world finds it natural and easy to talk about money. Enter the Christian Church world and a person hears statements such as, “I’ll never go to that Church again, because all they ever talk about is money,” or “All that Pastor ever talks about is money.”

One of the great para-church ministry organizations in America, one hears little about, is headquartered in Birmingham, Alabama. The name of it is, American Council on Alcohol Problems or ACAP.

While the secular world deals with alcohol problems every day of the week, the Christian Church seldom addresses the alcohol problems in America.

The tobacco problems in America have been handled, by and large, by the secular world. They are to be congratulated! You and I are blessed by the changes they have made every day.

Who is going to take on the problem(s) of alcohol? Is the Christian Church not going to be courageous enough to speak out and take a stand? Are we afraid to speak up? Is the problem loss of members and/or income?

ACAP needs your help to continue its ministry. Not your tithe. Support of ACAP must come from offerings above the tithe.

I close with this appeal with the words of a song:  
My Father is rich in houses and lands,  
He holdeth the wealth of the world in His hands.  
Of rubies and diamonds, of silver and gold,  
His coffers are full, He has riches untold.  
I’m a child of the King, a child of the King,  
With Jesus, my Saviour, I’m a child of the King.”

Based on these words of financial assurance, what is your offering response to the opportunity to be in Christian ministry with ACAP? And may the King of Kings bless you.

## Action needed to reduce health impact of harmful alcohol use

The newly published *Global status report on alcohol and health analyses* available evidence on alcohol consumption and provides data in over 100 individual country profiles.

### News release

**11 February 2011 | Geneva** - Wider implementation of policies is needed to save lives and reduce the health impact of harmful alcohol drinking, says a new report launched today by WHO. Harmful use of alcohol results in the death of 2.5 million people annually, causes illness and injury to many more, and increasingly affects younger generations and drinkers in developing countries.

Harmful use of alcohol is defined as excessive use to the point that it causes damage to health and often includes adverse social consequences.

### Global alcohol report

The Global status report on alcohol and health analyses available evidence on alcohol consumption, consequences and policy interventions at global, regional and national levels.

“Many countries recognize the serious public health problems caused by the harmful use of alcohol and have taken steps to prevent the health and social burdens and treat those in need of care. But clearly much more needs to be done to reduce the loss of life and suffering associated with harmful alcohol use,” says Dr Ala Alwan, WHO Assistant Director-General for Noncommunicable Diseases and Mental Health.

### Health implications

Harmful use of alcohol has many implications on public health.

Nearly 4% of all deaths are related to alcohol. Most alcohol-related deaths are caused by alcohol result from injuries, cancer, cardiovascular diseases and liver cirrhosis.

Globally, 6.2% of all male deaths are related to alcohol, compared to 1.1% of female deaths. One-in-five men in the Russian Federation and neighbouring countries die due to alcohol-related causes.

Globally, 320 000 young people aged 15-29 years die annually, from alcohol-related causes, resulting in 9% of all deaths in that age group.

Too few countries use effective policy options to prevent death, disease and injury from alcohol use. From 1999, when WHO first began to report on alcohol policies, at least 34 countries have adopted some type of formal policies to reduce harmful use of alcohol. Restrictions on alcohol marketing and on drink-driving have increased, but there are no clear trends on most preventive measures. Many countries have weak alcohol policies and prevention programmes.

### Effective strategies

The Global Strategy to reduce the harmful use of alcohol, endorsed by WHO's Member States in May 2010, promotes a range of proven effective measures for reducing alcohol-related harm. These include taxation on alcohol to reduce harmful drinking; reducing availability through allowing fewer outlets to sell alcohol, raising age limits for those buying and using effective drink-driving measures.

The Global Strategy also promotes the screening and brief interventions in healthcare settings to change hazardous patterns of drinking, and treatment of alcohol use disorders; regulating or banning marketing of alcoholic beverages; and conducting information and educational campaigns in support of effective policy measures.

### Consumption

Worldwide consumption in 2005 was equal to 6.13 litres of pure alcohol consumed per person aged 15 years or older, according to the report. Analysis from 2001-2005 showed countries in the WHO Americas, European, Eastern Mediterranean and Western Pacific regions had relatively stable consumption levels during that time; but marked increases were seen in Africa and South-East Asia during the five-year period.

Despite widespread consumption, most people do not drink. Almost half of all men and two-thirds of women did not consume alcohol in 2005, according to the latest information made available in the report.

Abstinence rates are low in high-income, high consumption countries, and higher in North African and South Asian countries. But those who do drink in countries with high abstinence rates consume alcohol at high levels.

### **Reducing harmful use of alcohol worldwide**

Today's report launch coincides with the end of a four-day meeting of officials from over 100 countries working with WHO to reduce harmful use of alcohol worldwide. This first such meeting, hosted by WHO in Geneva, was held to initiate implementation of the Global Strategy to Reduce the Harmful Use of Alcohol. The strategy aims to raise awareness on the problems of harmful alcohol use and help countries to better prevent and reduce such harm.

### **Notes for the editor**

Harmful alcohol use is one of four common risk factors, along with tobacco use, poor diet and physical inactivity, for the four main groups of noncommunicable diseases (NCDs) – cardiovascular diseases, cancer, chronic lung diseases and diabetes.

To respond to the health and socioeconomic impacts of noncommunicable diseases, the United Nations General Assembly is holding a High-level Meeting on the Prevention and Control of NCDs on 19-20 September, 2011, in New York.

In the lead-up to the UN meeting, the Russian Federation and WHO are organizing the First Global Ministerial Conference on Healthy Lifestyles and NCDs Control in Moscow on 28-29 April.

### **For more information, please contact:**

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## **Youth Alcohol-Related ER Visits Spike on New Year's Day**

Join Together (<http://www.jointogether.org>) January 5, 2011

### Research Summary

Emergency room (ER) visits related to underage drinking shot up over 250 percent on New Year's Day 2009, according to a Substance Abuse and Mental Health Services Administration (SAMHSA) press release issued Dec. 30.

The data, drawn from the agency's 2009 Drug Abuse Warning Network (DAWN) report, showed an estimated 1,980 cases of ER visits linked to underage drinking on New Year's Day. That number was 263 percent higher than the annual average of 546 visits per day. It was also much higher than the estimated 942 visits related to teen drinking on the Fourth of July, and 676 visits on Memorial Day.

"This stunning increase in underage drinking related emergency room visits on New Year's Day should be a wake-up call to parents, community leaders and all caring adults about the potential risks our young people face for alcohol-related accidents, injuries and death during this time of year," said Pamela S. Hyde, J.D., administrator of SAMHSA.

A one-page report, "Emergency Department Visits for Underage Drinking Increase on New Year's Day," was published in Data Spotlight (PDF) on Dec. 30, 2010, by SAMHSA's Center for Behavioral Health Statistics and Quality.

A longer report, "Highlights of the 2009 Drug Abuse Warning Network (DAWN) Findings on Drug-Related Emergency Department Visits," appeared in The DAWN Report (PDF) on Dec. 28, 2010.

<http://oas.samhsa.gov/spotlight/Spotlight015UADNewYears.pdf>

<http://www.oas.samhsa.gov/2k11/DAWN025/AlcDrugsComboHTML.pdf>

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TO:

**PURPOSE:** American Council on Alcohol Problems is the channel of cooperation through which state temperance organizations, national religious bodies and similar concerned groups and individuals in America can unite to deal with the problems caused by alcohol and other drugs.

ACAP provides the forum and the mechanism through which concerned persons can find common ground on alcohol and other drug problems and address these issues with a united voice. It is the successor organization to the American Temperance League and the Anti-Saloon League established in 1895. Membership of ACAP presently is made up of 30 local temperance organizations, 22 national Christian denominations, and other fraternal organizations that support ACAP's philosophy of abstinence.

(ACAP is classified by the IRS as a 501 (c)(3) tax-deductible charity.)

Checks should be made payable to:

**American Council on Alcohol Problems**

Mail to: 2376 Lakeside Drive, Birmingham, AL 35244

#### ACAP Officers

President: jIM Butler, CA

President-elect: Mark Creech, NC

Secretary: Anita Bedell, IL

Exec. Dir.: D.L. Dan Ireland, AL

Office Secretary: Cheryl Corley, AL

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*College Students Who Use Energy Drinks More Than Twice as Likely to Initiate Nonmedical Use of Prescription Stimulants and Analgesics in Subsequent Year CEASAR FAX Volume 19 Issue 42*

More than one-third (36.5%) of third-year college students reported that they consumed energy drinks in 2006, according to data from the College Life Study, an ongoing longitudinal study of a cohort of college students recruited from one large, public, mid-Atlantic university. Energy drink use was significantly related to higher levels of past and concurrent alcohol and drug use (data not shown). In addition, energy drink users were significantly more likely to subsequently initiate the nonmedical use of prescription stimulants and analgesics. Nearly one-fifth (18.8%) of energy drink users who reported no prescription stimulant use in their second year of college subsequently started using prescription stimulants nonmedically the following year, compared to only 8.2% of energy drink nonusers. Similar results were found for the initiation of the nonmedical use of prescription analgesics (8.5% vs. 4.0%). Additionally, energy drink use predicted subsequent nonmedical use of prescription stimulants and analgesics, even after controlling for demographics, sensation seeking, caffeine consumption, and prior use of the drug of interest. However, no such association was found for subsequent use of other drugs (i.e., tobacco, marijuana, hallucinogens, cocaine, ecstasy, or prescription tranquilizers). According to the authors, "one possible explanation is that energy drinks, like prescription drugs, might be regarded by some students as safer, more normative, or more socially acceptable than using illicit 'street' drugs..." (p. 79).

#### **Percentage of College Students at a Large, Public Mid-Atlantic University Initiating Nonmedical Prescription Stimulant and Prescription Analgesic Use in Their Third Year of College, by Energy Drink Use in Their Second Year of College, 2005-2006**

SOURCE: Adapted by CESAR from Arria, A.M., Caldeira, K.M., Kasperski, S.J., O'Grady, K.E., Vincent, K.B., Griffiths, R.R., and Wish, E.D., "Increased Alcohol Consumption, Nonmedical Prescription Drug Use, and Illicit Drug Use Are Associated with Energy Drink Consumption Among College Students," *Addiction Medicine* 4(2):74-80, 2010. For more information, contact Dr. Ameila Arria at aarria@umd.edu.

