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Notes on Misc Alcohol Bill from Marielle Matthews, MPH
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My name is Marielle Matthews, I use she/her or they/them pronouns, and I'm here today to testify on the miscellaneous alcohol proposed legislation the committee is considering.

I live in Burlington Vermont and work part time in Winooski Vermont and part time for my consultancy in Burlington. I need to disclose that I work for Kate Nugent, who is the Executive Director of the Winooski Partnership for Prevention when she's not doing legislative work. However, I'm here today representing my consultancy, Matthews Public Health Consulting, LLC and am volunteering my time.

My public health focus is on subfield of health behavior, which is essentially the science of health-related decision making. What drives populations to get vaccinated, take behavioral precautions in areas with infectious diseases, lose weight, be more active, stay safe at work, or reduce consumption of unhealthy products? I've spent several years working with health departments, law enforcement, and community organizations across the country around public health policies related to age-restricted substances or items, such as alcohol, tobacco, cannabis, guns, lottery, etc.

I'd like to present some considerations to the committee on potential public health consequences of the proposed legislation. I appreciated Skyler Genest's testimony last week on the potential effect of revisions to sections 1 and 2 relating to V.S.A. § 221 on First Class Licenses and V.S.A. § 223 on Third Class Licenses as they pertain to outlet density. As the committee heard last week, there is substantial evidence linking increased outlet density to increased public health issues, including but not limited to violent crime, including aggravated assaults, intimate partner violence, and child abuse. In terms of prevention of substance use disorders at a population level, these issues are really concerning because they are all ACEs – Adverse Childhood Experiences – which when experienced by youth predict future development of substance use disorders. So, a rise in substance-related or substance-induced violence today is likely to lead to an increase in substance use disorders for the next generation.

I think this issue could be mitigated by further collaboration between legislators and DLL on language that would not risk a density increase, or by a proposal of a density cap. We don't yet have one in Vermont, but this is a public health best practice across age-restricted substances, and is often implemented at the municipal level, so the legislature may need to grant municipal authority to do this. One other missing public health best practice is a buffer zone around youth serving venues, such as schools and parks. In sum, I'd propose delaying this piece of the legislation until density consequences and compliance implications could be considered with relevant authorities, such as the division of substance use and the dept of liquor and lottery.

I am aware of other states that have implemented legislation that blends off-premise and on-premise sales, but there are typically differing quantities that are allowed to be sold in each case. For instance, if a drink is to be consumed on site, you can buy one at a time. If a drink is to be consumed off site, you may purchase more than one to take off-premises. This is important from a seller training perspective, as Chief Genest alluded to in his testimony. From a public health perspective, while we see increases in crime with both types of establishments, off-premise sales tend to have stronger associations with crimes committed in private such as sexual violence, homicide, and child abuse. Off-premise sales are also typically how underage folks gain access to alcohol. On-premise sales consumption tends to be associated with crimes that are witnessed by the public, and thus sometimes have more opportunity for timely intervention. One NIH funded study in 2018 (Snowden) concluded QUOTE Access to outlets that allow for off-site consumption had a greater association with violent

crime than outlets that only permit on-site consumption. The lack of effective measures to keep order in and around off-premise outlets could attract or multiply violent crime. END QUOTE.

Both are associated with increases in retail theft and DUIs so I'd ask legislators to consider those issues as well. Coming from the Burlington and Winooski perspective, violent crime, theft, and a feeling of unease are all things our community is dealing with a lot right now and as a resident, I wouldn't want to see expanded alcohol access exacerbate those issues and continue to contribute to a public fear of commercial areas.

I would also be remiss if I didn't mention that alcohol use also contributes to fatal overdose, as it impairs executive function, which in turn affects the circumstances of drug use and leads to decreased impulse control and poor choices such as using drugs alone. I did get some numbers from our state attorney general for Chittenden County and of the last 46 fatal overdoses that she had received toxicology reports for, 30% of the reports found alcohol in the blood toxicology exam.

On section Sec. 3 & 4. 7 V.S.A. § 2 definitions – I have no position on changing these inclusion criteria, however would ask that the committee consider place and proximity to schools in these criteria. It's typical to have a 500 ft or 1000 ft buffer zone around schools where age-restricted products cannot be sold or served.

On section 5 I have no position.

On section 6 I echo Skyler Genest in requesting consideration around limiting the aggregate and frequency of these permits.

Things that are not in this proposed legislation but were mentioned in previous testimony that I feel I should comment on:

There was a request for allowance of happy hour. There are several on-premise specific factors that are associated with violence around a bar, including extended service hours, continued sale to patrons who have overconsumed, and sale of cheap drinks, including low prices that are facilitated by happy hour. All of those practices have been shown across the country to increase violent crime (Snowden, Trangenstein, Baldwin).

There was mention of the lack of consistent enforcement of alcohol regulations in VT, with the implication being around undercover buy programs. From a public health perspective, this is certainly an issue that I hope the legislature chooses to address. The expansion special event permits and potential merger of on-premise and off-premise sales would add extra burden to whatever age verification program gets implemented. For reference the FDA law for tobacco is to card everyone who looks under 40, and that's what we ought to hold for minimum our standard for all other age-restricted products.

There was mention of lowering the RTD tax to have parity with other taxes. I believe that these other taxes ought to be raised, in part to cover the cost of enforcement, but the increase could also be used to address other alcohol-related harms such as sexual violence prevention, child abuse prevention, gun-related crime prevention (including suicides, homicides, and accidental discharges), fatal overdose prevention, mental health supports, or cancer prevention.

RESOURCES

General background on crimes associated with alcohol:

- <https://www.alcoholrehabguide.org/alcohol/crimes/>

Resource on outlet density, proximity, and crime:

- <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6214776/>
- <https://link.springer.com/article/10.1057/s41284-019-00213-6>

Resources on consequences of happy hour/ cheap drinks:

- <https://substanceabusepolicy.biomedcentral.com/articles/10.1186/1747-597X-9-17>
- <https://www.tandfonline.com/doi/full/10.3109/00952990.2014.918622>