

# Excessive Alcohol Use and Health Equity

Considerations for Framing Alcohol  
Policy Issues

Julie Sweetland, PhD, Senior Advisor  
Clara Blustein Lindholm, Principal Strategist

JULY 2023



Prepared for ChangeLab Solutions in cooperation with the Alcohol Program of the CDC National Center for Chronic Disease Prevention and Health Promotion.

# Contents

Contents .....	2
Introduction .....	3
Framing Toward Solutions .....	4
Regulating alcohol outlet density .....	6
Increase alcohol taxes .....	8
Support thoughtful neighborhood design .....	10
Implement commercial host liability laws .....	11
Emphasizing Explanation .....	13
Equity Spotlights .....	15
Words to Watch .....	18
Concluding thoughts .....	20
Acknowledgment .....	21
About FrameWorks .....	22

# Introduction

Communicating to the public about health hazards in ways that promote health equity is a core public health function. When it comes to talking about the harms related to alcohol consumption in the US, public health voices may need to navigate several framing challenges. Such challenges range from the history of alcohol regulation in the US—the Prohibition era casts a long shadow on public thinking—to the contemporary perception that the production, distribution, and sale of beer, wine, and spirits are essential to state and local economies. To advance the adoption and implementation of effective public health approaches to reducing alcohol-related harms, public health voices may need ways to articulate the case in ways that make the benefits clear, avoid stigmatizing people who consume alcohol, and build support for policies that work for communities facing the greatest burden from alcohol-related health problems.

This brief offers insights from social science research on how to effectively frame public-facing communications on preventing and reducing alcohol-related harms. It was prepared by the FrameWorks Institute for ChangeLab Solutions in cooperation with the Alcohol Program of the CDC National Center for Chronic Disease Prevention and Health Promotion. Its primary intended audience is public health professionals working in government public health agencies at the federal, tribal, state, or local levels. Advocates working in non-governmental organizations to advance health equity, promote community-led public safety, prevent substance misuse, or reduce harm from alcohol may also find the recommended strategies of use.

This brief unfolds in four parts:

- **Framing Toward Solutions.** This section offers considerations for more effectively talking about three evidence-based strategies for reducing excessive alcohol use in communities: alcohol taxes, commercial host liability, and reduced alcohol outlet density.
- **Emphasizing Explanation.** This section offers language options for leading the public down the causal pathways that connect root causes to public health outcomes.
- **Equity Spotlights.** This section highlights key considerations for talking about risks or harms that are higher for racialized or marginalized groups and ways to focus attention on strategies for advancing health equity.
- **Words to Watch.** This section offers a guide to words that public audiences may misinterpret and offers options for alternatives.

# Framing Toward Solutions

Building solutions into every communication establishes an important foundation for attitudes that favor evidence-based public health measures. Just as importantly, solutions-oriented framing prevents communicators from being satisfied with merely building awareness on an issue that demands action. Finally, solutions-oriented framing can help to keep communications concise. When communicators consciously build toward a particular point, it becomes less tempting to include unnecessary details or data.

Leaving solutions out, on the other hand, comes with unnecessary and unacceptable risks. When communicators highlight a major social problem like alcohol-related harms without also helping people see the possibilities for meaningful and tangible change, it risks sparking fatalism and feeding a cycle of cynicism.

This section offers sample language and framing considerations for some of the evidence-based public health approaches reviewed in the Community Preventive Services Task Force Guide to Community Preventive Services (the Community Guide). (Figure 1, “Helping People See Public Health Solutions” offers general principles for framing solutions effectively for the public, partners, and policymakers.)

Policy approaches that have strong evidence for public health impact include:

- Regulating **alcohol outlet density**
- Implementing **taxes** on alcohol
- Adopting **commercial liability laws** that hold owners of alcohol outlets responsible for some alcohol-related harms.

Because two of these policies reduce consumption by increasing the price of alcohol and reducing alcohol sales, it will be important, framing-wise, to illustrate what businesses could sell instead. Thus, FrameWorks also recommends that public health voices proactively describe a vision for **implementing healthy retail environments and thoughtful neighborhood design**.

**Figure 1: Helping People See Public Health Solutions**

While the public health solutions you mention will likely vary from one communication to another, there are general framing principles to keep in mind as you describe them. When it comes to describing public health solutions, the following characteristics help people visualize new directions and feel more confident in the journey to get there:

**Collective:** Lift up solutions that expand people’s ideas of what can happen at the institutional, community, state, tribal, or national levels. Avoid over-relying on “education,” “training,” or “awareness” as examples, especially when your goal is to drive policy. When used as messages, information-oriented solutions reinforce the narrow mindset that alcohol-related problems live primarily in individual attitudes and actions, which obscures the need for structural change.

**Concrete:** Offer real or realistic examples of what communities can do to make excessive alcohol use less likely and less common. Give examples that help people imagine what a proposed approach would look like in practice. Tell memorable, relatable stories that depict an effective alcohol policy in action. Name and explain the “active ingredient” that makes it work.

**Conceivable:** Even if the direction you are sharing is transformational, it can help to talk about it in ways that seem feasible. While it’s neither honest nor necessary to make change sound easy, it is important to build the sense that change is possible.

**Credible.** Make it clear that you’re offering a solution that is in the public interest. Avoid framing that could leave the impression that you’re on a crusade or in pursuit of a special interest agenda. Offer a mix of supporting evidence, including data from a variety of settings. Bring the data to life with stories. When possible, engage trusted messengers who can effectively bring new or unpopular ideas into spaces where they need to be understood and discussed.

**Clear:** Use familiar, everyday vocabulary—not jargon. Explain key concepts. Shorten sentences. Look for places to add images that help people imagine the solution you have in mind.

## Regulating alcohol outlet density

Regulating alcohol outlet density involves using zoning, licensing, or other regulatory authority to reduce or limit the number of places that sell alcohol in a given area. The expressive power of this strategy is high: it is a clearly structural solution; it lends itself to illustrating disparities in ways that don't reinforce stigma; and it is easy to explain. For these reasons, consider turning to this policy strategy often as an example.

When communicating about this topic, keep in mind the framing insights below:

- **Use plain language to explain “outlet density.”** It's a concept that people can readily grasp, but only if you explain it in everyday terms. See Figure 2 below for an example that distinguishes research-oriented public health framing from plain-language framing suitable for non-experts.
- **Reach for a “pressure” metaphor.** By comparing the number of alcohol outlets to a form of pressure on a community, you can help people think about the benefits of reducing availability.<sup>1</sup>
- **Connect the issue of alcohol outlet density to health equity issues whenever the data or context allow.** Look for opportunities to raise issues of fairness and justice. For instance, point out that one way that structural racism has worked has been through disinvestment in communities of color, which has led to the proliferation of small, independent stores that sell items that cause disease, like alcohol.
- **Be ready to point out the hidden costs of alcohol sales.** Don't base the case for outlet density regulations on a fiscal analysis but be ready to speak to it as needed. If policy influencers (business leaders, government officials, etc.) express concerns about reducing outlet density because of the revenue that “party zones” can create, pivot to your own economic argument. Point out that when policies promote excessive alcohol consumption, communities end up paying more in health care and law enforcement costs than is gained in economic activity. Use this talking point selectively and wisely: FrameWorks has found that on public health issues, it is typically ineffective to message to the

---

<sup>1</sup> In a national experiment designed to yield effective framing strategies for tobacco-related health disparities, the pressure metaphor helped the general public better understand the social and environmental factors that drive tobacco use and built support for evidence-based tobacco prevention and control policies. For more, see: FrameWorks Institute. (2020). *Justice in the Air: Framing Tobacco-Related Health Disparities*. Washington, DC: FrameWorks Institute.

general public about the economic cost of a health problem, because it leads the public to blame “those people” for driving up health care costs.

**Figure 2. Example of revising to use plain language**

Framed for other researchers	Reframed for public and policymakers
<p>“High alcohol outlet density, defined as a high concentration of retail alcohol outlets in a small area, is known to be an environmental risk factor for excessive drinking. To prevent excessive drinking, the Community Preventive Services Task Force recommends limiting alcohol outlet density through the use of regulatory authority (e.g., licensing and zoning), which is based on strong scientific evidence of intervention effectiveness.”</p>	<p>“When there are many places that sell and advertise alcohol in a particular area, people tend to drink more. Excessive alcohol consumption causes a number of health and safety problems, from car crashes to cancer. When communities set policies so that alcohol outlets are fewer and farther apart, it improves health and safety.”</p>

Figure 3 below offers several examples of plain-language explanations that can be used or adapted to make public health communications easier to understand by a broader audience.

**Figure 3: Explaining why it helps to regulate outlet density**

Each of the explanations below tightly connects cause and effect as well plain-language techniques like shortening sentences and selecting everyday vocabulary.

“When there are many places that sell and advertise alcohol in a particular area, people tend to drink more. Excessive alcohol consumption causes many health and safety problems, from car crashes to cancer. When communities set rules so that alcohol outlets are fewer and farther apart, it improves health and safety.”

“Near clusters of bars and other places that sell alcohol, excessive alcohol use increases. This leads to a build-up of alcohol-related problems like noise, violence, and injuries. To relieve the alcohol-related pressures on a community, it can help to regulate the number and spacing of places that sell alcohol.”

“Excessive alcohol use has an uneven impact on communities. The harms can fall disproportionately on communities that have more places selling or serving alcohol, creating health inequities.”

“No matter where people live, everyone deserves to be safe from the injuries, disruptions, and other problems that can build up in neighborhoods with many places that sell and serve alcohol.”

## Increase alcohol taxes

Federal, state, and local governments can enact taxes on beer, wine, or distilled spirits, which increases the price and thereby reduces consumption. Framing this evidence-based policy requires thought and care, as often-repeated narratives about taxes may mean that many audiences have an immediately negative response.

When communicating about this topic, keep in mind the framing insights below:

- **Focus on making a well-framed affirmative case.** It can be tempting to pre-empt anticipated resistance by acknowledging that taxes are unpopular, difficult to pass, or politically sensitive. It’s important to avoid this temptation. Don’t craft your communications as if you are rebutting or pre-empting the arguments of a real or imagined opponent. Repeating barriers to the policy – such as acknowledging that taxes are unpopular and politically difficult to enact – is essentially arguing against yourself. Use your limited communications opportunities to offer a positive, precise vision of the taxes you believe could be implemented and what the revenue could support. (See Figure 4 for an example.)
- **Make the story about updating taxes for the needs of today.** Tell people that the US last adjusted the federal tax on alcohol in 1991. Consider using social math to show how outdated federal taxes are by offering images of the earlier era’s politics or technology. “The last time we updated the federal tax on alcohol, “were all still using VHS tapes and floppy disks.” “We last updated the federal tax on alcohol in 1991 - the same year that Gorbachev took steps to dissolve the USSR.”
- **Lean toward verbs that connote precision or progress, rather than increase.** Talk about “setting,” “calibrating,” “adjusting,” “updating,” or “modernizing” rates rather than relying solely on terms like “increasing” or “raising.”



- **Describe policies as a tax on alcohol.** Don't talk about alcohol taxes as taxes on people who drink, as this individualizes the issue and thereby undermines a public health perspective. Likewise, avoid the argument that alcohol taxes are "fair" because they only affect those who drink. This argument not only individualizes the issue, but also reinforces a narrative that taxes are akin to a form of punishment, which distracts from the understanding that taxes provide resources for the common good.
- **Emphasize the potential positive uses of revenues.** FrameWorks' research suggests that connecting taxes to what they will fund is one of the few effective ways to build support for tax increases in the US. When it comes to alcohol taxes, make the point that revenues from alcohol taxes could be used to improve the health and wellbeing in communities that experience high rates of alcohol-related harms.
- **Recognize the limits and pitfalls of "incentivizing" framing.** It may seem logical to share the observation that taxes decrease consumption by increasing prices, but there are good reasons to rethink this impulse when it comes to communicating with general audiences. When communicators talk about taxes as a mechanism that drives behavior, it's easy for many Americans to conclude that the intervention is "manipulation," and that it's possible that the government is acting inappropriately. For this reason, it may make sense to reserve the public health impacts of alcohol taxes as a message suited primarily for expert audiences.
- **Take an aspirational, can-do tone when it comes to talking about taxes on alcohol.** Don't reinforce fatalistic thinking by suggesting that it's unlikely that elected officials would make unpopular decisions such as increasing alcohol taxes. Instead, offer the sense that sensible people will see the wisdom in adjusting alcohol taxes: "As we learn more about how alcohol harms individual and community wellbeing, we can take steps to redirect the revenue that alcohol generates toward creating healthier environments."

**Figure 4. Arguing for your idea, not against the opposition**

Framed with restating the barrier	Reframed with the affirmative case
Raising the alcohol tax might not be popular, but there's strong evidence to suggest it's worth doing.	Effective taxes on alcohol could provide much-needed revenue for community health initiatives.

## Support thoughtful neighborhood design

People often hesitate to take something away without a sense of what could go in its place. Yet the previous two alcohol policy strategies – outlet density and taxes – reduce the health harms of alcohol by reducing the availability and purchase of alcohol. To balance the “subtractive” nature of these options, it can help if communicators describe a vision for **supporting healthy retail environments and thoughtful neighborhood design**.

When communicating about this topic, keep in mind the framing insights below:

- **Begin with essential background.** Establish that what surrounds us, shapes us.
  - If your topic is healthy retail, say that stores affect community health by shaping whether people see and access nourishing food that gives our bodies what they need, or unhealthy items that lack nutrition and cause disease.
  - If your topic is healthy community design, talk about the importance of a thoughtfully planned neighborhood. Say that when neighborhoods are thoughtfully planned out so that they include what people need to be healthy and well, they support healthy, thriving communities.
- **Offer a positive vision for community development and economic activity.** Paint a vivid picture of the possibilities, including examples of places where effective strategies have been implemented. Lead with community health benefits rather than relying on or overemphasizing the economic reasons for healthy neighborhood design. At the same time, be clear that with effective policies, it's possible to promote economic development in ways that don't rely on excessive alcohol consumption. When stakeholders express concern about the loss of alcohol-related revenue, point out that there are many ways to build a vibrant business district.

- **Contrast unhealthy and healthy retail environments.** Use juxtaposition to help people visualize the differences. Use explanation to spell out the effects of each type of retail environment. Point out the role that policy could play in reshaping unhealthy environments and building healthy alternatives.

**Figure 5. Sample messaging on thoughtful neighborhood design**

“We all know that there are neighborhoods that investors have long avoided because of the effects of structural racism or economic marginalization. Those areas often only have stores and establishments that sell alcohol, tobacco, and junk food, which invites the health problems caused by these products. It doesn’t have to be this way. We can use policy to encourage and support thoughtful neighborhood design that promotes health and a sense of community. A thoughtfully planned neighborhood has a diversity of businesses, lots of options for recreation, and stores and restaurants where people can eat and drink in ways that are nourishing both physically and socially.”

## Implement commercial host liability laws

Commercial host liability laws hold an alcohol retailer responsible for harm caused by a patron to whom the retailer illegally served or sold alcohol. For example, if a bar illegally serves alcohol to a visibly intoxicated person who then causes a car crash, the parties harmed by the car crash could hold the bar responsible. While this policy has a strong evidence base behind it, some ways of framing it could lead audiences to misunderstand or reject it. This section offers considerations for communicating it effectively.

- **Emphasize that this policy applies to illegally served alcohol.** Point out that where these laws are in place, they reduce illegal sales and promote compliance with existing laws.
- **Emphasize compliance, not punishment.** A punitive frame undermines other public health imperatives and measures. Moreover, audiences may wonder if the punishment is truly deserved. A compliance frame, on the other hand, works well with a larger narrative about effective government and ethical business practices.
- **Use plain language and examples that build understanding.** In most instances, it is less important to name and define the labels for such laws than it is to help audiences to understand how policy could be strengthened in ways that reduce illegal sales. See Figure 6 below for an example that distinguishes research-

oriented public health framing from plain-language framing suitable for non-experts.

**Figure 6. Framing commercial host liability laws for non-experts**

Framed for other researchers	Reframed for the public/policymakers
<p>Commercial host liability laws — sometimes known as dram shop laws — are designed to promote responsible beverage service. Dram shop laws in most jurisdictions establish liability on a negligence (i.e., not strict liability) basis, for serving alcohol to a patron whom the server knows or reasonably should know is intoxicated, or for serving alcohol to someone under the legal drinking age. Strong commercial shop laws promote compliance with existing regulations and reduce rates of excessive alcohol consumption.</p>	<p>Laws that restrict bars from serving alcohol to people who are underage or visibly intoxicated are important public health protections but are unevenly followed and enforced. One solution is to make it possible to hold bar owners legally responsible for car crashes or other harm caused by illegally served patrons. Where such laws have been adopted, illegal beverage service has decreased, and so have the problems that come with it.</p>

# Emphasizing Explanation

Effective explanations are a key framing tool for equity. When communicators explain how underlying causes give rise to visible symptoms, it reduces people's tendency to blame affected groups for the problems they face. Explaining how existing systems and structures create unhealthy or unfair conditions builds support for policy solutions that reduce health disparities.

Take care to discern the difference between assertion, which is stating what you believe to be true, and explanation, which is offering insight into how something happens. See Figure 7 below for an illustration of how they differ.

An effective public health communication can begin with an assertion, but it shouldn't stop there. When people have a sense of why two things are connected, or how one thing leads to another, they are more likely to understand it, believe it, and remember it.

**Figure 7. Assertion vs. explanation**

<b>Assertion (listing links and risk factors)</b>	<b>Explanation (showing the mechanism)</b>
<p>Alcohol is a major risk factor for cancer. Research shows that alcohol increases the risk of many kinds of cancers, including colorectal, breast, esophageal, liver, and oral cancers. Alcohol use accounts for about 6% of all cancers and 4% of all cancer deaths in the United States. The less you drink, the lower your risk for cancer.</p>	<p>Alcohol is a major risk factor for cancer. Because the body breaks alcohol down into a compound that damages cells and slows cell repair, excessive alcohol use can allow cancerous cells to grow and spread. This helps to explain why the less you drink, the lower your risk for cancer.</p>

Consider organizing your communications around a set of key explanations: a curated set of mechanisms and causal pathways that connect public health policies to public health outcomes. Below, FrameWorks offers a starter set of explanations based on the understanding of the issue we constructed through document review and interviews.

**Figure 8. Causal pathways that can deepen understanding of alcohol policy issues**

1. The availability and visibility of alcohol influences consumption and related health outcomes.
2. Because alcohol has immediate effects on physical and cognitive abilities, excessive alcohol consumption increases short-term health and safety risks like car crashes, injuries, and violence.
3. Because the body breaks alcohol down into a compound that damages cells and slows healing, excessive alcohol consumption can cause or worsen many serious health conditions, including cancer.
4. Excessive alcohol use can heighten threatening interactions with police. Because stereotypes can influence police officers' decisions, encounters with police can be more severe and harmful for people who face racism or other forms of discrimination.
5. Public health measures have been shown to reduce excessive alcohol use and the problems it causes, but they are unevenly implemented and enforced. The communities that face structural racism or economic marginalization are often the same communities that lack these vital public health protections.
6. In most states, it is illegal to sell alcohol to people who are visibly intoxicated, but these laws are unevenly followed and enforced.

# Equity Spotlights

To improve public health outcomes, it is essential to look at public health measures through a health equity lens. When communicators develop or implement strategies without a health equity analysis, it risks intervening in ways that create or widen health disparities for people who face structural racism, economic marginalization, identity-based discrimination, or other forms of injustice.

Framing can help to mitigate this risk. When communicators frame issues in ways that help audiences see and consider public health topics in equity-minded ways, it channels attention to the needs, concerns, and perspectives of communities most affected by a public health issue. Framing alcohol policy issues in equity-focused ways requires techniques other than highlighting data on disparities across subpopulations, as without careful framing, such data can spark or reinforce biased attitudes against affected groups. This section offers insights on alternatives.

- **Explain concepts in ways that promote health equity, but don't let the term "health equity" become a distraction.** To solve the public health problems communities face, it's vital to eliminate persistent inequities and prioritize the perspectives of people most affected by a problem. Within public health circles, many use the term "health equity" to express such commitments. But there are good reasons to take care when using this phrase more widely. Different audiences have different levels of comfort and familiarity with the concept. Among the general public, the term equity isn't widely understood. In some states, the term has been singled out in state regulations as a word to avoid. Given these public and political perceptions, it is important that people working on alcohol policy issues are equipped to talk about the concept of health equity in a variety of ways, rather than being beholden to a definition or label that slows progress.

From a framing point of view, three ideas are essential to building a compelling case that a situation is inequitable and demands a public, equity-focused response:

- The situation is *uneven*, meaning that conditions or outcomes vary systematically
- The situation is *unfair*, meaning that treatment or conditions are arbitrary, discriminatory, or otherwise unjust
- The solution is *responsive*, meaning that it accounts for context rather than offering uniform, one-size-fits all treatment

Figure 9 offers an example of an explanation that begins with a sentence including the concept that the situation is unfair and concludes with a sentence explaining a responsive public health measure. Adding data to this paragraph – for example, by inserting a statistic illustrating a population which experiences disproportionate levels of an alcohol-related harm – would complete the frame with evidence that the situation is uneven.

**Figure 9: Explaining why it helps to regulate outlet density**

“It is unfair that some communities experience more injury, crime, and violence than others because their neighborhood has more places that serve and sell alcohol. When we reduce the concentration of places that sell alcohol in a given area, we move toward ensuring everyone has a full and fair opportunity to be as safe and healthy as possible.”

- **Look for opportunities to evidence-based alcohol strategies in ways that reduce health disparities and advance health equity.** Figure 6 offers examples of the same basic strategy described in two different ways: the first in generic public health terms, and the second with wording that focuses attention on elements of a policy that would support health equity.

**Figure 10. Framing solutions in terms of public health vs. health equity:**

Strategy in generic public health terms	Strategy with health equity lens
– Regulate alcohol outlet density	– Reduce alcohol outlet density in communities affected by alcohol-related health problems
– Increase federal alcohol taxes to discourage excessive alcohol use and reduce alcohol-related health burdens	– Increase federal taxes on alcohol and invest the revenue in communities that face more alcohol-related harms
– Adopt liability laws that hold commercial hosts responsible for some alcohol-related harms	– Build communities’ capacity to hold bar owners responsible for illegally serving alcohol



- **Lead with policies and places, not behaviors or populations.** To advance health equity, FrameWorks recommends emphasizing uneven and unjust policies and social conditions that contribute to disparities in alcohol-related harms, rather than highlighting population-based disparities in alcohol consumption or alcohol-related morbidity and mortality. That is: focus first on policies and how they influence places. Introduce the disparate effects on priority populations as an illustration of why the policy is unfair. Be sure to explicitly express values that remind people why disparities matter, rather than expecting the disparity data to speak for itself.

**Figure 11. Emphasizing populations vs. emphasizing context**

Framed with disproportionality	Reframed with principles and policies
<p>Although Non-Whites consume less alcohol than Whites, they experience higher levels of negative consequences from drinking because of higher poverty levels, unfair medical treatment, and racial/ethnic stigma.</p> <p>The negative consequences and harm from alcohol use continue to disproportionately impact racial and ethnic minorities in the United States. Additional research is needed to identify the underlying causes of racial and ethnic disparities from alcohol use.</p>	<p>Excessive use of alcohol contributes to health problems, from injuries to heart disease to cancer, and to social problems, such as violence. To ensure that everyone has a full and fair opportunity to be as healthy as possible, we need to ensure that every community benefits from policies that reduce excessive alcohol use and prevent the harm it can cause. Often, communities facing economic or racial injustice are the very communities that lack these vital public health protections.</p>

# Words to Watch

Sometimes, a single word can make an outsized difference in how an issue is framed and understood. This short list highlights a few vocabulary items that are in common use in the wider public health field. This list is based on recent experience in reviewing language from public health stakeholders. The intention is to help public health communicators make use of person-first, asset-based vocabulary and plain language, which supports an overall shift to a health equity frame. This list is presented in alphabetical order. It is not meant to be exhaustive.

**Figure 12. Words to replace and embrace.**

Replace	Embrace	Why?
Alcohol Abuse	Excessive alcohol use	<p>“Abuse” connotes a judgment of behavior and is stigmatizing.</p> <p>Note: CDC has found that “excessive alcohol use” communicates the necessary concept more clearly than “alcohol misuse.”</p>
Alcoholism/alcoholic	Alcohol use disorder/person with alcohol use disorder	<p>The term “alcohol use disorder” is less stigmatizing than the term “alcoholism.” In addition, alcohol use disorder is the clinical categorization used in the current Diagnostic and Statistical Manual of Mental Disorders. Precise language promotes shared understanding and reduces stigmatization of behaviors.</p>
Drinkers	<p>People who drink</p> <p>People who consume alcohol</p>	<p>Person-first language focuses attention on people’s humanity rather than a condition or behavior. This conveys respect and helps to interrupt bias and stigma.</p>
Binge drinking	<p>For women, 4+ drinks on a single occasion; for men, 5+ drinks on a single occasion.</p>	<p>Precise language promotes shared understanding and reduces stigmatization of behaviors.</p>

Vulnerable  
populations

People  
  
Groups facing  
racism or other  
forms of  
marginalization/  
oppression

The phrase “vulnerable populations” does not clearly attribute responsibility for the problem. Rewording to attribute responsibility to social forces, like racism or marginalization, focuses attention on systems and structures.

---

### Is it better to say, “excessive alcohol use” or “alcohol-related harms?”

The term “excessive alcohol use” serves some important purposes. It is more precise and less stigmatizing than previously common terms like “problem drinking.” It also provides a way to draw connections between types of harmful use that may otherwise be seen as distinct (such as drinking during pregnancy and drinking while driving.) Thus, there’s no reason to avoid the term altogether. Before using it, however, consider whether it would be more effective to frame the issue as *alcohol-related harms* or *alcohol-related health* problems. Excessive alcohol use is, by definition, an individual behavior. When people attribute responsibility for a problem to individuals, they often conclude that the only appropriate solutions operate at the level of individual behavior change. Reframing the problem as *alcohol-related harms* may help to bring a wider range of community or policy strategies into view.

# Concluding thoughts

The impact of excessive alcohol consumption is a public health topic that receives relatively little attention. As new science deepens our understanding of alcohol-related health harms and evidence points us toward more effective policy approaches, public health voices have an opportunity to share this knowledge with policymakers and communities. Effective framing will be a vital tool in elevating this issue and moving policy forward in ways that promote health, protect communities, and preserve the role of government in regulating business for the common good. We offer this brief in the service of these important public health goals.

# Acknowledgment

This strategy was prepared by the FrameWorks Institute for ChangeLab Solutions in cooperation with the Alcohol Program of the CDC National Center for Chronic Disease Prevention and Health Promotion. The development of this strategy was supported by the Centers for Disease Control and Prevention of the US Department of Health and Human Services (HHS) as part of a financial assistance award totaling \$145,873 with 100 percent funded by CDC/HHS. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by CDC/HHS, or the US Government.

# About FrameWorks

The FrameWorks Institute is a non-profit think tank that advances the mission-driven sector's capacity to frame the public discourse about social and scientific issues. The organization's signature approach, Strategic Frame Analysis®, offers empirical guidance on what to say, how to say it, and what to leave unsaid. FrameWorks designs, conducts, and publishes multi-method, multi-disciplinary framing research to prepare experts and advocates to expand their constituencies, to build public will, and to further public understanding. To make sure this research drives social change, FrameWorks supports partners in reframing, through strategic consultation, campaign design, FrameChecks®, toolkits, online courses, and in-depth learning engagements known as FrameLabs. In 2015, FrameWorks was named one of nine organizations worldwide to receive the MacArthur Award for Creative and Effective Institutions.

Learn more at [www.frameworksinstitute.org](http://www.frameworksinstitute.org)

All rights reserved. No part of this publication may be reproduced, stored in a retrieval system, or transmitted, in any form or by any means, electronic, mechanical, photocopying, recording, or otherwise, without the prior permission of the FrameWorks Institute.

Please follow standard APA rules for citation, with the FrameWorks Institute as publisher.

FrameWorks Institute. (2023). Sweetland, Julie and Clara Blustein Lindholm. *Framing Alcohol Policy Issues Effectively*. Washington, DC: FrameWorks Institute.

© FrameWorks Institute 2023