

National Alliance to Prevent Underage Drinking

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Mr. Charles G. Curie, M.A., A.C.S.W.
Administrator, Substance Abuse and Mental Health Services Administration
Building 1 Choke Cherry Road
Room 8-1065
Rockville, MD 20857

Subject: Interim Report on the Development of a Plan for Combating Underage Drinking

Dear Administrator Curie:

Thank you for the opportunity to comment on the Interagency Coordinating Committee on the Prevention of Underage Drinking's (ICCPUD) draft report to Congress on the development of a plan to combat underage drinking.

We appreciate the effort and good intentions that went into preparing the report, and are aware of the political and budgetary constraints that may limit the scope of the plan. Nonetheless, we are extremely disappointed that the draft plan does not move much beyond the status quo in reflecting a real commitment to elevating underage drinking prevention as a national public health priority. We are deeply concerned that the draft document only mentions in passing, then largely ignores, the National Academy of Sciences Institute of Medicine's landmark September, 2003 recommendations to Congress for a cost-effective national strategy to prevent and reduce underage drinking. More than a year after release of that report and despite several Congressional directives, we remain troubled by the apparent continued absence of will to address seriously America's number one youth substance use crisis.

We would like to share just a few observations and comments that we hope will receive serious consideration in shaping a substantially strengthened plan:

1. While the goals seem worthwhile, the "plan" for achieving them is exceedingly vague and therefore lacks credibility. In its current form, we are sorry to find that the draft document does not in fact constitute a plan at all. For example, it is devoid of benchmarks and lacks a comprehensive means to monitor the progress and accountability of federal programs in achieving the stated objectives.
2. Proposed plans to strengthen federal leadership on underage drinking prevention do not offer a thoughtful communications strategy for press and public awareness opportunities throughout the calendar year. For example, there are no plans articulated for ICCPUD agency heads to individually or collectively amplify the underage drinking issue during Alcohol Awareness Month (April, 2005). Nor is there evidence that coordinated efforts have been made to date during the development of this document.
3. The seriousness of the plan's objective to exercise federal leadership to strengthen the national commitment to address underage drinking is belied by an apparent resistance to a prominent, visible role for the Surgeon General on this issue. The Surgeon General has been the best "bully pulpit" for public health on any number of issues, such as tobacco, AIDS and suicide. We believe that the plan should respond to language in the Senate report accompanying the FY 2005 spending bill that urges the Surgeon General's office to

Working Together at the Federal Level to Reduce Underage Drinking and its Harms....

- issue a national "Call to Action" on underage drinking. The language expressed the position of the Senate that the Surgeon General "should" be fully engaged in efforts to combat underage drinking, and "strongly urged" the Surgeon General, in coordination with SAMHSA, to issue a "Call to Action" on the health crisis of underage drinking.
4. The plan lacks a sense of how the various existing federal programs that address underage drinking coordinate with one another to actually implement the report's stated goals. As an aside, it should be noted that existing federal underage drinking prevention goals, such as those included in Health People 2010, are not acknowledged in this report.
 5. Despite the stated goal of federal leadership to reduce underage drinking, recent opportunities to do just that have been missed. For example, this year's Departmental press release on Monitoring the Future failed to even mention the underage drinking findings while they were buried in the press release by the University of Michigan. Nor were the underage drinking findings highlighted in the release of your own Agency's National Survey on Drug Use and Health.
 6. The plan's silence on funding levels attached to the existing programs makes it difficult to measure the current federal investment in underage drinking prevention. We urge the interagency committee to, at the very least, include estimates of funding dedicated to underage drinking prevention, by department and in total.
 7. The proposed creation of a new federal website that could serve as a clearing house for underage drinking prevention information and activities should be better integrated into the plan's communication strategy. Ideally, the development of the site should include consultation with (or surveys of) state and community prevention professionals, to ensure the website's maximum value-added and usefulness to prospective users.

Again, thank you for the opportunity to share our views on the draft document. We would hope to see them incorporated into a vastly strengthened plan that reflects a real commitment to moving beyond the status quo that has so far failed to achieve real progress in reducing underage drinking and its harms. We look forward to working with you and all of the ICCPUD member agencies to help structure and implement a meaningful effort to seriously tackle this long-neglected youth health and safety problem.

Sincerely,

Center for Science in the Public Interest
Center on Alcohol Marketing and Youth
Leadership to Keep Children Alcohol-Free
Mothers Against Drunk Driving
National Council on Alcoholism and Drug Dependence
United Methodist General Board on Church and Society

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