Testimony in Opposition to Senate Bill 824

Alcoholic Beverages - Prohibition on Class A Licenses for Chain Stores, Supermarkets, and Discount Houses - Repeal

Before the Finance Committee: February 21, 2025

The Public Health Law Clinic submits this testimony in opposition to Senate Bill 824 because it increases accessibility to alcohol, directly impacting the public health of the general population, especially those living with alcohol use disorder.

Increased Availability Leads to Higher Consumption

Higher availability of alcohol leads to higher levels of drinking. Therefore, when alcohol is sold in grocery stores, per capita alcohol consumption increases. This correlation between access and consumption is not unique to any given community or population. Given that no population is immune to resist indulgence when tempted with ease of accessibility, public health guidance recommends restricting sales of alcohol, such as regulating where, when, and to whom alcohol is sold, as an effective way to lower alcohol consumption. Senate Bill 824 aims to accomplish the opposite. By approving the sale of alcohol in grocery stores and convenience stores, the legislature would be expanding access to alcohol purely for convenience to the detriment of public health and safety.

Public Health Harms of Increased Alcohol Access

Greater accessibility and alcohol outlet density is not only associated with increased alcohol consumption, but is also related to increased harm, including violence, injuries, and other health issues. Alcohol outlet density is associated with an increase in violent crime exposure—with each 10% increase in alcohol outlet access being correlated with a 4.2% increase in violent crime exposure.³ This correlation between increased exposure to violent crimes and alcohol outlet density is more pronounced when the alcohol outlets are for off-premises consumption. Access to alcohol outlets for off-premises consumption is associated with a 37% greater incidence of violent crime compared to access to on-premises outlets.⁴ The most frequently investigated alcohol-related incidents are assault, with alcohol outlet density being recognized as a community characteristic associated with high rates of firearm assault—so much so that

¹ Norman Giesbrecht & Daniel T. Myran, *Harms and Costs of Proposed Changes in How Alcohol is Sold in Ontario*, 196 CANADIAN MEDICAL ASSOCIATION JOURNAL 447, 448 (2024), https://pmc.ncbi.nlm.nih.gov/articles/PMC11001388/pdf/196e447.pdf.

² Global Status Report on Alcohol and Health, WORLD HEALTH ORGANIZATION (2018), https://iris.who.int/bitstream/handle/10665/274603/9789241565639-eng.pdf?sequence=1.

³ Pamela J. Trangenstein, *Outlet Type, Access to Alcohol, and Violent Crime*, ALCOHOL, CLINICAL AND EXPERIMENTAL RSCH. (2018), https://pmc.ncbi.nlm.nih.gov/articles/PMC6214776/pdf/nihms-986850.pdf.

⁴ Baltimore Liquor Stores Linked More to Violent Crime Than Bars and Restaurants, Johns Hopkins Bloomberg School of Public Health (Sep. 26, 2018), https://publichealth.jhu.edu/2018/baltimore-liquor-stores-linked-more-to-violent-crime-than-bars-and-restaurants.

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reducing off-premises alcohol outlet density may reduce firearm violence.⁵ However, this increase in violence also reflects an increase in homicides, domestic violence incidents, and child abuse.⁶

In addition to an increase in violent crimes, increased accessibility to alcohol is correlated with an increase in injuries not stemming from violence, such as accidents and suicides. Alcohol has numerous effects on the body, often impacting mental alertness, level of coordination, ability to respond to hazards, and willingness to engage in risk-taking behaviors—all of which contribute to an increased risk of bodily injury. Cities and communities with a high density of off-premises alcohol outlets—such as convenience stores or grocery stores that sell alcohol—are more than twice as likely to have high alcohol-related hospitalization rates compared to cities and communities with low density off-premises alcohol outlets.⁷

Excessive alcohol use is a leading and preventable cause of death in the United States. Approximately 178,000 people die from excessive drinking each year. Among these deaths, about two thirds are attributed to chronic conditions, including several types of cancer, heart disease, liver disease, and alcohol use disorder, all of which develop from alcohol consumption over an extended period. However, even moderate drinking increases risks of cancer, heart disease, and early death—meaning that greater access increases harm, no matter the user. Also included in these preventable deaths are fatalities from alcohol-related car crashes. Communities, especially residential areas, with greater alcohol-outlet densities experience higher alcohol-related crash rates. Drunk driving crashes account for nearly 1/3 of all traffic fatalities in Maryland and within the past five years, nearly 800 Maryland residents have been killed in crashes involving an impaired driver.

Impact on People in Recovery from Alcohol Use Disorder

In addition to impacting the general population, greater availability of alcohol presents a uniquely harmful impact on those recovering from, or trying to recover from, alcohol use

⁵ Veronica A. Pear et al., Community-Level Risk Factors for Firearm Assault and Homicide: The Role of Local Firearm Dealers and Alcohol Outlets, 34 EPIDEMIOLOGY 798, 801 (2023),

https://journals.lww.com/epidem/fulltext/2023/11000/community_level_risk_factors_for_firearm_assault.6.aspx.
⁶ David Fone et al. *Change in alcohol outlet density and alcohol-related harm to population health (CHALICE): a*

comprehensive record-linked database study in Wales, 4 Public Health Research 1, 2 (2016), https://www.ncbi.nlm.nih.gov/books/NBK350757/.

⁷ L.A. COUNTY DEP'T OF PUB. HEALTH, ALCOHOL OUTLET DENSITY AND ALCOHOL-RELATED CONSEQUENCES 7 (2022). See Baltimore Liquor Stores Linked More to Violent Crime Than Bars and Restaurants, Johns Hopkins Bloomberg School of Public Health (Sep. 26, 2018), https://publichealth.jhu.edu/2018/baltimore-liquor-stores-linked-more-to-violent-crime-than-bars-and-restaurants (finding that off-premises alcohol outlets have a stronger association with incidents of violent crimes than on-premises alcohol outlets).

⁸ Facts About U.S. Deaths from Excessive Alcohol Use, CENTERS FOR DISEASE CONTROL AND PREVENTION (Aug. 6, 2024), https://www.cdc.gov/alcohol/facts-stats/index.html.

⁹ Iona Y. Millwood et al., *Alcohol Intake and Cause-Specific Mortality: Conventional and Genetic Evidence in a Prospective Cohort Study of 512,000 Adults in China*, 9 THE LANCET PUB. HEALTH 956, 966 (2023), https://www.thelancet.com/action/showPdf?pii=S2468-2667%2823%2900217-7.

¹⁰ Paul J. Gruenewald & Fred W. Johnson, *Drinking, Driving, and Crashing: A Traffic-Flow Model of Alcohol-Related Motor Vehicle Accidents*, 71 J. OF STUD. ON ALCOHOL AND DRUGS 237, 237–38 (2010), https://pmc.ncbi.nlm.nih.gov/articles/PMC2841734/pdf/jsad237.pdf.

¹¹ Impaired Driving, ZERO DEATHS MARYLAND, https://zerodeathsmd.gov/road-safety/impaired-driving/.

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disorder. Environmental factors play a significant role in an individual's long-term recovery, and in order for there to be improvements in long-term recovery outcomes, there must be access to substance-free spaces. 12 However, increased alcohol availability—such as the sale of alcohol in grocery stores or convenience stores—negatively affects people in recovery, as it makes it harder for them to avoid triggers. Today, someone recovering from alcohol use disorder has the freedom to walk into a grocery store, browse the produce section, and select what they want to fill their fridge with for the upcoming week—without the challenge of turning down an aisle and facing the very substance they are working to overcome. Someone recovering from alcohol use disorder can go on a road trip to Southern Maryland and stop at a chain convenience store on the way to pick up snacks or use the restroom without the discomfort of confronting a substance they have fought hard to overcome. Senate Bill 824 alters these realities, making it impossible for someone with alcohol use disorder to visit a grocery store or convenience store without the risk of confronting their disorder.

Because individuals in recovery face higher relapse rates when alcohol is widely available in their communities, recovery groups like Alcoholics Anonymous emphasize that safe, alcohol-free spaces are crucial for long-term sobriety. By allowing grocery stores and convenience stores to sell alcohol, Senate Bill 824 removes alcohol-free spaces—putting the recovery of those with alcohol use disorder at risk in exchange for the convenience of the general population.

Conclusion

Increased availability of alcohol leads to higher consumption rates, creating several public health concerns including an increase in community and domestic violence and an increase in illness and deaths attributed to chronic conditions. Moreover, the greater availability of alcohol negatively impacts individuals recovering from alcohol use disorder by further limiting the number of public spaces that do not present a trigger. For these reasons, we request an unfavorable report on Senate Bill 824.

This testimony is submitted on behalf of the Public Health Law Clinic at the University of Maryland Carey School of Law and not by the School of Law, the University of Maryland, Baltimore, or the University of Maryland System.

¹² Leonard A. Jason et al., *The Emergence, Role, and Impact of Recovery Support Services*, 41 ALCOHOL RSCH. CURRENT REV. 1, 7–8 (2021), https://pmc.ncbi.nlm.nih.gov/articles/PMC7996242/pdf/arcr-41-1-4.pdf.