

The American Issue



Pinkwashed Drinks: Problems & Dangers

An Alcohol Justice Brief / AlcoholJustice.org

Pink ribbon campaigns for breast cancer awareness are an industry unto themselves, with hundreds, even thousands of products including clothes, cosmetics, food, and beverages. Some companies market pink ribbon products while producing and/or selling products associated with breast cancer – an activity coined by Breast Cancer Action as pinkwashing. As alcohol is a known and avoidable contributing factor for breast cancer, we sought to explore the existence of pinkwashed alcohol products.

Our study found campaigns for pink ribbon alcohol products, and some breast cancer charities in promotional philanthropic relationships with alcohol corporations. We documented and analyzed examples of alcohol products developed for, and marketed with, pink ribbon and breast cancer awareness campaigns. Our results included promotional materials for 17 brands of various pinkwashed alcohol: flavored malt beverages, beer, wine, and spirits.

- Althea beer (Weyerbacher Brewing Co.)
- Barefoot wine (Gallo)
- Beringer wine (Treasury Wine Estates)
- Chambord vodka (Brown-Forman)
- Chateau St. Jean (Treasury Wine Estates)
- Cleavage Creek wine
- Global Journey wine (Mt. Vernon Winery)
- Happy Bitch wine
- Korbel wine (Brown-Forman)
- Ménage a Trois wine (Trincherro)
- Mike's Hard Lemonade Limited Edition Pink (Mark Anthony Group)
- ONEHOPE California Chardonnay, October Collection
- PYNK Ale (Yards Brewing Co.)
- RELAX Pink wine (Schmitt Sohne Inc.)
- Saison de Rose beer (Free Will Brewing Co.)
- Support Her vodka (Cottage Grove / Side Pocket Distillery)
- Sutter Home wine (Trincherro)

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ACAAP is the successor to the American Temperance League and the Anti-Saloon League established in 1895. Membership is made up of state temperance organizations, national Christian denominations and other fraternal organizations that support ACAAP's philosophy of abstinence

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(Alcohol Justice Brief Continued from Page 1)**PROBLEMS WITH PINKWASHED DRINKS**

- Stories dedicating pink ribbon alcohol products to family or friends of the company who have been diagnosed with breast cancer.
- Celebrity breast cancer survivors representing pinkwashed alcohol and eliciting brand engagement with sweepstakes or contents.
- Pinkwashed alcohol brands sponsoring charity fundraiser events.
- Pinkwashed alcohol campaigns conducted primarily, or entirely, with user engagement on social media.
- Sexually provocative images and phrases selling pinkwashed alcohol.

RISKS OF PARTNERING WITH PINKWASHED ALCOHOL BRANDS

- Extends the potential to increase sales of a carcinogen; enhances marketing opportunities for the alcohol products by linking the alcohol brand to charity networks, volunteers, and adherents
- Extends the marketing reach of pinkwashed alcohol to young women, many of whom may already drink at risky levels
- Devalues prevention messages about drinking and cancer risk by linking the volume purchased (consumed) with the amount donated to charity
- Undermines efforts by charities that do not engage in corporate relationships (fundraising, sponsorship) with alcohol industry

Alcohol Justice recommends that the alcohol industry mitigate breast cancer risk, not contribute to it.

We recommend:

Alcohol producers, wholesalers, retailers, and marketers/advertisers

- Refrain from producing and selling pinkwashed products and campaigns.
- Include restrictions on pink ribbon campaigns in voluntary industry advertising guidelines.

Local, state, and federal regulators

- Refrain from supporting and partnering with the alcohol industry on breast cancer campaigns.
- Where applicable, restrict pinkwashed products and campaigns.

Leaders of charities doing breast cancer research, treatment, and/or prevention

- Refuse marketing and sponsorship arrangements that promote alcohol products and/or consumption.
- Adopt clear policies regarding how, if at all, the charity will engage with the alcohol industry.
- Join with public health and policy advocates to clearly separate alcohol marketing from cancer.

This summary brief was prepared with information analyzed and written by Sarah Mart, MS, MPH (Alcohol Justice, San Rafael, CA) and Norman Giesbrecht, PhD (Centre for Addiction & Mental Health, Toronto, Ontario).

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The Mission of Alcohol Justice: We promote evidence-based public health policies and organize campaigns with diverse communities and youth against the alcohol industry's harmful practices. www.AlcoholJustice.org

Not for Human Consumption: Spice and Bath Salts

<http://newsletter.samhsa.gov/2015/03/03/not-for-human-consumption-spice-and-bath-salts/>

Eighteen-year-old Kurtis Hildreth likely had no idea how dangerous and deadly Spice was, but in 2013 he smoked a fatal dose of the synthetic cannabinoid. His family has since spoken out publicly, raising awareness of the legal drug, marked “not for human consumption.” A recent SAMHSA report revealed emergency department visits resulting from the synthetic marijuana more than doubled in just one year.

Most commonly known as Spice, synthetic cannabinoids go by many different street names: K2, Spice Diamond, fake weed, Yucatan Fire, Moon Rocks, and Skunk. The herb is often marketed as herbal incense and potpourri and labeled “not for human consumption,” making it legal to sell and for minors to purchase the drug. Manufacturers sometimes include “organic” in the product name to give the appearance of a natural product that does not harm health. Similar to how cigarettes were once marketed, Spice packaging often features cartoons and images appealing to the 12 to 18 age group, and the product can easily be purchased online, or in convenience stores or head shops.

What makes Spice so dangerous?

Spice (synthetic cannabinoid) is a designer drug that is made with analogs or a chemical structure similar to commonly used illicit drugs. The composition of these products changes constantly, as manufacturers create new variations to remain under the radar. The manmade chemicals are typically sprayed on a plant or herb (not marijuana) that is most commonly smoked, and mimics the effects of the psychoactive ingredient in marijuana. Because it is marked as “not for human consumption,” the intended use is masked and it is not subject to any quality control in manufacturing procedures or oversight that would be applied to other drugs. Because there is no oversight of the product or its production, what makes its way into the hands of teens may contain substances that can have serious health consequences. With no warning labels, young people are not aware that using these products can be harmful or even deadly.

It is most often young men who reach the point of crisis and seek medical care for a range of symptoms that can include severe agitation, anxiety, nausea, vomiting, rapid heartbeat, elevated blood pressure, tremors, seizures, hallucinations, paranoia, and unresponsiveness. And for Kurtis Hildreth, the effect of the drug was so sudden there was no time to call for help.

Another threat to teens: bath salts

Bath salts are another drug made, manufactured, marketed, and used by youth in a similar fashion. Known commonly as Bliss, Bloom, Ivory Wave, and Scarface, bath salts contain synthetic cathinones similar to amphetamines. Sometimes referred to as jewelry cleaner, plant food, or phone screen cleaner, bath salts are presumed to contain methylenedioxypyrovalerone (MDPV) and other chemicals similar to MDPV, although there is uncertainty because tests do not always detect these substances. When bath salts are used, the effects can include agitation, aggression and violent behavior, anxiety and panic attacks, paranoia, confusion, hallucinations and delusions, psychosis, chest pains, increased heart rate, heightened blood pressure, and sometimes suicidal ideation or suicide attempts.

SAMHSA’s recent Advisory: *Spice, Bath Salts, and Behavioral Health* reports that fewer young people are using bath salts than Spice. Bath salts are also used by a slightly older age group, those 20 to 29 years old.

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Visit the ACAAP Website to stay up-to-date on current issues regarding alcohol and marijuana; and read Dr. Bill Day's blog "Dayly Design."

www.sapacap.com.

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WHO WE ARE:

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

Visit the ACAAP Website at www.sapacap.com

American Council on Addiction and Alcohol Problems

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**Merry Christmas
and a
Happy New Year!**

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Undetectable in drug screens

The synthetic designer drugs are also popular with people who are subject to mandatory drug testing. Although some of the psychoactive compounds can be detected in tests, many routine drug screens do not pick up these chemicals.

Prevention and Treatment

There have been some policy advancements to help regulate synthetic drugs. The *Controlled Substances Act of 2014* marked some synthetic cannabinoids as Schedule I drugs, listing them with the most dangerous drugs that lead to potentially severe psychological or physical dependence.

Behavioral health providers should be aware that clients may not think to report use of Spice or bath salts, since they are “legal.” Inquiring about these drugs during an assessment, especially with youth, may reveal important health information. Treatment is similar to that used to treat conditions caused by use of marijuana or other stimulants.

More detail can be found in SAMHSA’s Advisory: *Spice, Bath Salts, and Behavioral Health* and *Update: Drug-Related Emergency Department Visits Involving Synthetic Cannabinoids*. www.samhsa.gov

2015 National Poll Finds More Than Four in Ten U.S. Adults Report Ever Trying Marijuana; Highest Since Question First Asked in 1969

Slightly more than one-third (35%) of adults reported ever using marijuana in 2014, according to data from a nationally representative consumer panel survey. Among those adults, smoking was reported as the most prevalent mode of marijuana use. A majority of users reported smoking joints (89%), around one-half reported using bongos, waterpipes, or hookahs (49%) or bowls or pipes (48%), and one-fourth (25%) smoked marijuana in blunts. Other modes of marijuana use included ingesting marijuana in edibles or drinks (30%) and vaporizing marijuana (10%). While more than one-third (36%) reported using only one mode of marijuana use, the use of 3 or more modes was more common (44%). The authors conclude that “[c]hanging state policies related to marijuana use may lead to changes in the mode of use or reason for use, which could impact individual- and population-level health. Ongoing and improved surveillance systems that collect more-detailed information about patterns of marijuana use, including mode of and reasons for use, are important for enhancing understanding of the health consequences of marijuana use and public health planning.”

NOTES: Data are from 4,269 participants who completed the 2014 Summer Styles, a seasonal, national consumer panel survey conducted by Porter Novelli Public Services. Summer Styles assesses health-related indicators among U.S. adults aged ≥ 18 years, and draws from GFK’s Knowledge-Panel, an online panel initiated in 1999 that uses probability based sampling to reach respondents regardless of landline phone or internet access. “[T]hough Styles draws from an existing panel with a nationally representative sample, it does not recruit using population-based probability samples, which may limit generalizability” (p. 7). See the article for a full description of the sample methodology. The percentages of reported mode of marijuana use add to more than 100 because respondents could choose multiple responses.

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