

113TH CONGRESS
1ST SESSION

H. R. 498

To provide for programs and activities with respect to the prevention of
underage drinking.

IN THE HOUSE OF REPRESENTATIVES

FEBRUARY 5, 2013

Ms. ROYBAL-ALLARD (for herself, Mr. WOLF, and Ms. DELAURO) introduced
the following bill; which was referred to the Committee on Energy and
Commerce

A BILL

To provide for programs and activities with respect to the
prevention of underage drinking.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Sober Truth on Pre-
5 venting Underage Drinking Reauthorization Act” or the
6 “STOP Act”.

1 **SEC. 2. AMENDMENT TO THE PUBLIC HEALTH SERVICE**
2 **ACT.**

3 Section 519B of the Public Health Service Act (42
4 U.S.C. 290bb–25b) is amended by striking subsections (a)
5 through (f) and inserting the following:

6 “(a) **DEFINITIONS.**—For purposes of this section:

7 “(1) The term ‘alcohol beverage industry’
8 means the brewers, vintners, distillers, importers,
9 distributors, and retail or online outlets that sell or
10 serve beer, wine, and distilled spirits.

11 “(2) The term ‘school-based prevention’ means
12 programs, which are institutionalized, and run by
13 staff members or school-designated persons or orga-
14 nizations in any grade of school, kindergarten
15 through 12th grade.

16 “(3) The term ‘youth’ means persons under the
17 age of 21.

18 “(b) **SENSE OF CONGRESS.**—It is the sense of the
19 Congress that:

20 “(1) A multi-faceted effort is needed to more
21 successfully address the problem of underage drink-
22 ing in the United States. A coordinated approach to
23 prevention, intervention, treatment, enforcement,
24 and research is key to making progress. This section
25 recognizes the need for a focused national effort,
26 and addresses particulars of the Federal portion of

1 that effort, as well as Federal support for State ac-
2 tivities.

3 “(2) The Secretary shall continue to conduct
4 research and collect data on the short- and long-
5 range impact of alcohol use and abuse upon adoles-
6 cent brain development and other organ systems.

7 “(3) States and communities, including colleges
8 and universities, are encouraged to adopt com-
9 prehensive prevention approaches, including—

10 “(A) evidence-based screening, programs,
11 and curricula;

12 “(B) brief intervention strategies;

13 “(C) consistent policy enforcement; and

14 “(D) science-based strategies to reduce un-
15 derage drinking.

16 “(4) Public health groups, consumer groups,
17 and the alcohol beverage industry should continue
18 and expand evidence-based efforts to prevent and re-
19 duce underage drinking.

20 “(5) The entertainment industries have a pow-
21 erful impact on youth, and they should use rating
22 systems and marketing codes to reduce the likeli-
23 hood that underage audiences will be exposed to
24 movies, recordings, television programs, or other dig-
25 ital media with unsuitable alcohol content.

1 “(6) The National Collegiate Athletic Associa-
2 tion, its member colleges and universities, and ath-
3 letic conferences should affirm a commitment to a
4 policy of discouraging alcohol use among underage
5 students and other young fans.

6 “(7) Alcohol is a unique product and should be
7 regulated differently than other products by the
8 States and Federal Government. States have pri-
9 mary authority to regulate alcohol distribution and
10 sale, and the Federal Government should support
11 and supplement these State efforts. States also have
12 a responsibility to fight youth access to alcohol and
13 reduce underage drinking. Continued State regula-
14 tion and licensing of the manufacture, importation,
15 sale, distribution, transportation and storage of alco-
16 holic beverages are clearly in the public interest and
17 are critical to promoting responsible consumption,
18 preventing illegal access to alcohol by persons under
19 21 years of age from commercial and non-commer-
20 cial sources, maintaining industry integrity and an
21 orderly marketplace, and furthering effective State
22 tax collection.

23 “(8) The age-21 minimum drinking law, en-
24 acted in 1984, has been a remarkably effective pub-
25 lic health and safety policy, as evidenced by the fact

1 that the percentage of 12th graders who have drunk
2 alcohol in the past month has fallen by one-third
3 since the enactment of such law.

4 “(9) The age-21 minimum drinking law has
5 also has been significantly effective in reducing
6 drinking and driving traffic fatalities, as the Na-
7 tional Highway Traffic Safety Administration
8 (NHTSA) estimates that the law has saved over
9 28,000 lives since 1975.

10 “(10) Community awareness, support, and mo-
11 bilization provide an important context for the effec-
12 tive enforcement of the age-21 minimum drinking
13 law.

14 “(c) INTERAGENCY COORDINATING COMMITTEE; AN-
15 NUAL REPORT ON STATE UNDERAGE DRINKING PREVEN-
16 TION AND ENFORCEMENT ACTIVITIES.—

17 “(1) INTERAGENCY COORDINATING COMMITTEE
18 ON THE PREVENTION OF UNDERAGE DRINKING.—

19 “(A) IN GENERAL.—The Secretary, in col-
20 laboration with the Federal officials specified in
21 subparagraph (B), shall continue to support
22 and enhance the efforts of the interagency co-
23 ordinating committee, that began operating in
24 2004, focusing on underage drinking (referred
25 to in this subsection as the ‘Committee’).

1 “(B) OTHER AGENCIES.—The officials re-
2 ferred to in subparagraph (A) are the Secretary
3 of Education, the Attorney General, the Sec-
4 retary of Transportation, the Secretary of the
5 Treasury, the Secretary of Defense, the Sur-
6 geon General, the Director of the Centers for
7 Disease Control and Prevention, the Director of
8 the National Institute on Alcohol Abuse and Al-
9 coholism, the Administrator of the Substance
10 Abuse and Mental Health Services Administra-
11 tion, the Director of the National Institute on
12 Drug Abuse, the Assistant Secretary for Chil-
13 dren and Families, the Director of the Office of
14 National Drug Control Policy, the Adminis-
15 trator of the National Highway Traffic Safety
16 Administration, the Administrator of the Office
17 of Juvenile Justice and Delinquency Prevention,
18 the Chairman of the Federal Trade Commis-
19 sion, and such other Federal officials as the
20 Secretary of Health and Human Services deter-
21 mines to be appropriate.

22 “(C) CHAIR.—The Secretary of Health
23 and Human Services shall serve as the chair of
24 the Committee.

1 “(D) DUTIES.—The Committee shall guide
2 policy and program development across the
3 Federal Government with respect to underage
4 drinking, provided, however, that nothing in
5 this section shall be construed as transferring
6 regulatory or program authority from an Agen-
7 cy to the Coordinating Committee.

8 “(E) CONSULTATIONS.—The Committee
9 shall actively seek the input of and shall consult
10 with all appropriate and interested parties, in-
11 cluding States, public health research and inter-
12 est groups, foundations, and alcohol beverage
13 industry trade associations and companies.

14 “(F) ANNUAL REPORT.—

15 “(i) IN GENERAL.—The Secretary, on
16 behalf of the Committee, shall annually
17 submit to the Congress a report that sum-
18 marizes—

19 “(I) all programs and policies of
20 Federal agencies designed to prevent
21 and reduce underage drinking, focus-
22 ing particularly on programs and poli-
23 cies that support the adoption and en-
24 forcement of State policies designed to

1 prevent and reduce underage drinking
2 as specified in paragraph (2);

3 “(II) the extent of progress in
4 preventing and reducing underage
5 drinking at State and national levels;

6 “(III) data that the Secretary
7 shall collect with respect to the infor-
8 mation specified in clause (ii); and

9 “(IV) such other information re-
10 garding underage drinking as the Sec-
11 retary determines to be appropriate.

12 “(ii) CERTAIN INFORMATION.—The
13 report under clause (i) shall include infor-
14 mation on the following:

15 “(I) Patterns and consequences
16 of underage drinking as reported in
17 research and surveys such as, but not
18 limited to, Monitoring the Future,
19 Youth Risk Behavior Surveillance
20 System, the National Survey on Drug
21 Use and Health, and the Fatality
22 Analysis Reporting System.

23 “(II) Measures of the availability
24 of alcohol from commercial and non-

1 commercial sources to underage popu-
2 lations.

3 “(III) Measures of the exposure
4 of underage populations to messages
5 regarding alcohol in advertising and
6 the entertainment media.

7 “(IV) Surveillance data, includ-
8 ing information on the onset and
9 prevalence of underage drinking, con-
10 sumption patterns, beverage pref-
11 erences, prevalence of drinking among
12 students at institutions of higher edu-
13 cation, correlations between adult and
14 youth drinking, and the means of un-
15 derage access, including trends over
16 time for these surveillance data. The
17 Secretary shall develop a plan to im-
18 prove the collection, measurement,
19 and consistency of reporting Federal
20 underage alcohol data.

21 “(V) Any additional findings re-
22 sulting from research conducted or
23 supported under subsection (f).

24 “(VI) Evidence-based best prac-
25 tices to prevent and reduce underage

1 drinking including a review of the re-
2 search literature related to State laws,
3 regulations, and policies designed to
4 prevent and reduce underage drink-
5 ing, as described in paragraph
6 (2)(B)(i).

7 “(2) ANNUAL REPORT ON STATE UNDERAGE
8 DRINKING PREVENTION AND ENFORCEMENT ACTIVI-
9 TIES.—

10 “(A) IN GENERAL.—The Secretary shall,
11 with input and collaboration from other appro-
12 priate Federal agencies, States, Indian tribes,
13 territories, and public health, consumer, and al-
14 cohol beverage industry groups, annually issue
15 a report on each State’s performance in enact-
16 ing, enforcing, and creating laws, regulations,
17 and policies to prevent or reduce underage
18 drinking based on an assessment of best prac-
19 tices developed pursuant to paragraph
20 (1)(F)(ii)(VI) and subparagraph (B)(i). For
21 purposes of this paragraph, each such report,
22 with respect to a year, shall be referred to as
23 the ‘State Report’. Each State Report shall be
24 designed as a resource tool for Federal agencies
25 assisting States in the States’ underage drink-

1 ing prevention efforts, State public health and
2 law enforcement agencies, State and local policy
3 makers, and underage drinking prevention coa-
4 litions including those receiving grants pursuant
5 to subsection (e)(1).

6 “(B) STATE REPORT PERFORMANCE MEAS-
7 URES AND CONTENT.—

8 “(i) IN GENERAL.—The Secretary
9 shall develop, in consultation with the
10 Committee, a set of measures to be used in
11 preparing the report on best practices as
12 they relate to State laws, regulations, poli-
13 cies, and enforcement practices.

14 “(ii) STATE REPORT CONTENT.—Each
15 State Report shall include updates on
16 State laws, regulations, and policies, in-
17 cluding, but not limited to the following:

18 “(I) Whether or not the State
19 has comprehensive anti-underage
20 drinking laws such as for the illegal
21 sale, purchase, attempt to purchase,
22 consumption, or possession of alcohol;
23 illegal use of fraudulent ID; illegal
24 furnishing or obtaining of alcohol for
25 an individual under 21 years; the de-

1 gree of strictness of the penalties for
2 such offenses; and the prevalence of
3 the enforcement of each of these in-
4 fractions.

5 “(II) Whether or not the State
6 has comprehensive liability statutes
7 pertaining to underage access to alco-
8 hol such as dram shop, social host,
9 and house party laws, and the preva-
10 lence of enforcement of each of these
11 laws.

12 “(III) Whether or not the State
13 encourages and conducts comprehen-
14 sive enforcement efforts to prevent
15 underage access to alcohol at retail
16 outlets, such as random compliance
17 checks and shoulder tap programs,
18 and the number of compliance checks
19 within alcohol retail outlets measured
20 against the number of total alcohol re-
21 tail outlets in each State, and the re-
22 sult of such checks.

23 “(IV) Whether or not the State
24 encourages training on the proper
25 selling and serving of alcohol for all

1 sellers and servers of alcohol as a con-
2 dition of employment.

3 “(V) Whether or not the State
4 has policies and regulations with re-
5 gard to direct sales to consumers and
6 home delivery of alcoholic beverages.

7 “(VI) Whether or not the State
8 has programs or laws to deter adults
9 from purchasing alcohol for minors;
10 and the number of adults targeted by
11 these programs.

12 “(VII) Whether or not the State
13 has enacted graduated drivers licenses
14 and the extent of those provisions.

15 “(iii) ADDITIONAL CATEGORIES.—In
16 addition to the updates of State laws, reg-
17 ulations, and policies listed in clause (ii),
18 the Secretary shall consider the following
19 categories, including but not limited to—

20 “(I) whether or not States have
21 adopted laws, regulations, and policies
22 that deter underage alcohol use, as
23 described in the Surgeon General’s
24 2007 Call to Action to Prevent and
25 Reduce Underage Drinking, including

1 restrictions on low-price, high-volume
2 drink specials, and wholesaler pricing
3 provisions;

4 “(II) whether or not States have
5 adopted laws, regulations and policies
6 designed to reduce alcohol advertising
7 messages attractive to youth and
8 youth exposure to alcohol advertising
9 and marketing in measured and
10 unmeasured media;

11 “(III) whether or not States have
12 laws and policies that promote under-
13 age drinking prevention policy devel-
14 opment by local jurisdictions;

15 “(IV) whether or not States have
16 adopted laws, regulations, and policies
17 to restrict youth access to alcoholic
18 beverages that may pose special risks
19 to youth, including but not limited to
20 alcoholic mists, gelatins, freezer pops,
21 pre-mixed caffeinated alcoholic bev-
22 erages, and flavored malt beverages;

23 “(V) whether or not States have
24 adopted uniform best practices proto-

1 cols for conducting compliance checks
2 and shoulder tap programs; and

3 “(VI) whether or not States have
4 adopted uniform best practices pen-
5 alty protocols for violations of laws
6 prohibiting retail licensees from sell-
7 ing or furnishing of alcohol to minors.

8 “(iv) UNIFORM DATA SYSTEM.—For
9 performance measures related to enforce-
10 ment of underage drinking laws as speci-
11 fied in clause (ii) and (iii), the Secretary
12 shall develop and test a uniform data sys-
13 tem for reporting State enforcement data,
14 including the development of a pilot pro-
15 gram for this purpose. The pilot program
16 shall include procedures for collecting en-
17 forcement data from both State and local
18 law enforcement jurisdictions.

19 “(3) AUTHORIZATION OF APPROPRIATIONS.—
20 There are authorized to be appropriated to carry out
21 this subsection \$1,000,000 for fiscal year 2014, and
22 \$1,000,000 for each of the fiscal years 2015 through
23 2018.

24 “(d) NATIONAL MEDIA CAMPAIGN TO PREVENT UN-
25 DERAGE DRINKING.—

1 “(1) IN GENERAL.—The Secretary, in consulta-
2 tion with the National Highway Traffic Safety Ad-
3 ministration, shall develop an intensive, multifaceted,
4 adult-oriented national media campaign to reduce
5 underage drinking by influencing attitudes regarding
6 underage drinking, increasing the willingness of
7 adults to take actions to reduce underage drinking,
8 and encouraging public policy changes known to de-
9 crease underage drinking rates.

10 “(2) PURPOSE.—The purpose of the national
11 media campaign described in this section shall be to
12 achieve the following objectives:

13 “(A) Instill a broad societal commitment to
14 reduce underage drinking.

15 “(B) Increase specific actions by adults
16 that are meant to discourage or inhibit under-
17 age drinking.

18 “(C) Decrease adult conduct that tends to
19 facilitate or condone underage drinking.

20 “(3) DEVELOPMENTAL PHASE.—In preparation
21 for the national media campaign described in this
22 section, the Secretary shall conduct, in consultation
23 with appropriate Federal agencies and outside ex-
24 perts, including in marketing, public relations, mass
25 media campaigns, parenting, and alcohol use and

1 abuse, a developmental phase to test specific cam-
2 paign features prior to beginning an intensive na-
3 tional strategy. This phase shall include research
4 and testing, limited to a period not to exceed 24
5 months, to determine the following:

6 “(A) Promising messages to promote pub-
7 lic opinion change.

8 “(B) Appropriate channels for reaching
9 target audiences.

10 “(C) Appropriate timing and weight for
11 utilizing such promising messages and media
12 channels.

13 “(D) Methods for linking the campaign to
14 local, State, and national policy changes affect-
15 ing underage drinking, if adopted.

16 “(E) Productive collaborative partnerships
17 with national and local organizations.

18 “(4) COMPONENTS.—When implementing the
19 national media campaign described in this section,
20 the Secretary shall—

21 “(A) educate the public about the public
22 health and safety benefits of evidence-based
23 policies to reduce underage drinking, including
24 minimum legal drinking age laws, and build

1 public and parental support for and cooperation
2 with enforcement of such policies;

3 “(B) educate the public about the negative
4 consequences of underage drinking;

5 “(C) promote specific actions by adults
6 that are meant to discourage or inhibit under-
7 age drinking, including positive behavior mod-
8 eling, general parental monitoring, and con-
9 sistent and appropriate discipline;

10 “(D) discourage adult conduct that tends
11 to facilitate underage drinking, including the
12 hosting of underage parties with alcohol and
13 the purchasing of alcoholic beverages on behalf
14 of underage youth;

15 “(E) establish collaborative relationships
16 with local and national organizations and insti-
17 tutions to further the goals of the campaign
18 and assure that the messages of the campaign
19 are disseminated from a variety of sources;

20 “(F) conduct the campaign through multi-
21 media sources; and

22 “(G) conduct the campaign with regard to
23 changing demographics and cultural and lin-
24 guistic factors.

1 “(5) CONSULTATION REQUIREMENT.—In devel-
2 oping and implementing the national media cam-
3 paign described in this section, the Secretary shall
4 consult recommendations for reducing underage
5 drinking published by the National Academy of
6 Sciences. The Secretary shall also consult with inter-
7 ested parties including medical, public health, and
8 consumer and parent groups, law enforcement, insti-
9 tutions of higher education, community organiza-
10 tions and coalitions, and other stakeholders sup-
11 portive of the goals of the campaign.

12 “(6) ANNUAL REPORT.—Beginning 12 months
13 after the date of the enactment of the Sober Truth
14 on Preventing Underage Drinking Reauthorization
15 Act, the Secretary shall produce an annual report on
16 the progress of the development or implementation
17 of the media campaign described in this section, in-
18 cluding expenses and projected costs, and, as such
19 information is available, report on the effectiveness
20 of such campaign in affecting adult attitudes toward
21 underage drinking and adult willingness to take ac-
22 tions to decrease underage drinking.

23 “(7) RESEARCH ON YOUTH-ORIENTED CAM-
24 PAIGN.—The Secretary may, based on the avail-
25 ability of funds, conduct research on the potential

1 success of a youth-oriented national media campaign
2 to reduce underage drinking. The Secretary shall re-
3 port any such results to Congress with policy rec-
4 ommendations on establishing such a campaign.

5 “(8) ADMINISTRATION.—The Secretary may
6 enter into a subcontract with another Federal Agen-
7 cy to delegate the authority for execution and ad-
8 ministration of the adult oriented national media
9 campaign.

10 “(9) AUTHORIZATION OF APPROPRIATIONS.—
11 There are authorized to be appropriated to carry out
12 this section \$1,000,000 for fiscal years 2014 and
13 2015 and such sums as necessary for each of the fis-
14 cal years 2016 through 2018.

15 “(e) COMMUNITY-BASED PROGRAMS TO PREVENT
16 UNDERAGE DRINKING.—

17 “(1) COMMUNITY-BASED COALITION ENHANCE-
18 MENT GRANTS TO PREVENT UNDERAGE DRINK-
19 ING.—

20 “(A) AUTHORIZATION OF PROGRAM.—The
21 Administrator of the Substance Abuse and
22 Mental Health Services Administration, in con-
23 sultation with the Director of the Office of Na-
24 tional Drug Control Policy, shall award, if the
25 Administrator determines that the Department

1 of Health and Human Services is not currently
2 conducting activities that duplicate activities of
3 the type described in this subsection, ‘enhance-
4 ment grants’ to eligible entities to design, im-
5 plement, evaluate, and disseminate comprehen-
6 sive strategies to maximize the effectiveness of
7 community-wide approaches to preventing and
8 reducing underage drinking. This subsection is
9 subject to the availability of appropriations.

10 “(B) PURPOSES.—The purposes of this
11 paragraph are to—

12 “(i) prevent and reduce alcohol use
13 among youth in communities throughout
14 the United States;

15 “(ii) serve as a catalyst for increased
16 citizen participation and greater collabora-
17 tion among all sectors and organizations of
18 a community that first demonstrates a
19 long-term commitment to reducing alcohol
20 use among youth;

21 “(iii) implement state-of-the-art
22 science-based strategies to prevent and re-
23 duce underage drinking by changing local
24 conditions in communities; and

1 “(iv) enhance, not supplant, effective
2 local community initiatives for preventing
3 and reducing alcohol use among youth.

4 “(C) APPLICATION.—An eligible entity de-
5 siring an enhancement grant under this para-
6 graph shall submit an application to the Admin-
7 istrator at such time, and in such manner, and
8 accompanied by such information as the Admin-
9 istrator may require in accordance with the
10 purposes described in subparagraph (B). Each
11 application shall include—

12 “(i) a complete description of the enti-
13 ty’s current underage alcohol use preven-
14 tion initiatives and how the grant will ap-
15 propriately enhance the focus on underage
16 drinking issues; or

17 “(ii) a complete description of the en-
18 tity’s current initiatives, and how it will
19 use this grant to enhance those initiatives
20 by adding a focus on underage drinking
21 prevention.

22 “(D) USES OF FUNDS.—Each eligible enti-
23 ty that receives a grant under this paragraph
24 shall use the grant funds to carry out the ac-
25 tivities described in such entity’s application

1 submitted pursuant to subparagraph (C) and
2 obtain specialized training and technical assist-
3 ance by the entity awarded a grant under sec-
4 tion 4 of Public Law 107–82, as amended (21
5 U.S.C. 1521 note), reauthorizing the Drug-Free
6 Communities Support Program. Grants under
7 this paragraph shall not exceed \$50,000 per
8 year and may not exceed four years.

9 “(E) SUPPLEMENT NOT SUPPLANT.—
10 Grant funds provided under this paragraph
11 shall be used to supplement, not supplant, Fed-
12 eral and non-Federal funds available for car-
13 rying out the activities described in this para-
14 graph.

15 “(F) EVALUATION.—Grants under this
16 paragraph shall be subject to the same evalua-
17 tion requirements and procedures as the evalua-
18 tion requirements and procedures imposed on
19 recipients of drug free community grants.

20 “(G) DEFINITIONS.—For purposes of this
21 paragraph, the term ‘eligible entity’ means an
22 organization that is currently receiving or has
23 received grant funds under the Drug-Free Com-
24 munities Act of 1997 (21 U.S.C. 1521 et seq.).

1 “(H) ADMINISTRATIVE EXPENSES.—Not
2 more than 6 percent of a grant under this para-
3 graph may be expended for administrative ex-
4 penses.

5 “(I) AUTHORIZATION OF APPROPRIA-
6 TIONS.—There are authorized to be appro-
7 priated to carry out this paragraph \$6,000,000
8 for fiscal year 2014, and \$6,000,000 for each
9 of the fiscal years 2015 through 2018.

10 “(2) GRANTS FOR PARTNERSHIPS BETWEEN
11 COMMUNITY COALITIONS AND INSTITUTIONS OF
12 HIGHER EDUCATION.—

13 “(A) AUTHORIZATION OF PROGRAM.—The
14 Administrator of the Substance Abuse and
15 Mental Health Services Administration, in co-
16 ordination with the Director of the Office of
17 National Drug Control Policy, may make grants
18 to eligible entities to enable the entities to pre-
19 vent, and reduce the rate of, underage alcohol
20 consumption, including binge drinking among
21 students at institutions of higher education.

22 “(B) PURPOSES.—The purposes of this
23 paragraph are to—

24 “(i) prevent and reduce alcohol use
25 among underage students at institutions of

1 higher education and the surrounding com-
2 munity;

3 “(ii) strengthen collaboration among
4 communities and institutions of higher
5 education; and

6 “(iii) disseminate to institutions of
7 higher education timely information re-
8 garding state-of-the-art science-based
9 strategies to prevent and reduce underage
10 drinking by changing local conditions at in-
11 stitutions of higher education and in the
12 surrounding community.

13 “(C) APPLICATIONS.—An eligible entity
14 (as defined in subparagraph (H)) that desires
15 to receive a grant under this paragraph shall
16 submit an application to the Administrator at
17 such time, in such manner, and accompanied by
18 such information as the Administrator may re-
19 quire.

20 “(D) CRITERIA.—As part of an application
21 for a grant under this paragraph, the Adminis-
22 trator shall require an eligible entity to dem-
23 onstrate—

1 “(i) the active participation of one or
2 more institutions of higher education in
3 the relevant eligible entity coalition;

4 “(ii) a description of how the eligible
5 entity will work with one or more institu-
6 tions of higher education to target under-
7 age students;

8 “(iii) a description of how the eligible
9 entity intends to ensure that it has a part-
10 nership with one or more institutions of
11 higher education and how it intends to im-
12 plement the purpose of this section and
13 move toward indicators described in sub-
14 paragraph (F);

15 “(iv) a list of the members of each
16 local coalition and institution of higher
17 education that will be involved in the work
18 of the eligible entity;

19 “(v) the implementation of state-of-
20 the-art science-based strategies to prevent
21 and reduce underage drinking by changing
22 local conditions at institutions of higher
23 education and in the surrounding commu-
24 nity;

1 “(vi) the anticipated impact of funds
2 provided under this paragraph in pre-
3 venting and reducing the rates of underage
4 alcohol use;

5 “(vii) outreach strategies, including
6 ways in which the eligible entity proposes
7 to—

8 “(I) reach out to students and
9 community stakeholders;

10 “(II) promote the purpose of this
11 paragraph;

12 “(III) address the range of needs
13 of underage students and the sur-
14 rounding communities;

15 “(IV) address community policies
16 affecting underage students regarding
17 alcohol use; and

18 “(V) implement other science-
19 based strategies to reduce underage
20 drinking; and

21 “(viii) such additional information as
22 required by the Administrator.

23 “(E) USES OF FUNDS.—Each eligible enti-
24 ty that receives a grant under this paragraph
25 shall use the grant funds to carry out the ac-

1 activities described in such entity’s application
2 pursuant to subparagraph (D). Grants under
3 this paragraph shall not exceed \$100,000 per
4 year and may not exceed four years.

5 “(F) ACCOUNTABILITY.—On the date on
6 which the Administrator first publishes a notice
7 in the Federal Register soliciting applications
8 for grants under this paragraph, the Adminis-
9 trator shall include in the notice achievement
10 indicators for the program authorized under
11 this paragraph. The achievement indicators
12 shall be designed to—

13 “(i) measure the impact that the coa-
14 lition assisted under this paragraph is hav-
15 ing on the institution of higher education
16 and the surrounding communities, includ-
17 ing changes in the number of incidents of
18 any kind in which students have abused al-
19 cohol or consumed alcohol while under the
20 age of 21 (including violations, physical as-
21 saults, sexual assaults, reports of intimidat-
22 ion, disruptions of school functions, dis-
23 ruptions of student studies, mental health
24 referrals, illnesses, alcohol-related trans-

1 ports to emergency departments, or
2 deaths); and

3 “(ii) provide such other measures of
4 program impact as the Administrator de-
5 termines appropriate.

6 “(G) SUPPLEMENT NOT SUPPLANT.—
7 Grant funds provided under this paragraph
8 shall be used to supplement, and not supplant,
9 Federal and non-Federal funds available for
10 carrying out the activities described in this
11 paragraph.

12 “(H) DEFINITIONS.—For purposes of this
13 paragraph:

14 “(i) ELIGIBLE ENTITY.—The term ‘el-
15 igible entity’ means an organization that—

16 “(I) on or before the date of sub-
17 mitting an application for a grant
18 under this subsection is currently re-
19 ceiving or has received grant funds
20 under the Drug-Free Communities
21 Act of 1997 (21 U.S.C. 1521 et seq.);

22 “(II) can provide evidence of pre-
23 existing involvement of one or more
24 institutions of higher education; and

1 “(III) has a documented strategy
2 to prevent and reduce underage drink-
3 ing by students at institutions of
4 higher education as part of its multi-
5 sector, community-based strategy.

6 “(ii) INSTITUTION OF HIGHER EDU-
7 CATION.—The term ‘institution of higher
8 education’ has the meaning given the term
9 in section 101(a) of the Higher Education
10 Act of 1965 (20 U.S.C. 1001(a)).

11 “(iii) SURROUNDING COMMUNITY.—
12 The term ‘surrounding community’ means
13 the community—

14 “(I) that surrounds an institution
15 of higher education;

16 “(II) where the students from
17 the institution of higher education
18 take part in the community; and

19 “(III) where students from the
20 institution of higher education live in
21 off-campus housing.

22 “(I) ADMINISTRATIVE EXPENSES.—Not
23 more than 6 percent of a grant under this para-
24 graph may be expended for administrative ex-
25 penses.

1 “(J) AUTHORIZATION OF APPROPRIA-
2 TIONS.—There are authorized to be appro-
3 priated to carry out this paragraph \$2,500,000
4 for fiscal year 2014, and \$2,500,000 for each
5 of the fiscal years 2015 through 2018.

6 “(f) REDUCING UNDERAGE DRINKING THROUGH
7 SCREENING AND BRIEF INTERVENTION.—

8 “(1) GRANTS TO PEDIATRIC HEALTH CARE
9 PROVIDERS TO REDUCE UNDERAGE DRINKING.—The
10 Secretary, acting through the Administrator of the
11 Substance Abuse and Mental Health Services Ad-
12 ministration, shall make one or more grants to pro-
13 fessional pediatric provider organizations to increase
14 among the members of such organizations effective
15 practices to reduce the prevalence of alcohol use
16 among individuals under the age of 21, including
17 college students.

18 “(2) PURPOSES.—Grants under this subsection
19 shall be made to promote the practices of—

20 “(A) screening children and adolescents for
21 alcohol use;

22 “(B) offering brief interventions to chil-
23 dren and adolescents to discourage such use;

24 “(C) educating parents about the dangers
25 of and methods of discouraging such use;

1 “(D) diagnosing and treating alcohol abuse
2 disorders; and

3 “(E) referring patients, when necessary, to
4 other appropriate care.

5 “(3) USE OF FUNDS.—An organization receiv-
6 ing a grant under this subsection may use such
7 funding to promote the practices specified in para-
8 graph (B) among its members by—

9 “(A) providing training to health care pro-
10 viders;

11 “(B) disseminating best practices, includ-
12 ing culturally and linguistically appropriate best
13 practices, and developing, printing, and distrib-
14 uting materials; and

15 “(C) offering other activities approved by
16 the Secretary.

17 “(4) APPLICATION.—An organization desiring a
18 grant under this subsection shall submit an applica-
19 tion to the Secretary at such time, and in such man-
20 ner, and accompanied by such information as the
21 Secretary may require. Each application shall in-
22 clude—

23 “(A) a description of the organization and
24 how its members are qualified to provide the
25 services specified in paragraph (2);

1 “(B) a description of activities to be com-
2 pleted; and

3 “(C) a timeline for the completion of such
4 activities.

5 “(5) DEFINITIONS.—For the purpose of this
6 subsection:

7 “(A) The term ‘pediatric health care pro-
8 vider’ means a provider of primary health care
9 to individuals under the age of 21.

10 “(B) The term ‘professional pediatric pro-
11 vider organization’ means a national organiza-
12 tion whose members consist primarily of pedi-
13 atric health care providers.

14 “(C) The term ‘children and adolescents’
15 means any person under 21 years of age.

16 “(D) The term ‘alcohol education’ means
17 evidence-based education about the effects of al-
18 cohol use and abuse on children, adolescents,
19 and adults.

20 “(E) The term ‘screening and brief inter-
21 vention’ means using validated patient interview
22 techniques to identify and assess the existence
23 and extent of alcohol use, then providing brief
24 advice and other brief motivational enhance-
25 ment techniques designed to increase patient in-

1 sight regarding their own alcohol use and any
2 realized or potential consequences of this behav-
3 ior, as well as to effect the desired related be-
4 havioral change.

5 “(F) The term ‘caregivers’ means, with re-
6 spect to a child or adolescent, the parents, fam-
7 ily members, or legal guardians of the child or
8 adolescent.

9 “(6) AUTHORIZATION OF APPROPRIATIONS.—
10 There are authorized to be appropriated to carry out
11 this subsection \$3,000,000 for fiscal year 2014, and
12 \$3,000,000 for each of the fiscal years 2015 through
13 2018.

14 “(g) DATA COLLECTION AND RESEARCH.—

15 “(1) ADDITIONAL RESEARCH ON UNDERAGE
16 DRINKING.—The Secretary shall, subject to the
17 availability of appropriations, collect data, and con-
18 duct or support research that is not duplicative of
19 research currently being conducted or supported by
20 the Department of Health and Human Services, on
21 underage drinking, with respect to the following:

22 “(A) Improve data collection in support of
23 evaluation of the effectiveness of comprehensive
24 community-based programs or strategies and
25 statewide systems to prevent and reduce under-

1 age drinking, across the underage years from
2 early childhood to age 21, such as programs
3 funded and implemented by government enti-
4 ties, public health interest groups and founda-
5 tions, and alcohol beverage companies and trade
6 associations, through the development of models
7 of State-level epidemiological surveillance of un-
8 derage drinking by funding in States or large
9 metropolitan areas new epidemiologists focused
10 on excessive drinking including underage alco-
11 hol use.

12 “(B) Obtain and report more precise infor-
13 mation than is currently collected on the scope
14 of the underage drinking problem and patterns
15 of underage alcohol consumption, including im-
16 proved knowledge about the problem and
17 progress in preventing, reducing, and treating
18 underage drinking; as well as information on
19 the rate of exposure of youth to advertising and
20 other media messages encouraging and discour-
21 aging alcohol consumption.

22 “(C) Synthesize, expand on, and widely
23 disseminate existing research on effective strat-
24 egies for reducing underage drinking, including

1 translational research, and make this research
2 easily accessible to the general public.

3 “(D) Improve and conduct public health
4 surveillance on alcohol use and alcohol-related
5 conditions in States by increasing the use of
6 surveys, such as the Behavioral Risk Factor
7 Surveillance System, to monitor binge and ex-
8 cessive drinking and related harms among indi-
9 viduals who are at least 18 years of age, but
10 not more than 20 years of age, including harm
11 caused to self or others as a result of alcohol
12 use that is not duplicative of research currently
13 being conducted or supported by the Depart-
14 ment of Health and Human Services.

15 “(2) AUTHORIZATION OF APPROPRIATIONS.—
16 There are authorized to be appropriated to carry out
17 this subsection \$4,500,000 for each of the fiscal
18 years 2014 through 2018.”.

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