

117TH CONGRESS
2D SESSION

H. R. 7105

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

IN THE HOUSE OF REPRESENTATIVES

MARCH 16, 2022

Ms. ROYBAL-ALLARD (for herself, Mr. JOYCE of Ohio, Ms. DELAURO, Mr. FITZPATRICK, and Mr. TONKO) 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 multifaceted 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 and social
21 media platforms have a powerful impact on youth,
22 and they should use rating systems and marketing
23 codes to reduce the likelihood that underage audi-
24 ences will be exposed to movies, recordings, tele-

1 vision programs, or social media with unsuitable al-
2cohol content.

3 “(6) The National Collegiate Athletic Associa-
4tion, its member colleges and universities, and ath-
5letic conferences should affirm a commitment to a
6policy of discouraging alcohol use among underage
7students and other young fans.

8 “(7) Alcohol is a unique product and should be
9regulated differently than other products by the
10States and Federal Government. States have pri-
11mary authority to regulate alcohol distribution and
12sale, and the Federal Government should support
13and supplement these State efforts. States also have
14a responsibility to fight youth access to alcohol and
15reduce underage drinking. Continued State regula-
16tion and licensing of the manufacture, importation,
17sale, distribution, transportation, and storage of al-
18coholic beverages are clearly in the public interest
19and are critical to promoting responsible consump-
20tion, preventing illegal access to alcohol by persons
21under 21 years of age from commercial and non-
22commercial sources, maintaining industry integrity
23and an orderly marketplace, and furthering effective
24State tax collection.

1 “(8) The age-21 minimum drinking law, en-
2 acted in 1984, has been a remarkably effective pub-
3 lic health and safety policy, as evidenced by the fact
4 that the percentage of 12th graders who have drunk
5 alcohol in the past month has fallen by one-half
6 since the enactment of such law.

7 “(9) The age-21 law has also has been signifi-
8 cantly effective in reducing drinking and driving
9 traffic fatalities, as the National Highway Traffic
10 Safety Administration (NHTSA) estimates that the
11 age-21 law has saved over 31,000 lives since its in-
12 ception.

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

17 “(c) INTERAGENCY COORDINATING COMMITTEE; AN-
18 NUAL REPORT ON STATE UNDERAGE DRINKING PREVEN-
19 TION AND ENFORCEMENT ACTIVITIES.—

20 “(1) INTERAGENCY COORDINATING COMMITTEE
21 ON THE PREVENTION OF UNDERAGE DRINKING.—

22 “(A) IN GENERAL.—The Secretary, in col-
23 laboration with the Federal officials specified in
24 subparagraph (B), shall continue to support
25 and enhance the efforts of the interagency co-

1 ordinating committee, that began operating in
2 2004, focusing on underage drinking (referred
3 to in this subsection as the ‘Committee’).

4 “(B) OTHER AGENCIES.—The officials re-
5 ferred to in subparagraph (A) are the Secretary
6 of Education, the Attorney General, the Sec-
7 retary of Transportation, the Secretary of the
8 Treasury, the Secretary of Defense, the Sur-
9 geon General, the Director of the Centers for
10 Disease Control and Prevention, the Director of
11 the National Institute on Alcohol Abuse and Al-
12 coholism, the Assistant Secretary for Mental
13 Health and Substance Use, the Director of the
14 National Institute on Drug Abuse, the Assist-
15 ant Secretary for Children and Families, the
16 Director of the Office of National Drug Control
17 Policy, the Administrator of the National High-
18 way Traffic Safety Administration, the Admin-
19 istrator of the Office of Juvenile Justice and
20 Delinquency Prevention, the Chairman of the
21 Federal Trade Commission, and such other
22 Federal officials as the Secretary of Health and
23 Human Services determines to be appropriate.

1 “(C) CHAIR.—The Secretary of Health
2 and Human Services shall serve as the chair of
3 the Committee.

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

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

17 “(F) ANNUAL REPORT.—

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

22 “(I) all programs and policies of
23 Federal agencies designed to prevent
24 and reduce underage drinking, focus-
25 ing particularly on programs and poli-

1 cies that support the adoption and en-
2 forcement of State policies designed to
3 prevent and reduce underage drinking
4 as specified in paragraph (2);

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

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

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

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

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

1 “(II) Measures of the availability
2 of alcohol from commercial and non-
3 commercial sources to underage popu-
4 lations.

5 “(III) Measures of the exposure
6 of underage populations to messages
7 regarding alcohol in advertising, social
8 media, and the entertainment media.

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

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

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

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

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

1 designed as a resource tool for Federal agencies
2 assisting States in the their underage drinking
3 prevention efforts, State public health and law
4 enforcement agencies, State and local policy-
5 makers, and underage drinking prevention coa-
6 litions including those receiving grants pursuant
7 to subsection (e).

8 “(B) STATE PERFORMANCE MEASURES.—

9 “(i) IN GENERAL.—The Secretary
10 shall develop, in consultation with the
11 Committee, a set of measures to be used in
12 preparing the State Report on best prac-
13 tices as they relate to State laws, regula-
14 tions, policies, and enforcement practices.

15 “(ii) STATE REPORT CONTENT.—The
16 State Report shall include updates on
17 State laws, regulations, and policies in-
18 cluded in previous reports to Congress, in-
19 cluding with respect to the following:

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

1 furnishing or obtaining of alcohol for
2 an individual under 21 years; the de-
3 gree of strictness of the penalties for
4 such offenses; and the prevalence of
5 the enforcement of each of these in-
6 fractions.

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

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

1 “(IV) Whether or not the State
2 encourages training on the proper
3 selling and serving of alcohol for all
4 sellers and servers of alcohol as a con-
5 dition of employment.

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

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

15 “(VII) Whether or not the State
16 has enacted graduated drivers licenses
17 and the extent of those provisions.

18 “(iii) ADDITIONAL CATEGORIES.—In
19 addition to the updates on State laws, reg-
20 ulations, and policies listed in clause (ii),
21 the Secretary shall consider the following:

22 “(I) Whether or not States have
23 adopted laws, regulations, and policies
24 that deter underage alcohol use, as
25 described in ‘The Surgeon General’s

1 Call to Action to Prevent and Reduce
2 Underage Drinking’ issued in 2007
3 and ‘Facing Addiction in America:
4 The Surgeon General’s Report on Al-
5cohol, Drugs and Health’ issued in
6 2016, including restrictions on low-
7 price, high-volume drink specials, and
8 wholesaler pricing provisions.

9 “(II) Whether or not States have
10 adopted laws, regulations, and policies
11 designed to reduce alcohol advertising
12 messages attractive to youth and
13 youth exposure to alcohol advertising
14 and marketing in measured and
15 unmeasured media and digital and so-
16 cial media.

17 “(III) Whether or not States
18 have laws and policies that promote
19 underage drinking prevention policy
20 development by local jurisdictions.

21 “(IV) Whether or not States
22 have adopted laws, regulations, and
23 policies to restrict youth access to al-
24 coholic beverages that may pose spe-
25 cial risks to youth, including but not

1 limited to alcoholic mists, gelatins,
2 freezer pops, premixed caffeinated al-
3 coholic beverages, and flavored malt
4 beverages.

5 “(V) Whether or not States have
6 adopted uniform best practices proto-
7 cols for conducting compliance checks
8 and shoulder tap programs.

9 “(VI) Whether or not States
10 have adopted uniform best practices
11 penalty protocols for violations of laws
12 prohibiting retail licensees from sell-
13 ing or furnishing of alcohol to minors.

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

1 “(3) AUTHORIZATION OF APPROPRIATIONS.—

2 There is authorized to be appropriated to carry out
3 this subsection \$1,000,000 for each of fiscal years
4 2023 through 2027.

5 “(d) NATIONAL MEDIA CAMPAIGN TO PREVENT UN-
6 DERAGE DRINKING.—

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

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

19 “(A) Instill a broad societal commitment to
20 reduce underage drinking.

21 “(B) Increase specific actions by adults
22 that are meant to discourage or inhibit under-
23 age drinking.

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

1 “(3) COMPONENTS.—When implementing the
2 national media campaign described in this section,
3 the Secretary shall—

4 “(A) educate the public about the public
5 health and safety benefits of evidence-based
6 policies to reduce underage drinking, including
7 minimum legal drinking age laws, and build
8 public and parental support for and cooperation
9 with enforcement of such policies;

10 “(B) educate the public about the negative
11 consequences of underage drinking;

12 “(C) promote specific actions by adults
13 that are meant to discourage or inhibit under-
14 age drinking, including positive behavior mod-
15 eling, general parental monitoring, and con-
16 sistent and appropriate discipline;

17 “(D) discourage adult conduct that tends
18 to facilitate underage drinking, including the
19 hosting of underage parties with alcohol and
20 the purchasing of alcoholic beverages on behalf
21 of underage youth;

22 “(E) establish collaborative relationships
23 with local and national organizations and insti-
24 tutions to further the goals of the campaign

1 and assure that the messages of the campaign
2 are disseminated from a variety of sources;

3 “(F) conduct the campaign through multi-
4 media sources; and

5 “(G) conduct the campaign with regard to
6 changing demographics and cultural and lin-
7 guistic factors.

8 “(4) CONSULTATION REQUIREMENT.—In devel-
9 oping and implementing the national media cam-
10 paign described in this section, the Secretary shall
11 consult recommendations for reducing underage
12 drinking published by the National Academy of
13 Sciences and the Surgeon General. The Secretary
14 shall also consult with interested parties including
15 medical, public health, and consumer and parent
16 groups, law enforcement, institutions of higher edu-
17 cation, community organizations and coalitions, and
18 other stakeholders supportive of the goals of the
19 campaign.

20 “(5) ANNUAL REPORT.—The Secretary shall
21 produce an annual report on the progress of the de-
22 velopment or implementation of the media campaign
23 described in this subsection, including expenses and
24 projected costs, and, as such information is avail-
25 able, report on the effectiveness of such campaign in

1 affecting adult attitudes toward underage drinking
2 and adult willingness to take actions to decrease un-
3 derage drinking.

4 “(6) RESEARCH ON YOUTH-ORIENTED CAM-
5 PAIGN.—The Secretary may, based on the avail-
6 ability of funds, conduct research on the potential
7 success of a youth-oriented national media campaign
8 to reduce underage drinking. The Secretary shall re-
9 port any such results to Congress with policy rec-
10 ommendations on establishing such a campaign.

11 “(7) ADMINISTRATION.—The Secretary may
12 enter into a subcontract with another Federal agen-
13 cy to delegate the authority for execution and ad-
14 ministration of the adult-oriented national media
15 campaign.

16 “(8) AUTHORIZATION OF APPROPRIATIONS.—
17 There is authorized to be appropriated to carry out
18 this section \$2,500,000 for each of fiscal years 2023
19 through 2027.

20 “(e) COMMUNITY-BASED COALITION ENHANCEMENT
21 GRANTS TO PREVENT UNDERAGE DRINKING.—

22 “(1) AUTHORIZATION OF PROGRAM.—The As-
23 sistant Secretary for Mental Health and Substance
24 Use, in consultation with the Director of the Office
25 of National Drug Control Policy, shall award en-

1 hancement grants to eligible entities to design, im-
2 plement, evaluate, and disseminate comprehensive
3 strategies to maximize the effectiveness of commu-
4 nity-wide approaches to preventing and reducing un-
5 derage drinking. This subsection is subject to the
6 availability of appropriations.

7 “(2) PURPOSES.—The purposes of this sub-
8 section are to—

9 “(A) prevent and reduce alcohol use among
10 youth in communities throughout the United
11 States;

12 “(B) strengthen collaboration among com-
13 munities, the Federal Government, Tribal Gov-
14 ernments, and State and local governments;

15 “(C) enhance intergovernmental coopera-
16 tion and coordination on the issue of alcohol
17 use among youth;

18 “(D) serve as a catalyst for increased cit-
19 izen participation and greater collaboration
20 among all sectors and organizations of a com-
21 munity that first demonstrates a long-term
22 commitment to reducing alcohol use among
23 youth;

24 “(E) implement state-of-the-art science-
25 based strategies to prevent and reduce underage

1 drinking by changing local conditions in com-
2 munities; and

3 “(F) enhance, not supplant, effective local
4 community initiatives for preventing and reduc-
5 ing alcohol use among youth.

6 “(3) APPLICATION.—An eligible entity desiring
7 an enhancement grant under this subsection shall
8 submit an application to the Assistant Secretary at
9 such time, and in such manner, and accompanied by
10 such information and assurances, as the Assistant
11 Secretary may require. Each application shall in-
12 clude—

13 “(A) a complete description of the entity’s
14 current underage alcohol use prevention initia-
15 tives and how the grant will appropriately en-
16 hance the focus on underage drinking issues; or

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

21 “(4) USES OF FUNDS.—Each eligible entity
22 that receives a grant under this subsection shall use
23 the grant funds to carry out the activities described
24 in such entity’s application submitted pursuant to
25 paragraph (3) and obtain specialized training and

1 technical assistance by the entity funded under sec-
2 tion 4 of Public Law 107–82, as amended (21
3 U.S.C. 1521 note). Grants under this subsection
4 shall not exceed \$60,000 per year and may not ex-
5 ceed four years.

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

11 “(6) EVALUATION.—Grants under this sub-
12 section shall be subject to the same evaluation re-
13 quirements and procedures as the evaluation re-
14 quirements and procedures imposed on recipients of
15 drug-free community grants.

16 “(7) DEFINITIONS.—For purposes of this sub-
17 section, the term ‘eligible entity’ means an organiza-
18 tion that is currently receiving or has received grant
19 funds under the Drug-Free Communities Act of
20 1997.

21 “(8) ADMINISTRATIVE EXPENSES.—Not more
22 than 6 percent of a grant under this subsection may
23 be expended for administrative expenses.

24 “(9) AUTHORIZATION OF APPROPRIATIONS.—
25 There is authorized to be appropriated to carry out

1 this subsection \$11,500,000 for each of fiscal years
2 2023 through 2027.

3 “(f) GRANTS TO PROFESSIONAL PEDIATRIC PRO-
4 VIDER ORGANIZATIONS TO REDUCE UNDERAGE DRINK-
5 ING THROUGH SCREENING AND BRIEF INTERVEN-
6 TIONS.—

7 “(1) IN GENERAL.—The Secretary, acting
8 through the Assistant Secretary for Mental Health
9 and Substance Use, shall make one or more grants
10 to professional pediatric provider organizations to in-
11 crease among the members of such organizations ef-
12 fective practices to reduce the prevalence of alcohol
13 use among individuals under the age of 21, including
14 college students.

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

17 “(A) screening children and adolescents for
18 alcohol use;

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

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

23 “(D) diagnosing and treating alcohol use
24 disorders; and

1 “(E) referring patients, when necessary, to
2 other appropriate care.

3 “(3) USE OF FUNDS.—A professional pediatric
4 provider organization receiving a grant under this
5 section may use the grant funding to promote the
6 practices specified in paragraph (2) among its mem-
7 bers by—

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

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

14 “(C) supporting other activities approved
15 by the Assistant Secretary.

16 “(4) APPLICATION.—To be eligible to receive a
17 grant under this subsection, a professional pediatric
18 provider organization shall submit an application to
19 the Assistant Secretary at such time, and in such
20 manner, and accompanied by such information and
21 assurances as the Secretary may require. Each ap-
22 plication shall include—

23 “(A) a description of the pediatric provider
24 organization;

1 “(B) a description of the activities to be
2 completed that will promote the practices speci-
3 fied in paragraph (2);

4 “(C) a description of the organization’s
5 qualifications for performing such practices;
6 and

7 “(D) a timeline for the completion of such
8 activities.

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

11 “(A) BRIEF INTERVENTION.—The term
12 ‘brief intervention’ means, after screening a pa-
13 tient, providing the patient with brief advice
14 and other brief motivational enhancement tech-
15 niques designed to increase the insight of the
16 patient regarding the patient’s alcohol use, and
17 any realized or potential consequences of such
18 use to effect the desired related behavioral
19 change.

20 “(B) CHILDREN AND ADOLESCENTS.—The
21 term ‘children and adolescents’ means individ-
22 uals under 21 years of age.

23 “(C) PROFESSIONAL PEDIATRIC PROVIDER
24 ORGANIZATION.—The term ‘professional pedi-

1 atric provider organization’ means an organiza-
2 tion or association that—

3 “(i) consists of or represents pediatric
4 health care providers; and

5 “(ii) is qualified to promote the prac-
6 tices specified in paragraph (2).

7 “(D) SCREENING.—The term ‘screening’
8 means using validated patient interview tech-
9 niques to identify and assess the existence and
10 extent of alcohol use in a patient.

11 “(6) AUTHORIZATION OF APPROPRIATIONS.—
12 There is authorized to be appropriated to carry out
13 this subsection \$3,000,000 for each of fiscal years
14 2023 through 2027.

15 “(g) DATA COLLECTION AND RESEARCH.—

16 “(1) ADDITIONAL RESEARCH ON UNDERAGE
17 DRINKING.—

18 “(A) IN GENERAL.—The Secretary shall,
19 subject to the availability of appropriations, col-
20 lect data, and conduct or support research that
21 is not duplicative of research currently being
22 conducted or supported by the Department of
23 Health and Human Services, on underage
24 drinking, with respect to the following:

1 “(i) Improve data collection in sup-
2 port of evaluation of the effectiveness of
3 comprehensive community-based programs
4 or strategies and statewide systems to pre-
5 vent and reduce underage drinking, across
6 the underage years from early childhood to
7 age 21, such as programs funded and im-
8 plemented by governmental entities, public
9 health interest groups and foundations,
10 and alcohol beverage companies and trade
11 associations, through the development of
12 models of State-level epidemiological sur-
13 veillance of underage drinking by funding
14 in States or large metropolitan areas new
15 epidemiologists focused on excessive drink-
16 ing including underage alcohol use.

17 “(ii) Obtain and report more precise
18 information than is currently collected on
19 the scope of the underage drinking prob-
20 lem and patterns of underage alcohol con-
21 sumption, including improved knowledge
22 about the problem and progress in pre-
23 venting, reducing, and treating underage
24 drinking, as well as information on the
25 rate of exposure of youth to advertising

1 and other media messages encouraging and
2 discouraging alcohol consumption.

3 “(iii) Synthesize, expand on, and
4 widely disseminate existing research on ef-
5 fective strategies for reducing underage
6 drinking, including translational research,
7 and make this research easily accessible to
8 the general public.

9 “(iv) Improve and conduct public
10 health surveillance on alcohol use and alco-
11 hol-related conditions in States by increas-
12 ing the use of surveys, such as the Behav-
13 ioral Risk Factor Surveillance System, to
14 monitor binge and excessive drinking and
15 related harms among individuals who are
16 at least 18 years of age, but not more than
17 20 years of age, including harm caused to
18 self or others as a result of alcohol use
19 that is not duplicative of research currently
20 being conducted or supported by the De-
21 partment of Health and Human Services.

22 “(B) AUTHORIZATION OF APPROPRIA-
23 TIONS.—There is authorized to be appropriated
24 to carry out this paragraph \$5,000,000 for each
25 of fiscal years 2023 through 2027.

1 “(2) NATIONAL ACADEMY OF SCIENCES
2 STUDY.—

3 “(A) IN GENERAL.—Not later than 12
4 months after the enactment of the Sober Truth
5 on Preventing Underage Drinking Reauthoriza-
6 tion Act, the Secretary shall—

7 “(i) contract with the National Acad-
8 emy of Sciences to conduct a review of the
9 research literature regarding the influence
10 of drinking alcohol on the development of
11 the adolescent brain and the public policy
12 implications of this research; and

13 “(ii) report to the Congress on the re-
14 sults of such review.

15 “(B) AUTHORIZATION OF APPROPRIA-
16 TIONS.—There is authorized to be appropriated
17 to carry out this paragraph \$500,000 for fiscal
18 year 2023.”.

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