Racial/ethnic disparities in alcohol prevention & policy: an interview with Rhonda Jones–Webb

The Institute for Diversity, Equity, and Advocacy (IDEA) is proud to present these profiles highlighting our faculty’s outstanding research and community engagement around grand challenges.

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Nationally, African American men and white men are drinking in about the same percentages. But African American men report having more health and social consequences of drinking than white men. (e.g., cirrhosis of the liver, problems with work, family, law).

Since first learning about this as a graduate student at UC Berkeley, Rhonda Jones-Webb has built an impressive line of research around finding out: why?

Currently a Professor in the Division of Epidemiology and Community Health at the UMN School of Public Health, Jones-Webb defines herself as “one of just a handful of minority researchers” who studies alcohol epidemiology and policy with a special focus on race, class, and neighborhood influences.

She looks at the causes of higher rates of alcohol-related problems among African Americans and what can be done to reduce them. She is especially concerned with the role of alcohol policies as a tool to prevent future problems.

Why is this research important?

Alcohol-related problems have a tremendous social impact on individuals, families, and communities. Alcohol use is the third leading cause of death in the United States – and it’s preventable. It’s also related to higher incidents of violence and other crimes.
Jones-Webb believes neighborhood poverty contributes to alcohol-related problems in African American communities. “Poorer neighborhoods, which are disproportionately black, have more alcohol outlets, e.g., liquor stores. Alcohol is also more highly promoted through billboards, bus shelters, etc. in these neighborhoods.”

High alcohol content beverages, such as malt liquor, are also heavily promoted in poorer neighborhoods and are associated with heavy drinking and crime.

Research shows that policy changes can be impactful. “Premature mortality, which is higher among African Americans, is preventable through policy change. If we have the political will . . . People don’t have to die young.”

How does this research impact communities?

Jones-Webb looked at what cities have done towards implementing policies restricting the sales of high alcohol content beverages. “We looked at why some cities are more successful than others at implementing these policies and what could other cities learn? We found cities that were successful had greater public support for the policies and less opposition from the alcohol industry compared to cities that were unsuccessful.”

Along with colleagues in the Alcohol Epidemiology Program at the UM the School of Public Health, Jones-Webb studies the impact of implementing policies on alcohol outcomes at the local, state and national levels.

Barriers to changing policies

Jones-Webb provided examples from the alcohol policy field to highlight some of the challenges in adopting, implementing or changing alcohol policies. Residents in Oakland, California were concerned about the overconcentration of outlets and crime in their neighborhoods. While residents could not restrict the number of alcohol outlets, they pushed for a tax on alcohol outlets that provided funding for more police officers to monitor crime around alcohol outlets in their neighborhoods. “But that policy was heavily fought by the retailers.”

A number of cities that have placed restrictions on the sale of malt liquor have also faced opposition. Malt liquor is typically bought in large single bottles. “Rather than directly limit malt liquor sales, some cities passed laws that restricted single bottle sales, to minimize opposition.”

“Jones-Webb also commented, “it takes time and a lot of effort to get policies passed.”

She reminds us of when the blood alcohol limit (BAC) was lowered to .08, “it resulted in about a 20 – 30% reduction in fatal traffic crashes, but that was over a period of time.”

Interventions with youth

She is pleased to be involved in other studies, including working on a UM Grand Challenge research project on Just and Equitable Interventions with Chris Uggen in Sociology. They are evaluating different approaches to encourage healthy youth-to-adult transitions.

In addition, she has just completed a pilot study that examines what policies, programs, and practices are needed in the Twin Cities to reduce negative encounters between young African American men and police.

What keeps you engaged in this work – gives you hope for the future?

“I saw public health as an opportunity to foster social change. I was an English major at UCLA, and completed a Masters degree in African Literature and History there. Public Health seemed like a field where I could have the greatest impact on communities.”

“One thing that keeps me engaged is that public health problems like violent crime still persist and there are too few minority researchers in the field studying these issues.”

NIH has a number of alcohol research centers and training programs to encourage new investigators. Jones-Webb finds it encouraging seeing new people entering the field. “Without that type of support, you’re not going to have much of a pipeline.”

Any advice for students who may want to do this work?

“I would encourage students to think about public health as an alternative to more traditional health fields like medicine and nursing. Think about public health and the impact it can have on improving people’s everyday lives.”