

Communicating about alcohol and cancer risk: Challenges, opportunities, and a way forward

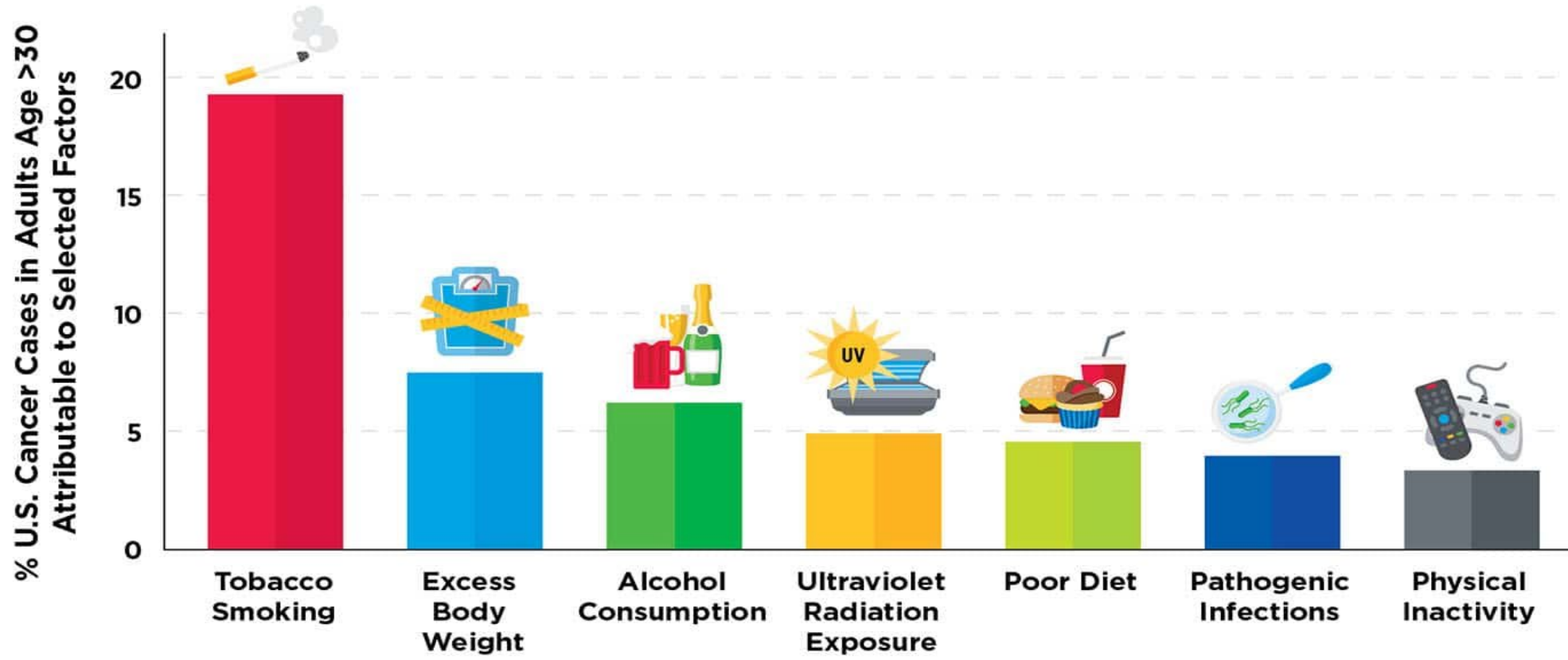
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Director, MSK Genomics, Risk & Health Decision-Making Laboratory

March 17, 2025
National Cancer Policy Forum workshop on Addressing the Impact of Tobacco and Alcohol Use on Cancer-Related Health Outcomes

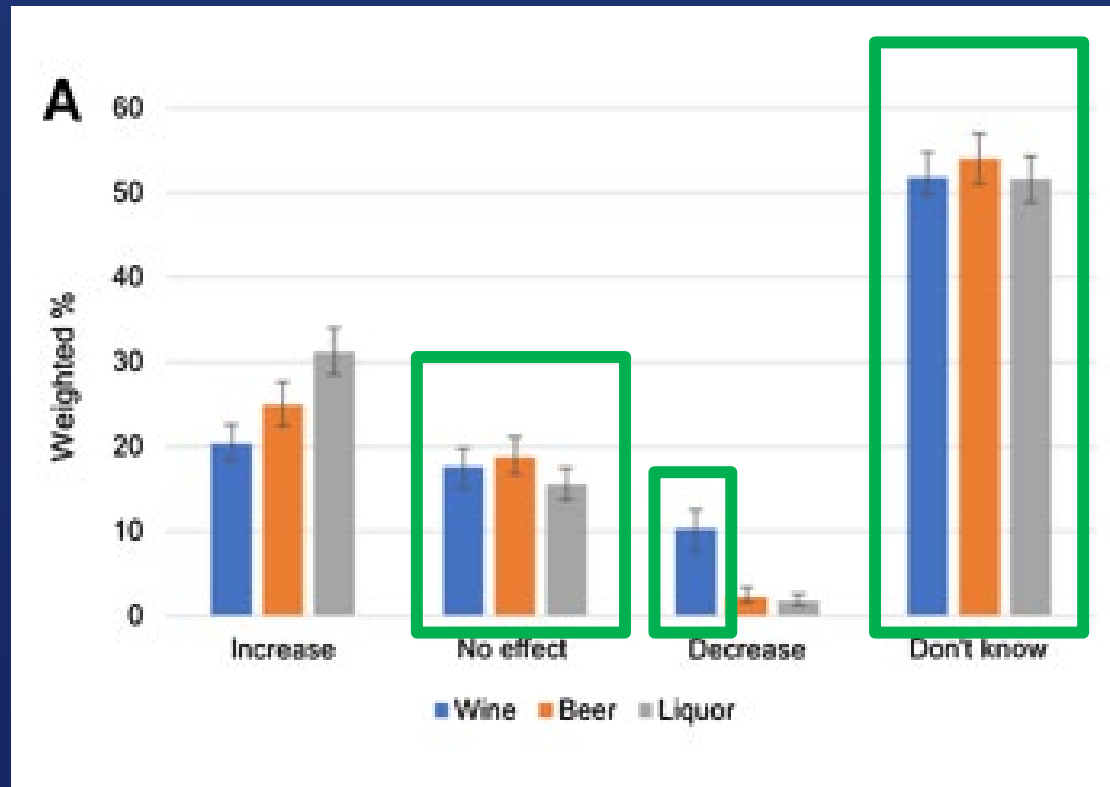


Memorial Sloan Kettering
Cancer Center

Modifiable Cancer Risks



Awareness of the cancer harms of alcohol use is currently exceedingly low in the United States*



“No effect” is a prevalent response

Wine is seen as “healthier”

Uncertainty is very high

*Seidenberg, Wiseman & Klein, *CEBP* 2023

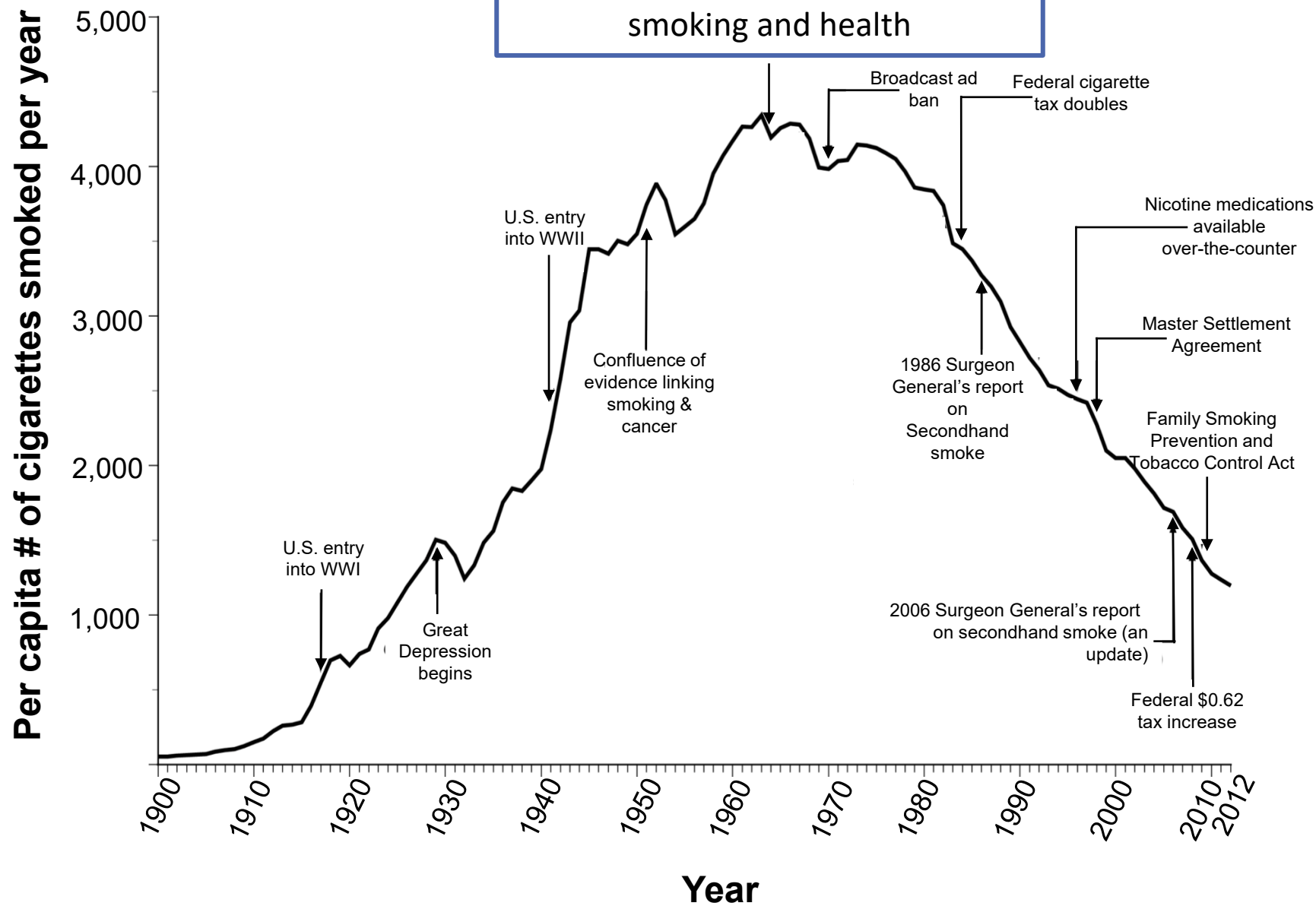
Alcohol and Cancer Risk

The U.S. Surgeon General's Advisory

2025



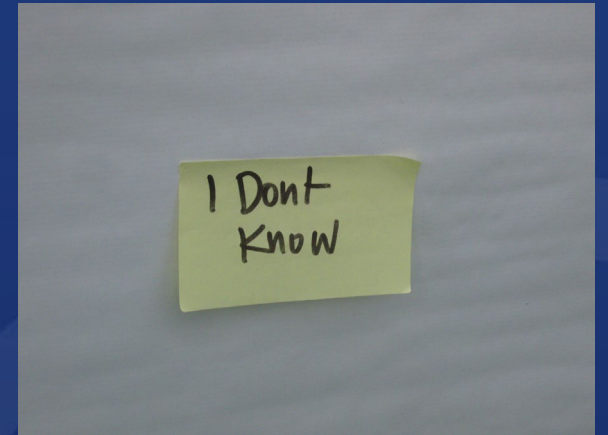
“Alcohol is a well-established, preventable cause of cancer responsible for about 100,000 cases of cancer and 20,000 cancer deaths annually in the United States – greater than the 13,500 alcohol-associated traffic crash fatalities per year in the U.S. – yet the majority of Americans are unaware of this risk. This Advisory lays out steps we can all take to increase awareness of alcohol’s cancer risk and minimize harm.” – said U.S. Surgeon General Dr. Vivek Murthy.



From: Centers for Disease Control and Prevention; 2014

Expressions of high cancer risk uncertainty*....

- Are associated with low adherence with health behaviors
- Established precursors include high health information avoidance
- Are associated with specific cancer risk beliefs, such as health information overload



*R01 CA197351 (MPIs Orom/Hay), R03 CA177775 (PI Waters); e.g., Waters, Kiviniemi, Hay, Orom, *Psych Science*, 2022.

Addressing low awareness of the cancer harms of alcohol in the population

- N=827 drinking adults
- Unaware of the alcohol-cancer link

Baseline

Current alcohol use
Health information avoidance
Cancer risk beliefs
Demographics

Aim 1: Examine the prevalence and predictors of *low awareness* after messaging.



Post-video

Awareness that alcohol causes cancer

Message effects (e.g., reactance, trust)

Invitation to those uncertain or inaccurate after video messaging...

4 groups:
those who remain uncertain

4 groups:
those who remain inaccurate

Aim 2: Examine alcohol beliefs, trusted channels & messaging strategies for hard-to-reach groups.

Quantitative: National probability survey

Qualitative: Focus groups

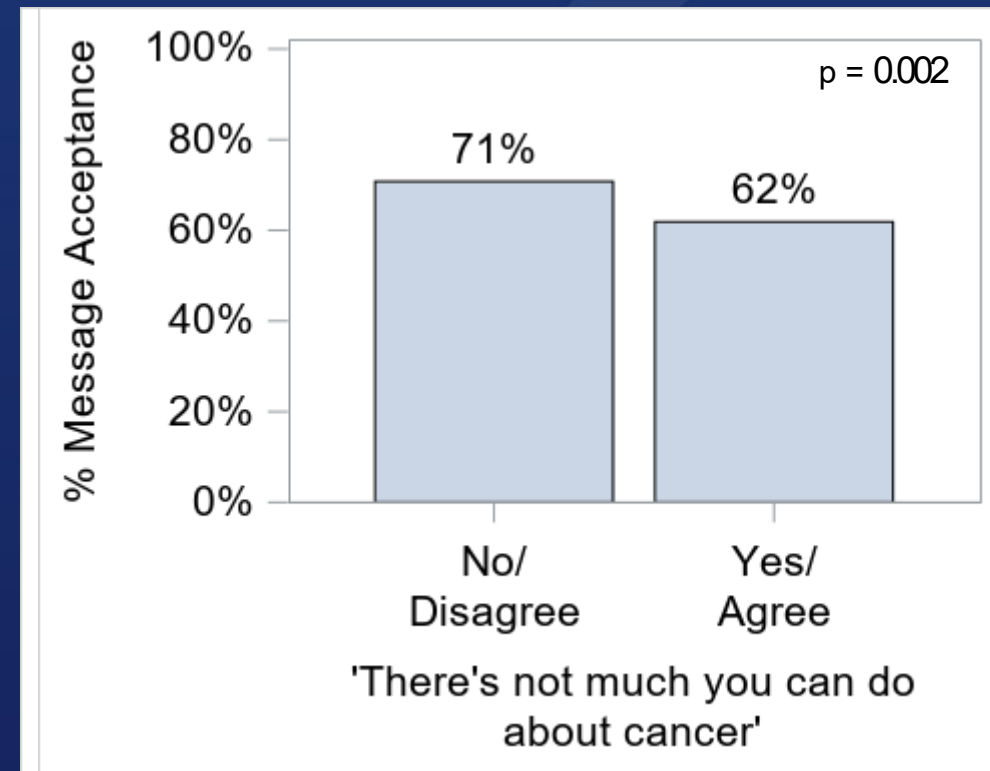


Aim 1: High message acceptance, identification of hard-to-reach groups

Overall, 70% were responsive to accurate messaging

Significantly lower rates of message acceptance among:

- Heavier drinkers
- Those with a personal cancer history
- Those with *no* family cancer history
- Those who avoid health information
- Those with beliefs impeding prevention



For those who are harder to reach:

Targeting specific subgroups

e.g., cancer survivors, heavy drinkers



For those who are harder to reach:

Addressing specific beliefs:

Not much you can do

Information overload

It's easy... just eat vegetables. Don't eat potatoes though or corn...

Fruit is obviously good for you, and also it's all sugar and is bad for you. Sugar, I forgot to mention, is a vital source of quick burning carbohydrates that your brain needs to survive, and you should avoid it at all costs...

Drink water. Never starve yourself unless you're calling it "intermittent fasting" and then it's okay to starve yourself a little bit. Don't overhydrate.

For those who are harder to reach:

Combatting health information avoidance



Strategies under investigation for reducing health information avoidance*

Health information avoidance is common (e.g., 10% - 30% of adults, depending on the disease) and consequential

- Ex: People who avoid colorectal cancer information are nearly half as likely to be screening adherent than those who do not

Strategies that can disrupt avoidance or promote persuasion among avoiders:

- Humor
- Promotion of self-efficacy and other agency beliefs



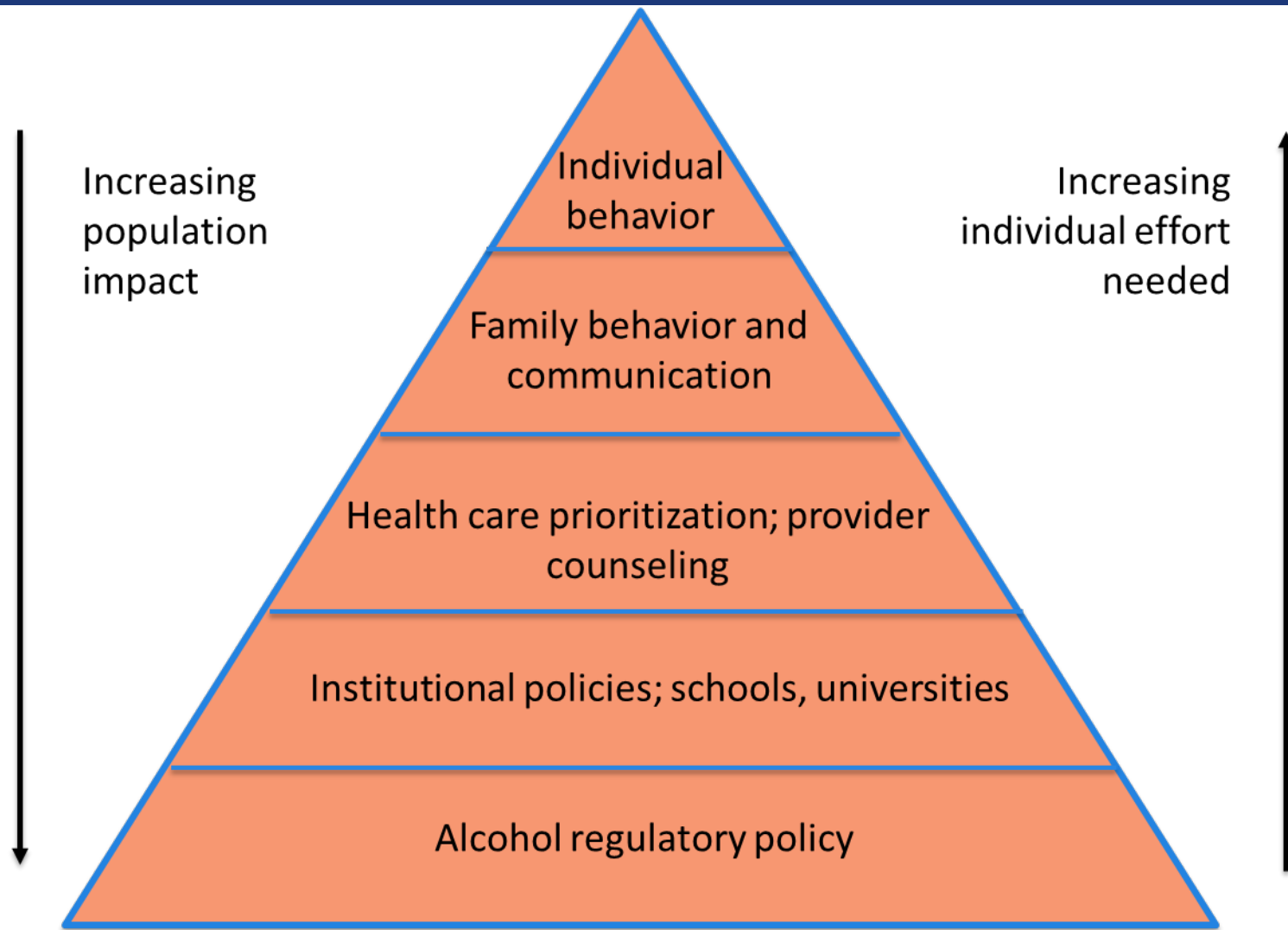
*Orom, et al., *Health Ed J*, 2021; *JBM*, 2024a; *Br J Health Psych* 2024b; and SPSP paper, 2/2025.

Messages must:

- Promote informed decision making about alcohol as the goal, not abstinence per se
- Address the supposed “health” effects of moderate drinking
- Appeal to shared values, identity, and goals
- Avoid division
- Humanize science and health experts

Public Health Communication Approaches for Building Common Ground

Wen-Ying Sylvia Chou, PhD, MPH, Irina A. Iles, PhD, MPH, Anna Gaysynsky, MPH, and William M. P. Klein, PhD



Frieden, Public Health Pyramid, *AJPH*, 2010

Gapstur et al., *CEBP*, 2022

Acknowledgements

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Thank you!



Culture of drinking



- “Moderate” drinking is ok
- Adult drinking is ok
- Women drinking is ok
- Wine is ok

SHE SPACE PINK OUT HAPPY HOUR

**BREAST CANCER
AWARENESS**

Tuesday, Oct 11 at 5:30pm



Cocktails For A Cause Cancer Research Fundraiser



Please join us
for the Department of Psychiatry's

Holiday Cocktail Reception

Thursday, December 12, 2024

5:00 - 7:00 PM

Griffis Faculty Club
1300 York Avenue, New York, NY 10065

**Please complete the form below to reserve your spot at the
ASCO Cocktail Reception.**

Friday, June 2 • 5:00 – 8:00 PM

Acanto, 18 S Michigan Ave, Chicago, IL 60603



The most expensive
part of having kids,

is all the wine
you have to
drink.

think before

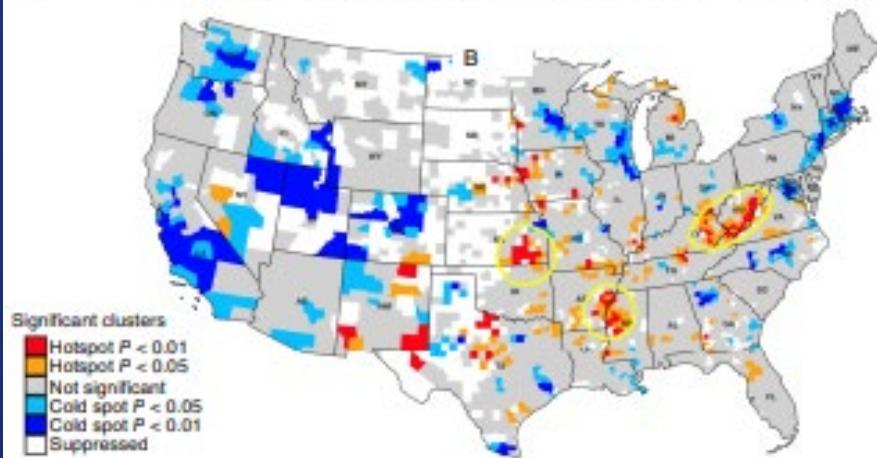


you pink

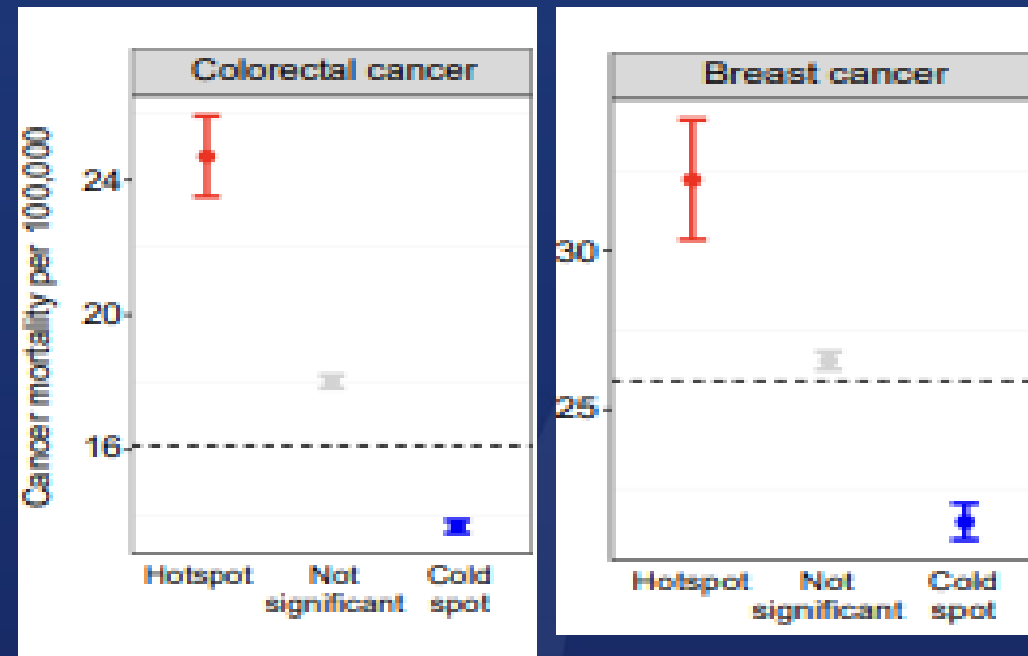
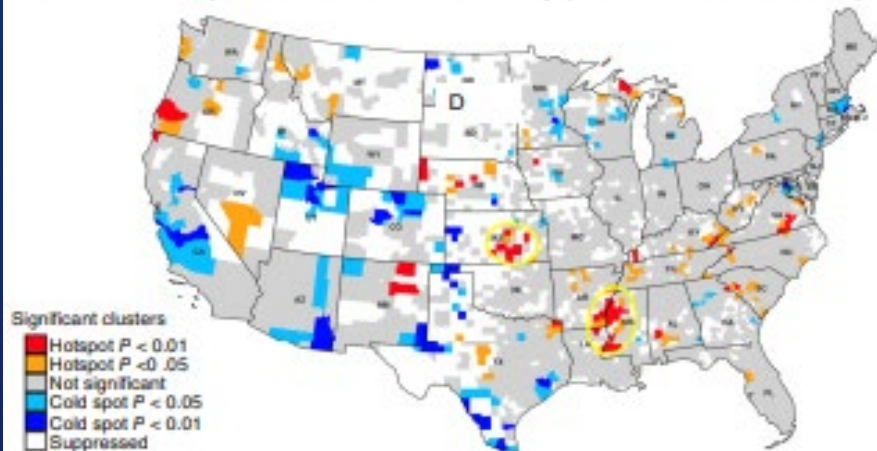
a project of

BREAST**CANCER****ACTION**.org

A Hotspots of colorectal cancer mortality (US mainland 2018–2022)



C Hotspots of breast cancer mortality (US mainland 2018–2022)

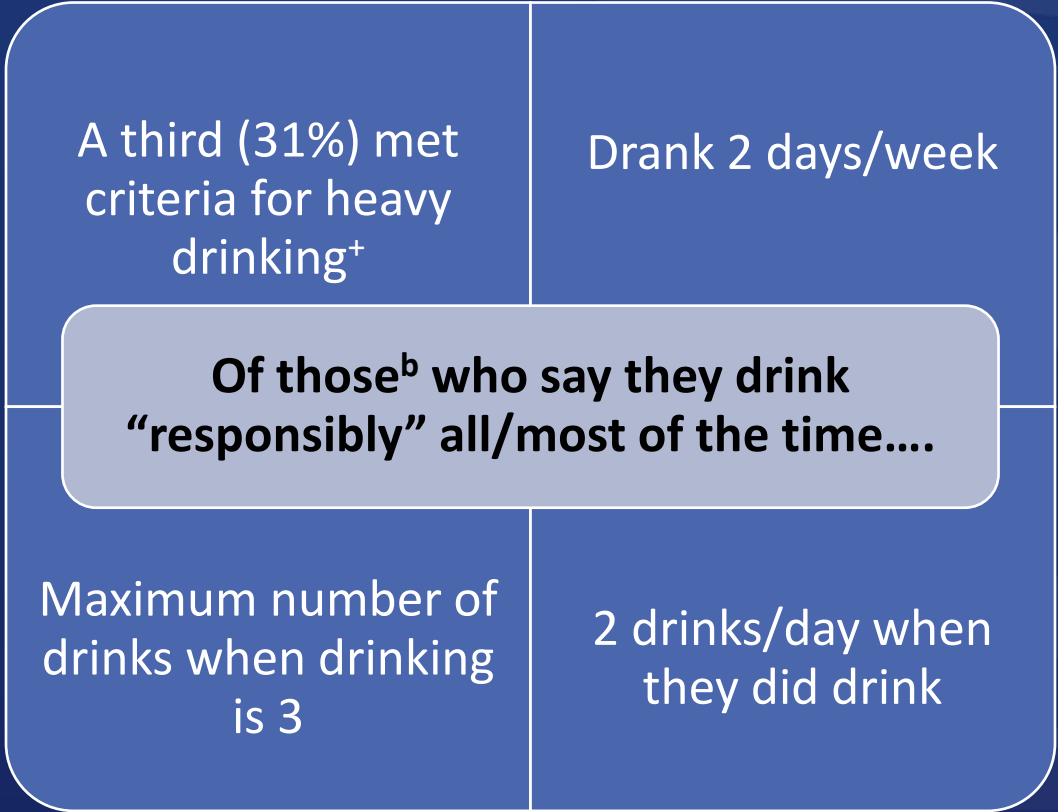
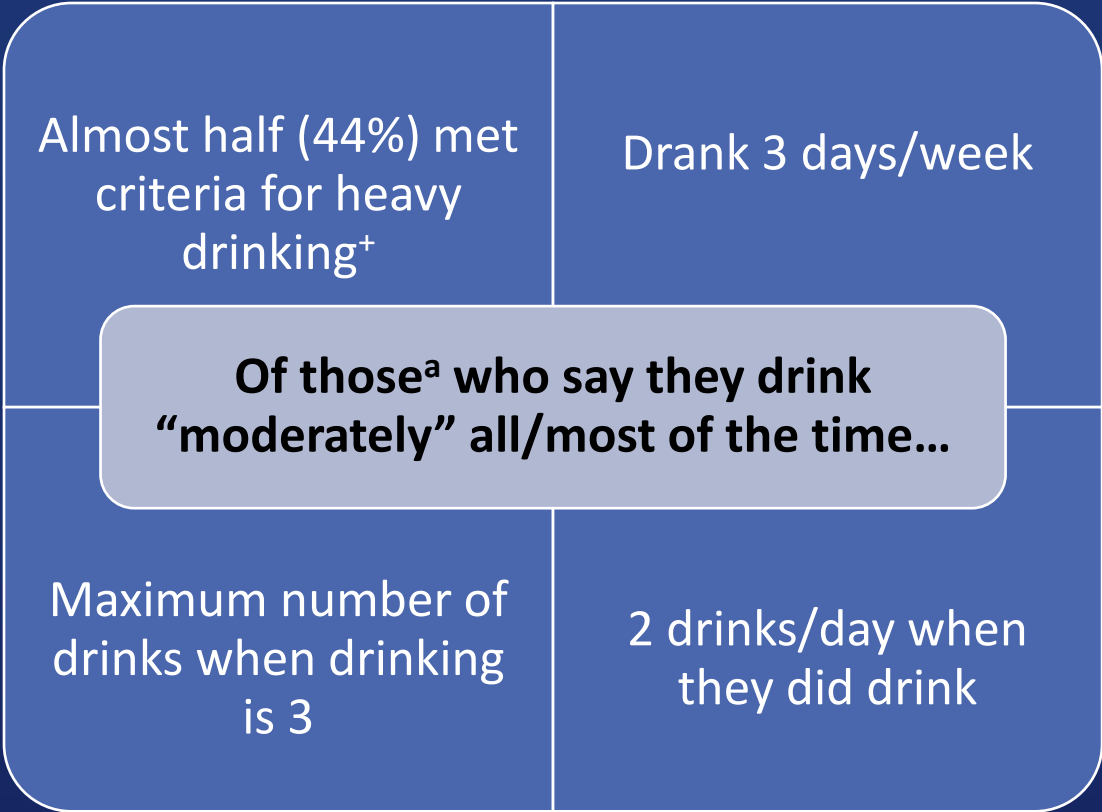


CANCER EPIDEMIOLOGY, BIOMARKERS & PREVENTION | RESEARCH ARTICLE

Where Should the Cancer Control Interventions Target: A Geospatial Hotspot Analysis for Major Cancer Mortality 2018 to 2022 in the United States

Chongliang Luo¹, Saira Khan¹, Liyan Jin¹, Aimee S. James^{1,2}, Graham A. Colditz^{1,2},
and Bettina F. Drake^{1,2}

Self identification does not map onto consumption levels



^a20% of the sample, n=166 participants (N=827)

^b75% of the sample, n=620 participants (N=827)

⁺Centers for Disease Control and Prevention, 2025.