

## The Facts about Binge Drinking

### *Dangerous Underage Drinking with Dangerous Consequences*

Nebraska has traditionally had higher levels of underage drinking, binge drinking, and alcohol impaired driving compared to the rest of the nation.<sup>1</sup>

**Binge drinking** is defined as the consumption of five or more alcoholic beverages in one sitting for a man, or four for a woman. Binge drinking is a dangerous drinking pattern that is associated with a number of health and social consequences.

### Why we care about binge drinking

- **Health** – Binge drinking is associated with the following health problems:
  - Unintentional injuries (e.g. car crashes, falls, burns, drowning)
  - Intentional injuries (e.g. firearm injuries, sexual assaults, domestic violence)
  - Alcohol poisoning
  - Sexually transmitted disease
  - Unintended pregnancy
  - Children born with Fetal Alcohol Spectrum Disorders
  - High blood pressure, stroke, and other cardiovascular diseases
  - Cancers of the breast, mouth, throat, esophagus, liver and colon
  - Liver disease
  - Neurological damage
  - Sexual dysfunction, and
  - Poor control of diabetes.<sup>2</sup>
- **Safety** – Binge drinkers are 14 times more likely to report alcohol-impaired driving than non-binge drinkers.<sup>3</sup>
- **Economics** – Excessive alcohol consumption costs the citizens of Nebraska over \$1.1 billion dollars in 2010, approximately \$491 million of which fall on government. Seventy-five percent of these costs are attributable to binge drinking.<sup>4</sup>

### The Nebraska experience

According to the results from a recent CDC survey on adult alcohol consumption, Nebraska ranks as the fifth-worst state in the country for its adult binge drinking rates and two Nebraska communities (Lincoln and Omaha) rank in the top 25 worst binge drinking cities out of 136 cities indexed across the nation.<sup>5,6</sup> Furthermore, Nebraska ranks as the sixth-worst state nationally in terms of its excessive alcohol consumption rate.<sup>7</sup> Alcohol misuse in the state places a significant strain on the healthcare system, the criminal justice system, and the substance abuse treatment system. This is particularly concerning for young adults who tend to be the most likely age group to use alcohol and suffer from the negative consequences associated with alcohol misuse.

<sup>1</sup> Nebraska DHHS (2014)

<sup>2</sup> CDC (2018)

<sup>3</sup> Naimi T.S., Brewer R.D., Mokdad A., Clark D., Serdula M.K., Marks J.S. (2003)

<sup>4</sup> Sacks, J. J., Gonzales, K. R., Bouchery, E. E., Tomedi, L. E., & Brewer, R. D. (2015)

<sup>5</sup> CDC (2017a)

<sup>6</sup> CDC (2017b)

<sup>7</sup> United Health Foundation (2017)

- Binge drinking rates increase dramatically as youth's age approaches the minimum legal drinking age. The tables below outline the impact that age and sex have had on youth binge drinking rates over the past two years.

**Binge Drinking\*, Rates (%) for Nebraska High School Students, 2016**

Age	Male	Female
9 <sup>th</sup> grade	2.8	6.1
10 <sup>th</sup> grade	9.9	5.0
11 <sup>th</sup> grade	9.7	10.0
12 <sup>th</sup> grade	19.8	19.4

*\* Percentage who reported having five or more drinks for men/four or more drinks for women within a couple of hours, on at least one of the 30 days preceding the survey*

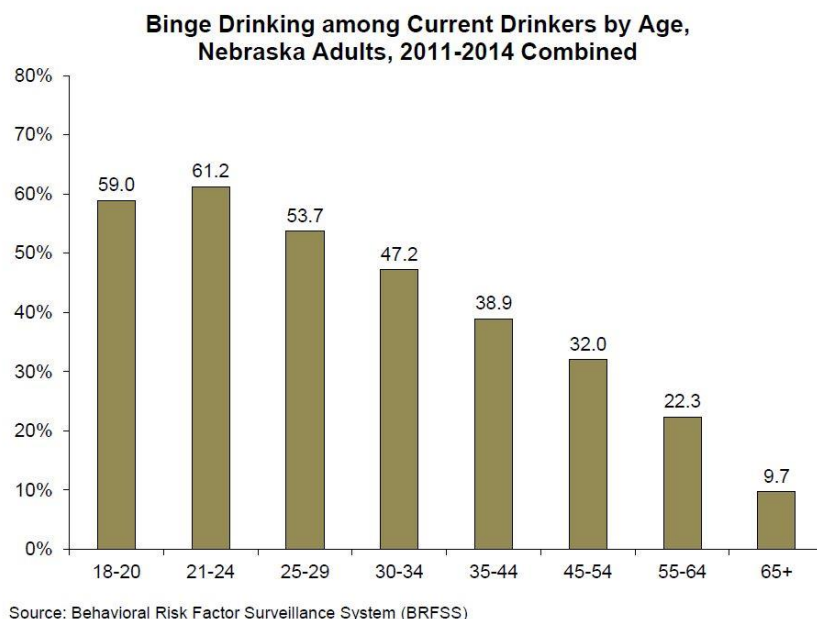
Source: Nebraska Youth Risk Behavior Survey (2016)

**Binge Drinking, Rates (%) for Nebraska Young Adults, 2016**

Age	Male	Female
19-20 years	25.2	24.4
21-22 years	52.5	43.6

Source: Nebraska Young Adult Alcohol Opinion Survey (2016)

- Young adults report having the highest rates of current binge drinking in Nebraska.<sup>8</sup> They also reported having consumed the greatest number of drinks on average during their last binge drinking episode in 2013. 18-24 year-olds reported an average of 8.1 drinks, and 25-34 year-olds reported an average of 8.3. The overall average was 7.2.<sup>9</sup>



- Underage drinking cost the citizens of Nebraska \$324.5 million in 2013. These costs include medical care, work loss, and pain and suffering associated with ramifications of alcohol use. This translates to a cost of \$1,779 for each youth in the state.<sup>10</sup>

<sup>8</sup> Nebraska Department of Health and Human Services (2015)

<sup>9</sup> Ibid.

<sup>10</sup> Pacific Institute for Research and Evaluation (2015)

## Evidence-based interventions for preventing binge drinking

- **State policy matters.** State policy environment has been found to account for a substantial proportion of state-level variation in binge drinking among US states.<sup>11</sup>
- **Limiting alcohol outlet density.** By limiting the number of retail outlets in an area that sell alcohol, a community can limit access as a means of reducing consumption.<sup>12,13</sup>
- **Consistent enforcement of laws against underage drinking and alcohol-impaired driving.** States with more stringent alcohol control policies tend to have lower levels of binge drinking among adults and college students.<sup>14,15,16,17</sup>
- **Increasing taxes on alcohol.** Although alcohol excise taxes are often raised for revenue-generating reasons, several studies suggest that higher excise taxes also have an impact on youth consumption and its consequences. Young adults are more responsive to price increases than adults, and higher taxes increase the consumer price of alcohol. Higher taxes on alcohol are associated with less drinking among 16- to 21-year-olds and high school students.<sup>18</sup>

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<sup>11</sup> Naimi, T.S., et al. (2014)

<sup>12</sup> Babor T.F., et al. (2003)

<sup>13</sup> Community Preventive Services Taskforce (n.d.)

<sup>14</sup> National Research Council and Institute of Medicine (2004)

<sup>15</sup> Community Preventive Services Taskforce (n.d.)

<sup>16</sup> U.S. Department of Health and Human Services (2007)

<sup>17</sup> Xuan, Z., et al. (2015)

<sup>18</sup> Community Preventive Services Taskforce (n.d.)