Message from the Secretary

& Foreword

This document is excerpted from:

The 2013 Report to Congress on the Prevention and Reduction of Underage Drinking
submitted to Congress by The U.S. Department of Health and Human Services.

To obtain more information and a copy of the full Report to Congress go to:
https://www.stopalcoholabuse.gov
Message from the Secretary

Alcohol use by those younger than the legal drinking age of 21 continues to be a serious public health and public safety problem. In 2011, nearly 10 million young people reported drinking within the past 30 days, and approximately 6 million of them were binge drinkers. Underage drinking contributes to the deaths of approximately 5,000 young people each year, limits the potential of many others, disrupts families and communities, and imposes yearly economic costs of nearly $27 billion on our society.

Fortunately, we have made some progress in recent years. In fact, past-month use of alcohol by persons ages 12 to 17 declined by 22.2 percent between 2004 and 2011, and binge-drinking rates for the same group declined by 33.3 percent. Reductions in underage drinking for those ages 18 to 20 were more modest, with past-month use by this group declining by 8.4 percent, and binge drinking declining by 15.2 percent.

These trends are important because they suggest that increased attention to the problem of underage drinking in the past decade has had a positive effect, and we should sustain these efforts. The trends are also important because they highlight that, although we are making significant progress in reducing underage drinking by those who are under 18, we are making less progress with those in the 18-to-20 age group and need to increase our focus on this segment of the underage drinking population. The fact that 10 million young people are still drinking and the majority of them are binge drinkers reminds us that we still have a long way to go in changing the conditions that support underage drinking in our country.

If we are to continue to see reductions in underage drinking and its negative consequences, we will need to continue to work together with state and local governments and families and communities across the country on this issue. The information provided in this report is one of our contributions to this partnership, and it is my hope that the report will serve as an important tool for all sectors of society, including families, communities, and state and local governments.

Kathleen Sebelius
Secretary
Department of Health and Human Services
Foreword

Alcohol remains the most widely used substance of abuse among our nation’s young people, with serious negative consequences for them, their families, and communities. In 2011, about 25 percent of those ages 12 to 20 reported drinking alcohol in the past month, and approximately 16 percent were binge drinkers. Moreover, alcohol use increased with age—ranging from 2.5 percent of persons ages 12 or 13 to 46.8 percent of those ages 18 to 20 reporting that they drank alcohol during the past 30 days.

Every year underage drinking undermines the well-being of America’s youth, resulting in motor vehicle crashes, suicide, interpersonal violence, unintentional injuries, unwanted or unintended sexual activity, academic problems, and alcohol and drug poisoning. Longer term consequences may include brain impairment and alcohol problems later in life.

As the Administrator of the Substance Abuse and Mental Health Services Administration (SAMHSA) and Chair of the Interagency Coordinating Committee on the Prevention of Underage Drinking (ICCPUD), I am pleased to present the fifth Report to Congress on the Prevention and Reduction of Underage Drinking. In 2006, Congress passed, and the President signed, the Sober Truth on Preventing (STOP) Underage Drinking Act, Public Law 109-422. Among other provisions, the STOP Act formally established the ICCPUD and called for an annual Report to Congress to be submitted by the Secretary of HHS.

As has been the case in previous years, the report provides information on the nature and extent of the problem, and an overview of the federal government’s response. It also includes data on 25 state underage drinking policies and laws, enforcement activities associated with those policies, prevention programs, and state expenditures for all 50 states and the District of Columbia. The report is the most comprehensive documentation of its kind, and we are confident that it will be of great value in planning future federal and state efforts.

Despite the unacceptably high level of underage drinking, this report indicates that we have made progress in recent years, especially with those ages 12 to 17. While this progress is attributable to a wide variety of factors, one that stands out is increased attention to this issue at all levels of government and society. Federal initiatives have helped raise underage drinking to a prominent place on the national public health agenda, creating a policy climate in which significant legislation has been passed by states and localities, and increased awareness of the problem has resulted in coordinated citizen action and more aggressive enforcement. SAMHSA and the ICCPUD are committed to continuing to work together with other levels of government and families and communities across the country to not only sustain but also increase the progress that we have made in addressing this serious public health and safety problem.

Pamela S. Hyde, J.D.
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