

Important **Facts** About Underage Drinking



Highlights from the December 2015 STOP Act Report to Congress

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U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES Substance Abuse and Mental Health Services Administration

Important Facts About Underage Drinking: Highlights from the December 2015 STOP Act Report to Congress

Since the mid-1980s, the nation has intensified underage drinking prevention efforts at the federal, state, and local levels. National epidemiologic data provide evidence that these efforts are having positive effects. Alcohol-related traffic deaths in youth aged 16-20 have declined 79 percent since 1982. Overall, between 2004 and 2013, the number of 12- to 20-year-olds consuming alcohol in the last month declined by 21 percent (2015 RTC, p. 41¹). Nevertheless, underage drinking and its associated harms continue to have profound negative consequences for underage drinkers, their families, their communities, and society.

The 2015 Report to Congress (RTC) on the Prevention and Reduction of Underage Drinking² provides annual data on prevalence and patterns of underage drinking. Key highlights include:

- Alcohol is used more widely than illicit drugs or tobacco by our nation's young people. In a 2013 survey of people ages 12 to 20, a higher percentage reported using alcohol than either tobacco or illicit drugs (including marijuana) in the past month (2015 RTC, p. 48).
- Alcohol use is responsible for more than 4,300 deaths annually in young people under age 21, primarily due to motor vehicle crashes, homicide and suicide (2015 RTC, p. 46). Alcohol consumption also contributes to interpersonal violence, unintentional injuries, brain impairment, sexual risk behaviors, and academic problems. Underage drinkers also risk developing an alcohol use disorder; early initiation of alcohol use is linked to alcohol dependence later in life (2015 RTC, pp. 75–76).
- Meaningful progress has been made in reducing underage drinking prevalence since 2004, particularly in the younger age groups (2015 RTC, p. 42). Lack of progress in reducing drinking among 18- to 20-year-olds remains a significant concern (2015 RTC, pp. 33-34). See Exhibit 1.
- Binge drinking—consuming a large amount of alcohol (five or more drinks) over a relatively short time—substantially increases the risk of death or injury and is a serious problem among youth. Although underage drinkers tend to drink less frequently than adults, when they do drink, they tend to binge drink (2015 RTC, pp. 50–53).
- More than 700,000 youths ages 12 to 14 began drinking alcohol in 2013 (2015 RTC, p. 49). The percentage of youths who drink increases dramatically with age. See Exhibit 2.

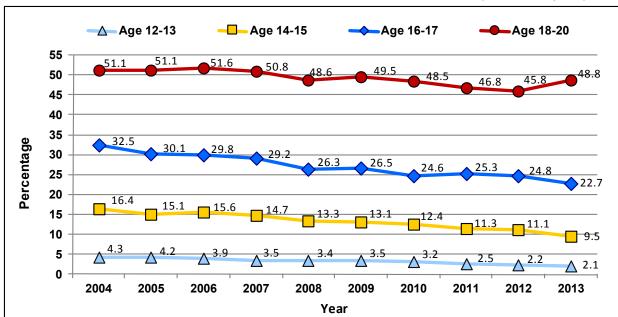
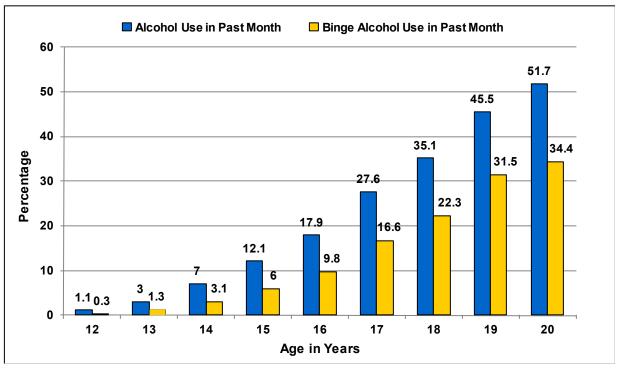


Exhibit 1: Past-Month Alcohol Use for 12- to 20-Year-Olds, 2004-2013 (2015 RTC, p. 42)



Strategies for Success

Federal initiatives and private and public efforts have all contributed to underage drinking reduction. Successful, mutually reinforcing strategies have included:

- Elevating 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;
- Highlighting the importance of proactive and systematic law enforcement;
- Raising public awareness and engaging communities in addressing underage drinking, including the development of drug-free communities.

Effective Solutions

A comprehensive underage drinking prevention initiative includes alcohol policies, enforcement practices, continued awareness and public education, and implementation of evidence-based early intervention programs. Evidence-based policies and practices can reduce youth access to alcohol and change the norms that support underage drinking in U.S. communities. The RTC summarizes 25 underage drinking prevention policies and describes the extent to which the 50 states and the District of Columbia have adopted them as laws or regulations.

Continued Effort Is Needed

Implementation of evidence-based practices and programs and sustained enforcement efforts are needed to maintain current gains among 12- to 17-year-olds and better address persistent levels of alcohol consumption among 18- to 20-year-olds, particularly those in college and the military. New and emerging trends, such as the marketing of powdered alcohol, should be identified and addressed early. Ongoing engagement of policymakers, citizen coalitions, health professionals, educators, law enforcement, agencies that serve youth, parents, and other stakeholders is essential to implementing and supporting effective prevention strategies.

Exhibit 2: Current and Binge Alcohol Use Among People Ages 12-20 by Age: 2013 (2015 RTC, p. 50)

¹ The December 2015 Report to Congress on the Prevention and Reduction of Underage Drinking (2015 RTC) is available at http://www.stopalcoholabuse. gov/resources/reporttocongress/rtc2015.aspx

² The STOP Act, Public Law 109-422, requires the Secretary of Health and Human Services, on behalf of the Interagency Coordinating Committee on the Prevention of Underage Drinking, to report to Congress on "the extent of progress in preventing and reducing underage drinking nationally."