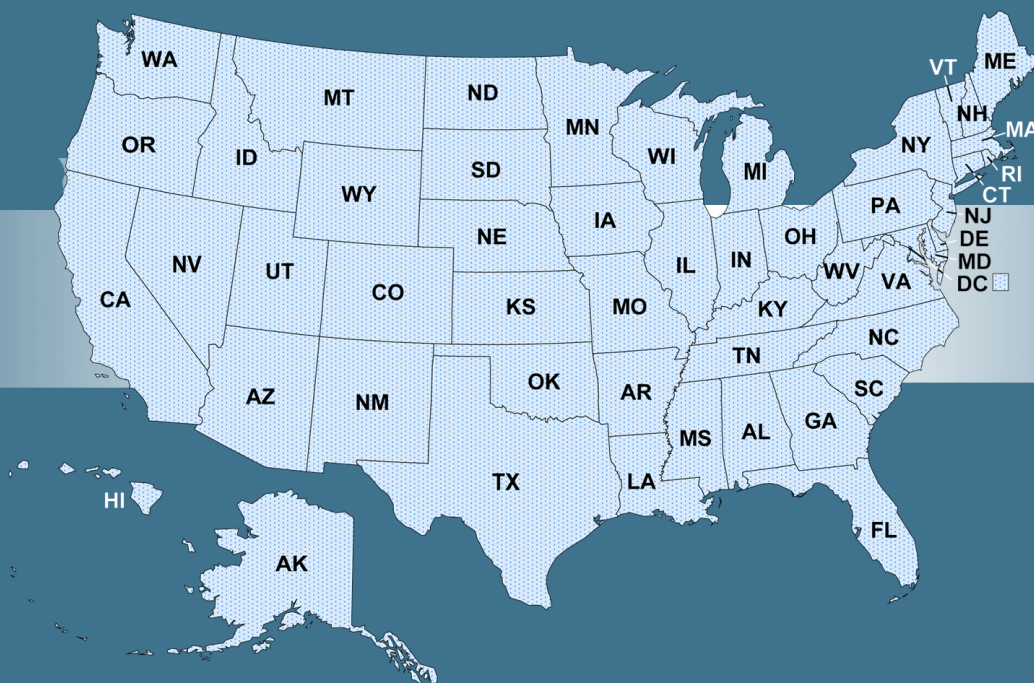


STATE PERFORMANCE & BEST PRACTICES

for the Prevention and Reduction of Underage Drinking

2018



POLICY SUMMARY:

Youth Blood Alcohol Concentration Limits



SAMHSA
Substance Abuse and Mental Health
Services Administration

The *State Performance and Best Practices* is required by the Sober Truth on Preventing (STOP) Underage Drinking Act (Pub. L. 109-422), which was enacted by Congress in 2006 and reauthorized in December 2016 as part of the 21st Century Cures Act (Pub. L. 114-255). The STOP Act directs the Secretary of the Department of Health and Human Services (HHS), working with the Interagency Coordinating Committee on the Prevention of Underage Drinking (ICCPUD), to develop a set of performance measures for evaluating the states' use of best practices in preventing underage drinking, and to consider a set of enumerated categories in doing so. The STOP Act also requires an annual report on each state's performance in enacting, enforcing, and creating laws, regulations, and programs to prevent or reduce underage drinking.

This *State Performance and Best Practices*, and the 51 individual State Reports, were prepared by the ICCPUD, which is chaired by the Assistant Secretary for Mental Health and Substance Use, U.S. Department of Health and Human Services.

Time period covered by the 2018 *State Performance and Best Practices*: The 2018 version primarily includes data from calendar year 2017. The data on state legal policies reflects the state of the law as of January 1, 2017. The state survey data was collected in 2017, and is drawn from the most recent 12-month period in which the states maintained the data.

Recommended Citation

U.S. Department of Health and Human Services (HHS), Substance Abuse and Mental Health Services Administration (SAMHSA), Interagency Coordinating Committee on the Prevention of Underage Drinking (ICCPUD). (2018). *State Performance and Best Practices for the Prevention and Reduction of Underage Drinking*.

Policies Targeting Underage Drinking and Driving

Youth Blood Alcohol Concentration Limits (underage operators of noncommercial motor vehicles)

Policy Description

Blood alcohol concentration (BAC) limit policies establish the maximum amount of alcohol a minor can have in his or her bloodstream when operating a motor vehicle. BAC is commonly expressed as a percentage. For instance, a BAC of 0.08 percent means that a person has 8 parts of alcohol per 10,000 parts blood in the body. State laws generally specify BAC levels in terms of grams of alcohol per 100 milliliters of blood (often abbreviated as grams per deciliter, or g/dL). BAC levels can be detected by breath, blood, or urine tests. The laws of each jurisdiction specify the preferred or required types of tests used for measurement.

There is strong scientific evidence that, as BAC increases, the cognitive and motor skills needed to operate a motor vehicle are increasingly impaired. BAC statutes establish criteria for determining when the operator of a vehicle is sufficiently impaired to constitute a threat to public safety and is, therefore, violating the law. Currently, all states and the District of Columbia mandate a BAC limit of 0.08 g/dL for drivers over age 21.

Underage drivers' ability to safely operate a motor vehicle may be impaired at a lower BAC than that of adults because of lower body mass, lack of physiological development, and lack of driving experience. Partly as a result of financial incentives established by the federal government, all jurisdictions in the United States have enacted low BAC limits for underage drivers. Laws establishing very low legal BAC limits of 0.02 g/dL or less for drivers under the legal drinking age of 21 are widely referred to as zero-tolerance laws.

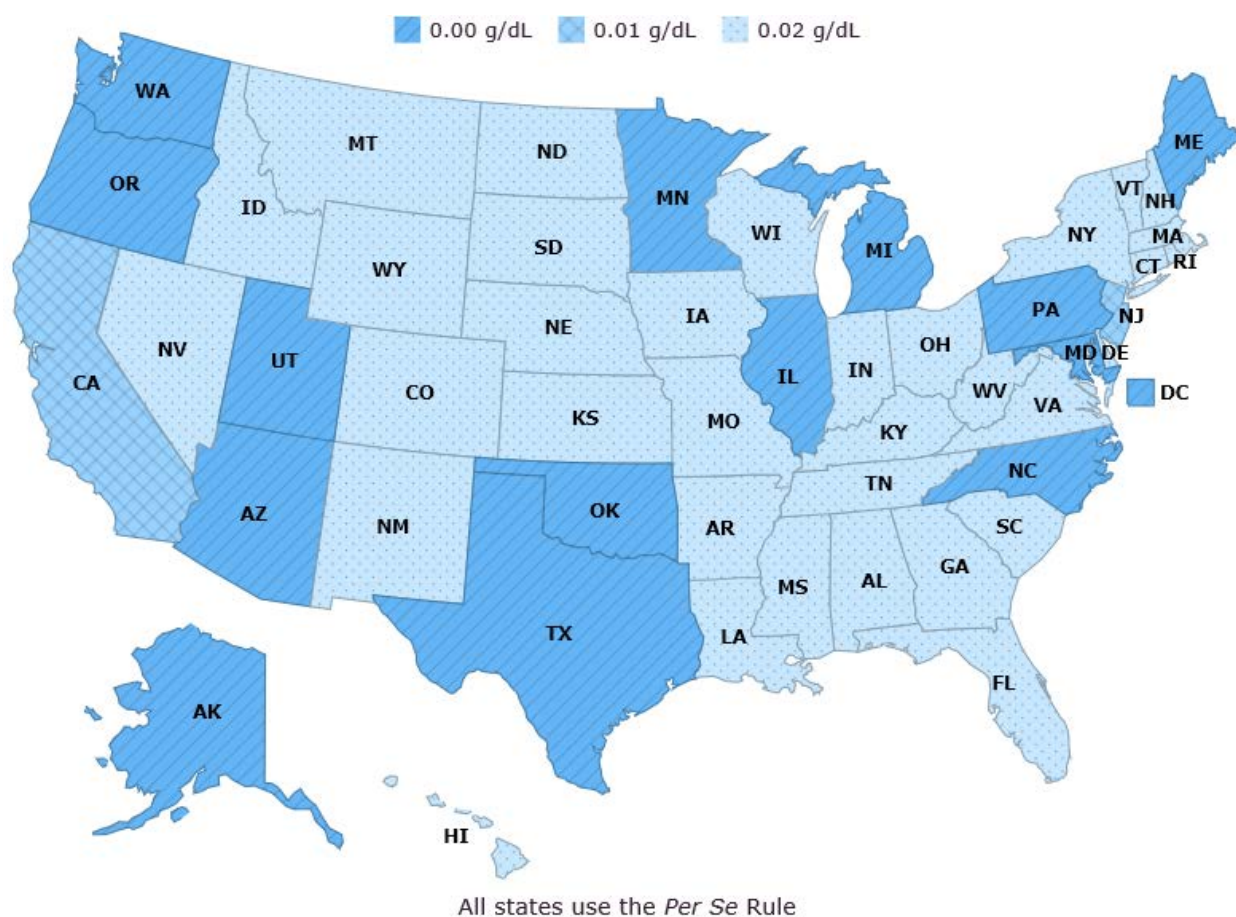
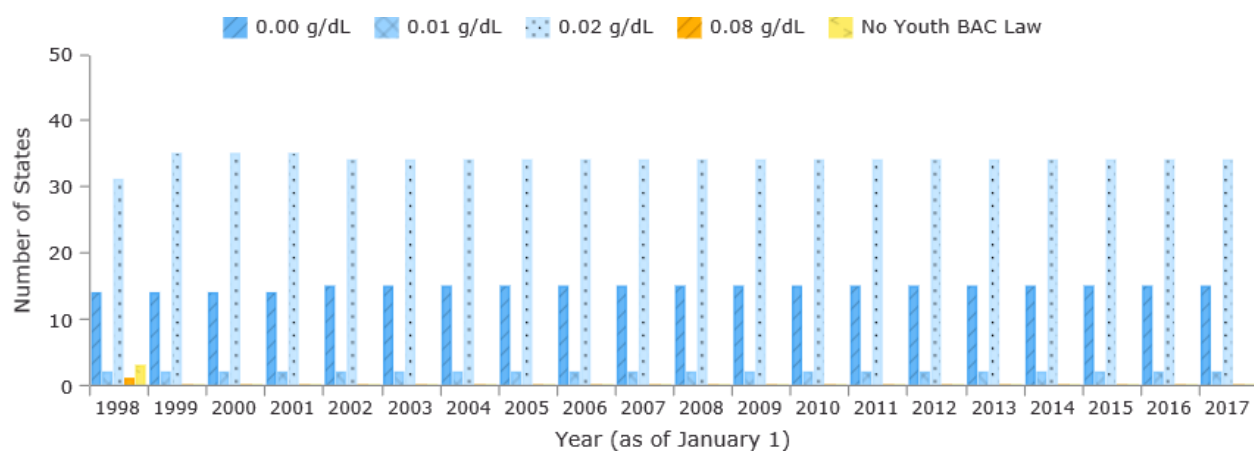
A per se BAC statute stipulates that if the operator has a BAC level at or above the per se limit, a violation has occurred without regard to other evidence of intoxication or sobriety (e.g., how well or poorly the individual is driving). In other words, exceeding the BAC limit established in a per se statute is itself a violation.

Status of Youth BAC Limit Policies

As of January 1, 2017, all states have per se youth BAC statutes. Thirty-four states set the driving BAC limit for underage persons at 0.02 g/dL (see Exhibit I.11). Fourteen states and the District of Columbia consider any underage alcohol consumption while driving to be a violation of the law and have set the limit to 0.00 g/dL. Two states (California and New Jersey) have set the underage BAC limit to 0.01 g/dL.

Trends in Youth BAC Limit Policies

Since 1998, all states have had zero tolerance (0.02 g/dL or lower) youth BAC limit laws (see Exhibit I.12). In the period between 1999 and 2017, the number of states mandating specific BAC limits for underage drivers remained constant with the exception of one state (Maryland), which lowered its underage BAC limit from 0.02 to 0.00 g/dL.

Exhibit I.11: BAC Limits for Youth Operators as of January 1, 2017**Exhibit I.12: Distribution of Youth (underage operators of noncommercial motor vehicles) BAC Limit Laws, January 1, 1998, through January 1, 2017**

Data Sources and Citations

All data for this policy were obtained from <http://www.alcoholpolicy.niaaa.nih.gov>, NIAAA's APIS. Follow links to the policy titled "Blood Alcohol Concentration Limits: Youth (Underage Operators of Noncommercial Motor Vehicles)" for further descriptions of this policy and its variables, details regarding state policies, and a review of the limitations associated with the reported data.

- Carpenter, C. (2004). How do zero tolerance drunk driving laws work? *Journal of Health Economics*, 23(1), 61–83.
- Chang, K., Wu, C. C., & Ying, Y. H. (2012). The effectiveness of alcohol control policies on alcohol-related traffic fatalities in the United States. *Accident Analysis and Prevention*, 45, 406–415.
- DeJong, W., & Blanchette, J. (2014). Case closed: Research evidence on the positive public health impact of the age 21 minimum legal drinking age in the United States. *Journal of Studies on Alcohol and Drugs*, 75(Suppl 17), 108–115.
- Fell, J. C., Fisher, D. A., Voas, R. B., Blackman, K., & Tippetts, A. S. (2009). The impact of underage drinking laws on alcohol-related fatal crashes of young drivers. *Alcoholism: Clinical and Experimental Research*, 33(7), 1208–1219.
- Fell, J. C., Scherer, M., & Voas, R. (2015). The utility of including the strengths of underage drinking laws in determining their effect on outcomes. *Alcoholism: Clinical and Experimental Research*, 39(8), 1528–1537.
- Fell, J. C., Thomas, S., Scherer, M., Fisher, D. A., & Romano, E. (2015). Scoring the strengths and weaknesses of underage drinking laws in the United States. *World Medical & Health Policy*, 7, 28–58.
- Fell, J. C., Scherer, M., Thomas, S., & Voas, R. (2016). Assessing the impact of twenty underage drinking laws. *Journal of Studies on Alcohol and Drugs*, 77(2), 249–260.
- Hadland, S. E., Xuan, Z., Blanchette, J., Sarda, V., Swahn, M. H., Heeren, T. C., & Naimi, T. S. (2016). Alcohol policies and motor vehicle injury fatalities among underage youth in the United States. *Journal of Adolescent Health*, 58(2Suppl), S13–S14.
- Hadland, S. E., Xuan, Z., Sarda, V., Blanchette, J., Swahn, M. H., Heeren, T. C., . . . Naimi, T. S. (2017). Alcohol policies and alcohol-related motor vehicle crash fatalities among young people in the U.S. *Pediatrics*, 139(3). Epub. doi:10.1542/peds.2016-3037
- Hingson, R., Heeren, T., & Winter, M. (1994). Lower legal blood alcohol limits for young drivers. *Public Health Reports*, 109(6), 738-744.
- Hingson, R., & White, A. (2014). New research findings since the 2007 Surgeon General's Call to Action to Prevent and Reduce Underage Drinking: A review. *Journal of Studies on Alcohol and Drugs*, 75(1), 158–169.
- Johnson, M. B. (2016). A successful high-visibility enforcement intervention targeting underage drinking drivers. *Addiction*, 111(7), 1196–1202. doi:10.1111/add.13346. Epub 2016 Apr 13

- Lovenheim, M. F., & Slemrod, J. (2010). The fatal toll of driving to drink: The effect of minimum legal drinking age evasion on traffic fatalities. *Journal of Health Economics*, 29(1), 62–77.
- Maldonado-Molina, M. M., Reingle, J. M., Delcher, C., & Branchini, J. (2011). The role of parental alcohol consumption on driving under the influence of alcohol: Results from a longitudinal, nationally representative sample. *Accident Analysis and Prevention*, 43(6), 2182–2187.
- McCartt, A. T., Hellinga, L. A., & Kirley, B. B. (2010). The effects of minimum legal drinking age 21 laws on alcohol-related driving in the United States. *Journal of Safety Research*, 41(2), 173–181.
- Peck, R. C., Gebers, M. A., Voas, R. B., & Romano, E. (2008). The relationship between blood alcohol concentration (BAC), age, and crash risk. *Journal of Safety Research*, 39(3), 311–319.
- Plunk, A. D., Cavazos-Rehg, P., Bierut, L. J., & Grucza, R. A. (2013). The persistent effects of minimum legal drinking age laws on drinking patterns later in life. *Alcoholism: Clinical and Experimental Research*, 37, 463–469. doi:10.1111/j.1530-0277.2012.01945.x
- Romano, E., Scherer, M., Fell, J., & Taylor, E. (2015). A comprehensive examination of U.S. laws enacted to reduce alcohol-related crashes among underage drivers. *Journal of Safety Research*, 55, 213–221. doi:10.1016/j.jsr.2015.08.001
- Roudsari, B., & Ramisetty-Mikler, S. (2008). Exceptions to the “National Minimum Drinking Age Act” and underage drunk driver death in the U.S.: A state-level comparison. *Annals of Epidemiology*, 18(9), 714.
- Shults, R. A., Elder, R. W., Sleet, D. A., Nichols, J. L., Alao, M. O., Carande-Kulis, V. G., . . . Task Force on Community Preventive Services. (2001). Reviews of evidence regarding interventions to reduce alcohol-impaired driving. *American Journal of Preventive Medicine*, 21(4), 66–88.
- U.S. Department of Health and Human Services, Office of the Surgeon General. (2016). *Facing Addiction in America: The Surgeon General’s Report on Alcohol, Drugs, and Health*. Washington, DC: U.S. Department of Health and Human Services.
- U.S. Department of Health and Human Services. (2007). *Surgeon General’s Call to Action to Prevent and Reduce Underage Drinking*. Rockville, MD: Office of the Surgeon General. Retrieved from <http://www.surgeongeneral.gov/topics/underagedrinking>.
- Voas, R. B., Tippetts, A. S., & Fell, J. (2003). Assessing the effectiveness of minimum legal drinking age and zero tolerance laws in the United States. *Accident Analysis and Prevention*, 35(4), 579–587.