

Foreword

As the first U.S. Department of Health and Human Services Assistant Secretary for Mental Health and Substance Use and Chair of the Interagency Coordinating Committee on the Prevention of Underage Drinking (ICCPUD), I am pleased to present the ICCPUD's 2018 Report to Congress on the Prevention and Reduction of Underage Drinking. This report is mandated by the Sober Truth on Preventing Underage Drinking Act, originally passed by Congress in 2006 and reauthorized in 2016 as part of the 21st Century Cures Act. This is the tenth annual Report examining the issue of underage drinking, and it includes recent data from federal surveys, prevention activities by federal agencies, and an evaluation of "Talk. They Hear You.", the national media campaign to prevent underage drinking.

Among Americans under age 21, alcohol is the most frequently used substance, used more often than tobacco, marijuana, or other illicit drugs. Nineteen percent of 12- to 20-year-olds report having used alcohol in the previous month (National Survey on Drug Use and Health [NSDUH]; Center for Behavioral Health Statistics and Quality [CBHSQ], 2017c).

Underage alcohol consumption is a persistent and serious public health challenge, resulting in thousands of deaths each year through motor vehicle crashes, violence, suicide, alcohol poisoning, and other causes. Underage drinking is also implicated in sexual assault and other crimes, impaired brain function, decreased academic performance, and the increased risk of developing an alcohol use disorder later in life. Binge drinking (four drinks in a row for a female or five for a male) exacerbates underage drinking's harmful consequences and increases with age: by age 20, one-third of young people report binge drinking at least once in the past month.

There has been improvement over the past several years: since 2004, past-month alcohol use by underage drinkers has declined by 33 percent (CBHSQ, 2017c). Past-month binge drinking decreased by 30 percent between 2004 and 2014, according to the most recent available data (CBHSQ, 2015). However, persistent patterns of underage alcohol use, particularly among older underage drinkers, have led the ICCPUD agencies to begin development of a new comprehensive plan that brings a renewed focus to addressing the problem while continuing to rely on evidence-based practices for preventing or reducing underage alcohol use.

Research indicates that these strategies are most effective when implemented as part of a multifaceted approach that includes parents and families, law enforcement, healthcare providers, community organizations, schools and universities, local and state governments, and the federal government. With community support, law enforcement can more effectively prevent youth from accessing alcohol. Parents, schools, and universities can provide clear, consistent education about the consequences of underage drinking. Healthcare providers can screen patients under age 21 for alcohol use and provide brief intervention and referral to treatment as appropriate.

The new comprehensive plan will draw upon information contained in this report to call upon all levels of government and our universities, schools, communities, and families to implement strategies that have proven to be effective. SAMHSA and the ICCPUD agencies are committed to working together to provide national leadership in these critical efforts.

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