

The Facts about Binge Drinking

Dangerous Underage Drinking with Dangerous Consequences

Nebraska has historically had higher levels of underage drinking, binge drinking, and alcohol-impaired driving compared to the rest of the nation.¹

Binge drinking is defined as the consumption of five or more alcoholic beverages in one sitting for a man, or four or more 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.²
- **Safety** – Binge drinkers are 14 times more likely to report alcohol-impaired driving than non-binge drinkers.³
- **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.⁴

The Nebraska Experience

According to the results from a recent CDC survey on adult alcohol consumption, Nebraska ranks as the seventh-worst state in the country for its adult binge drinking rates (19.3%).⁵ The city of Kearney ranks as the worst binge drinking city (24.3%) out of 126 cities indexed across the nation. Two more communities, Lincoln (21.4%) and Omaha (19.9%), rank among the 15 worst cities in the survey.⁶ Furthermore, Nebraska ranks as the eight-worst state nationally in terms of its excessive alcohol consumption rate (20.5%).⁷ Alcohol misuse in the state places a significant strain on the healthcare system, the criminal justice system, and the substance misuse treatment system.

¹ Nebraska DHHS (2015)

² CDC (2022)

³ Naimi et al. (2003)

⁴ Sacks et al. (2015)

⁵ CDC BRFSS (2022)

⁶ CDC (2021)

⁷ United Health Foundation (2023)

- Binge drinking rates increase dramatically as age increases and 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, 2021

Age	Male	Female
9 th grade	2.1	4.8
10 th grade	4.5	8.2
11 th grade	4.0	14.3
12 th grade	21.8	10.5

* 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

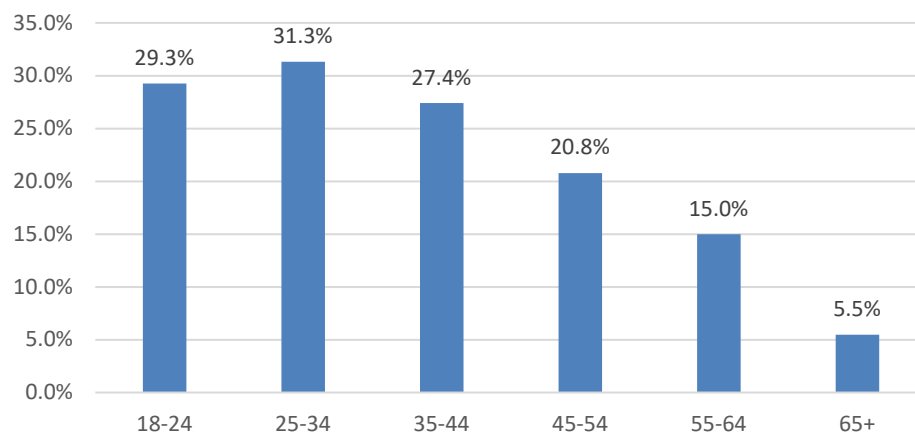
Source: Nebraska Youth Risk Behavior Survey (2021)

Binge Drinking, Rates (%) for Nebraska Young Adults, 2022

Age	Male	Female
19-20 years	16.8	13.7
21-22 years	37.7	35.6

Source: Nebraska Young Adult Alcohol Opinion Survey (2022)

Binge Drinking among Current Drinkers by Age, Nebraska Adults, 2017-2021 Combined



Source: Behavioral Risk Factors Surveillance System (BRFSS)

- Young adults report having the highest rates of current binge drinking in Nebraska.⁸ They also reported having consumed the greatest number of drinks on average during their last binge drinking episode. Eighteen to 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 7.2.⁹
- 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 the ramifications of alcohol use. This translates to a cost of \$1,779 for each youth in the state.¹⁰

⁸ Nebraska DHHS (2015)

⁹ Nebraska DHHS (2015)

¹⁰ PIRE (2015)

Evidence-Based Interventions for Preventing Binge Drinking

- **State-level policies matter.** A state's policy environment has been found to account for a substantial proportion of state-level variation in binge drinking among US states.¹¹
- **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.^{12,13}
- **Consistent enforcement of underage drinking laws and alcohol-impaired driving.** States with more stringent alcohol control policies tend to have lower levels of binge drinking among adults and college students.^{14,15,16,17}
- **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.¹⁸

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¹¹ Naimi et al. (2014)

¹² Babor et al. (2003)

¹³ Community Preventive Services Taskforce (n.d.)

¹⁴ National Research Council and Institute of Medicine (2004)

¹⁵ Community Preventive Services Taskforce (n.d.)

¹⁶ U.S. Department of Health and Human Services (2007)

¹⁷ Xuan et al. (2015)

¹⁸ Community Preventive Services Taskforce (n.d.)