

Alcohol Use in Minnesota

Background

Alcohol is used by more people than tobacco or any other drug.^{1,2} Alcohol use affects mortality and morbidity, as well as intended and unintended injury, unplanned pregnancy, poor birth outcomes, childhood development, adolescent health, mental health, violence, infectious diseases, and chronic diseases.

Alcohol use and health:

Alcohol use is a major risk factor for some diseases, including³:

- Cardiovascular disease (cardiomyopathy, arrhythmias, hypertension, hemorrhagic stroke)
- Liver disease (cirrhosis, hepatitis)
- Some cancers breast cancer, upper airway and digestive tract cancers

The younger a person begins drinking, the greater the chance that person will develop a clinically defined alcohol disorder like alcoholism or alcohol abuse. Young people who begin drinking before age 15 are six times more likely to meet the criteria for alcohol abuse than those who begin drinking at age 21.⁴

Additionally, youth who started drinking before age 15, compared to those who waited until they were 21, were 12 times more likely to be unintentionally injured while under the influence of alcohol, seven times more likely to be in a motor vehicle crash after drinking, and 10 times more likely to have been in a physical fight after drinking.⁵

Alcohol use statistics:

National⁶:

- Over half of the US adult population drank alcohol in the past 30 days.
- In 2009, 5.1 percent of the total population drank heavily (defined as 2 or more drinks per day for men and 1 or more drinks per day for women).
- In 2009, 15.5 percent of the population binge drank (defined as 5 or more drinks in one occasion for men and 4 or more drinks in one occasion for women).

Minnesota:

- In 2007, 1,150 deaths were attributable to alcohol, which translates to 28,979 years of potential life lost.⁷
- In 2009, 20.2 percent of Minnesota adults reported binge drinking and 5.0 percent reported heavy drinking.⁶

Young people reported higher rates of binge drinking:

- Nationally, 25.1 percent of 18-24-year-olds, reported binge drinking in the past two weeks.⁶
- Nationally, 23.8 percent of 25-34-year-olds reported binge drinking in the past two weeks.⁶
- Among Minnesota students in 2010, 19 percent of 9th graders and 40 percent of 12th graders reported drinking in the past 30 days, while 11 percent of 9th graders and 24 percent of 12th graders report binge drinking in the past two weeks.¹



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Economic impact⁷:

All Minnesotans are affected directly or indirectly by alcohol-related problems. Many people are affected directly as a result of their own use or that of a family member, friend, co-worker, neighbor, etc. However, everyone is affected indirectly by the costs (e.g., higher health care costs, taxes, and insurance rates, as well as lost productivity) of alcohol use.

- The economic costs associated with alcohol use in Minnesota in 2007 amounted to an estimated \$5.06 billion
- These costs are about 17 times greater than the \$296 million in tax revenues collected from alcohol sales in 2007
- This amounts to over \$975 for every person in the state

Addressing alcohol use in Minnesota:

The Alcohol and Other Drug Abuse Prevention program is focused on preventing alcohol abuse and alcohol-related problems. Staff work closely with state and federally-funded activities within the Minnesota Department of Health to coordinate chemical health promotion activities. Staff also maintain close working interagency relationships with the Minnesota Departments of Education, Public Safety and Human Services and institutions of higher education. The program provides technical assistance to public health, law enforcement, school and community groups by phone, e-mail and site visits. In addition, they facilitate the Alcohol Information Sharing Group, consisting of weekly e-mails and semi-annual meetings of local and state staff to share information, strategies, and activities related to reducing alcohol-related problems. Between semi-annual meetings, information is shared via an e-mail distribution list that has grown to more than 400 participants.

The program also supports a “Community-based Primary Prevention Plan to Reduce High-risk and Underage Alcohol Use.” Additionally they participate in the State Epidemiology Outcomes Workgroup to produce Substance Abuse in Minnesota: A State Epidemiological Profile (www.sumn.org), an assessment package of chemical health indicators, updated annually.

For more information:

Alcohol and Other Drugs:

<http://www.health.state.mn.us/alcohol/>

References:

¹ Minnesota Department of Education (MDE), *Minnesota Student Survey*, St. Paul, Minnesota, 2010.

² Minnesota Department of Human Services. *Estimating the Need for Treatment for Substance Abuse Among Adults in Minnesota: 2004/2005 Minnesota Treatment Needs Assessment Survey Final Report*, St. Paul, Minnesota 2006.

³ General information on alcohol and health by the Centers for Disease Control and Prevention (2 June 2006). Retrieved 12 Feb 2007 from http://www.cdc.gov/alcohol/quickstats/general_info.htm

⁴ Results from the 2009 National Survey on Drug Use and Health Detailed Tables, Substance Abuse and Mental Health Services Administration, 2010.

⁵ Hingson R. & Kenkel D. Social and Health Consequences of Underage Drinking. *Reducing Underage Drinking: A Collective Responsibility, Background Papers* (Washington, DC: The National Academies Press, 2004).

⁶ Centers for Disease Control and Prevention (CDC). *Behavioral Risk Factor Surveillance System Survey Data*. Atlanta, Georgia: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, 2009.

⁷ The Human and Economic Cost of Alcohol in Minnesota by the Minnesota Department of Health (April 2011).