Introduction

Excessive alcohol consumption (EAC) is the second leading cause of premature death and disability in Los Angeles County, responsible for approximately 2,800 deaths and 80,000 years of potential life lost annually. Additionally, the financial cost of EAC for LA County alone is estimated to be $9.5 billion: $900 million in healthcare costs; $7.1 billion in productivity losses (e.g., reduced productivity at work, work absenteeism, and lost productivity due to premature death); and $1.5 billion in other costs resulting from criminal justice expenses, motor vehicle crash costs, and other property damage. EAC includes binge drinking (women consuming ≥4 drinks and men ≥5 drinks on one occasion), heavy drinking (women consuming > 1 drink and men >2 drinks per day on average), any alcohol consumption by youth under 21 years of age, and any alcohol consumption by pregnant women. Binge drinking accounted for about three-quarters of the costs, half of the deaths, and two-thirds of the years of life lost due to excessive alcohol use. Concern about binge drinking led to its inclusion in Healthy People 2020 as a leading health indicator. Other problems associated with binge drinking include unintentional and intentional injuries, sexually transmitted diseases, unintended pregnancies, liver disease, high blood pressure, stroke, and cardiovascular disease.


Disparities in Binge Drinking

- Results from the Los Angeles County Health Survey found that in 2011, 15.4% of adults (18 years and older) reported binge drinking in the past month, representing approximately 1.1 million adults (Table 1).
- Men reported binge drinking at significantly higher rates (21.9%) than women (9.3%).
- Nearly one-fifth (17.7%) of underage adults (18-20 years) reported binge drinking; binge drinking peaked among 21-29 year olds (26.1%) and then declined with age (Figure 1).

\[ \begin{align*}
\text{Prevalence of Binge Drinking Among Adults} \\
\text{by Age, LACHS 2011} \\
\text{FIGURE 1} \\
\text{TABLE 1} \\
\text{FIGURE 2} \\
\text{FIGURE 3} \\
\text{FIGURE 4} \\
\text{FIGURE 5} \\
\text{TABLE 2} \\
\text{TABLE 3} \\
\text{TABLE 4} \\
\text{TABLE 5}
\end{align*} \]

- Latino, white, and Asian/Pacific Islander males reported binge drinking significantly more than their female counterparts (Figure 2).
- Latino males reported binge drinking with significantly higher frequency than white and African American males.
- The percentage of individuals reporting binge drinking was highest in the Metro Service Planning Area (SPA; 19.2%) and lowest in the San Gabriel SPA (11.7%).

Recommended Actions

Individuals:
- Understand the risks of excessive alcohol use, including binge drinking. If you choose to drink, do so in moderation.
- Do not drink alcohol if you are under the legal drinking age or if you are pregnant, and avoid alcohol for at least three months before becoming pregnant.
- Support policies limiting the marketing and sale of alcohol.
- Support enforcement of laws limiting sales of alcohol to minors.

Health Care Providers:
- Screen patients regarding their alcohol consumption and counsel or refer patients for alcohol treatment, if necessary.\(^6\)
- Inform women of child-bearing age of the harmful effects of alcohol on the developing fetus.

\[ \text{Prevalence of Binge Drinking Among Adults by Gender and Race/Ethnicity, LACHS 2011} \]

*The estimate is statistically unstable.

\[ \begin{align*}
\text{Recommended Actions} \\
\text{Individuals:} \\
\text{Health Care Providers:} \\
\text{6. Screening and Behavioral Counseling Interventions in Primary Care to Reduce Alcohol Misuse,} \\
\text{uspdrin.htm. Accessed: December 18, 2013.}
\end{align*} \]
Cities and Communities7:

- Support regulation (through licensing or zoning) of alcohol outlet density by applying state, county, city, or other type of governmental control to reduce or limit the number of places that can legally sell alcohol in a given area.

- Adopt and enforce social host ordinances that impose liability on adults who tolerate underage alcohol use on property under their control.

- Enhance enforcement of laws prohibiting the sale of alcohol to minors to limit underage alcohol purchases, and reduce youth exposure to alcohol advertisements (e.g., billboards).

- Hold alcohol retailers responsible for the harms caused by their underage or intoxicated patrons (dram shop liability).

Governments:

- Increase beverage-specific (i.e., beer-, wine-, and spirit-specific) alcohol taxes at the state and federal levels as these have been shown to reduce alcohol-related harms in addition to raising revenues.7

- Minimize privatization of retail alcohol sales when possible.7

- Build partnerships with communities, schools, faith-based organizations, health care, and public health agencies to reduce binge drinking.8

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The Los Angeles County Health Survey is a periodic, population-based telephone survey that collects information on sociodemographic characteristics, health status, health behaviors, and access to health services among adults and children in the County. The 2011 survey collected information on a random sample of 8,036 adults and 6,013 children. The survey was conducted for the Los Angeles County Department of Public Health by Abt SRBI Inc., and was supported by grants from First 5 LA, the Los Angeles County Department of Mental Health, and Department of Public Health programs including the Tobacco Control and Prevention Program, the Emergency Preparedness and Response Program, Substance Abuse Prevention and Control, and Environmental Health.