

## Health Indicator Profile: **Alcohol Use (Binge Drinking)**



In the U.S., approximately 60 million people or 21.5% of those 12 years of age and older reported binge drinking during the past month.<sup>1,2</sup> In the immediate months following the declaration of COVID-19 as a global pandemic, daily alcohol consumption in the U.S. population and binge drinking increased by 29% and 21%, respectively between February and April 2020.<sup>3</sup> Excessive alcohol use, such as binge drinking or drinking over the recommended limits, can increase the risk of various health problems like liver diseases and cancer.<sup>4</sup> Binge drinking can also lead to injuries from automobile accidents as well as injuries from interpersonal violence.<sup>1</sup>

### Findings from the 2022 Santa Barbara County CHNA

#### Measure

Binge drinking was defined as four or more drinks consumed on one occasion for women and five or more drinks consumed on one occasion for men within the past 30 days. U.S. Dietary Guidelines for Americans recommends alcohol be consumed in moderation, if at all, and provides further guidelines based on sex and age. Moderate consumption is defined by the 2020-2025 U.S. Dietary Guidelines as one alcohol drink and two alcohol drinks per day for females and males, respectively. Alcohol is not recommended for those under legal drinking age.<sup>2</sup>

<sup>1</sup> Miller, J. W., Naimi, T. S., Brewer, R. D., & Jones, S. E. (2007). Binge drinking and associated health risk behaviors among high school students. *Pediatrics*, 119(1), 76-85

<sup>2</sup> Centers for Disease Control and Prevention. Alcohol use and your health. Available at: [J Addict Med](https://www.cdc.gov/od/oc/substance-use/alcohol-use-and-your-health/). 2021 Jul-Aug; 15(4): 341-344. Published online 2020 Oct 23. doi: 10.1097/ADM.0000000000000767

<sup>3</sup> Barbosa, C., Cowell, A. J., & Dowd, W. N. (2021). Alcohol Consumption in Response to the COVID-19 Pandemic in the United States. *Journal of addiction medicine*, 15(4), 341-344.

<sup>4</sup> Boffetta, P., & Hashibe, M. (2006). Alcohol and cancer. *The lancet oncology*, 7(2), 149-156.

**Table 1. Percentage of Adults who are Binge Drinkers by Demographics**

	2016 Santa Barbara CHNA <sup>1</sup>	2019 Santa Barbara CHNA <sup>1</sup>	2022 Santa Barbara CHNA	2021 California BRFSS	2030 Healthy People Target
	% (95% CI)	% (95% CI)	% (95% CI)	(95% CI)	%
<b>Overall</b>	16.7 (14.0, 19.3)	16.7 (13.2, 20.2)	21.1 (17.4, 24.8) <sup>^</sup>	14.9 (13.7, 16.1) <sup>^</sup>	25.4
<b>Male</b>	22.4 (18.1, 26.7)	24.2 (18.3, 30.0)	25.5 (19.4, 31.7)	18.8 (17.0, 20.6) <sup>^</sup>	
<b>Female</b>	11.4 (8.2, 14.5)	9.2 (5.6, 12.9)	17.7 (13.1, 22.3) <sup>^</sup>	11.1 (9.6, 12.7) <sup>^</sup>	
<b>Hispanic</b>	16.7 (12.5, 20.9)	16.3 (10.9, 21.7)	25.9 (18.3, 33.6)	16.6 (14.5, 18.6) <sup>^</sup>	
<b>Non-Hispanic White</b>	15.7 (12.2, 19.2)	17.8 (12.7, 23.0)	19.7 (15.3, 24.1) <sup>^</sup>	16.2 (14.3, 18.0) <sup>^</sup>	
<b>Other</b>	24.4 (13.0, 35.9)	15.2 (2.8, 27.5)	15.9 (6.7, 25.1) <sup>^</sup>	10.4 (8.2, 12.7) <sup>^</sup>	
<b>Age 18-44</b>	24.0 (19.2, 28.7)	23.4 (17.3, 29.5)	30.4 (23.6, 37.3)	20.9 (19.0, 22.9) <sup>^</sup>	
<b>Age 45-64</b>	12.6 (9.3, 15.9)	13.4 (8.6, 18.1)	18.7 (12.7, 24.6) <sup>^</sup>	11.6 (9.6, 13.6) <sup>^</sup>	
<b>Age 65+</b>	3.9 (2.1, 5.7)	3.8 (0.8, 6.8)	8.4 (4.4, 12.4) <sup>^</sup>	5.8 (4.2, 7.4) <sup>^</sup>	
<b>&lt; High School</b>	11.1 (5.2, 16.9)	8.0 (2.0, 14.0)	21.3 (8.0, 34.7) <sup>†</sup>	12.4 (9.5, 15.3) <sup>^</sup>	
<b>High School Grad</b>	19.3 (12.2, 26.3)	19.5 (10.9, 28.1)	18.8 (8.0, 29.6)	17.1 (14.2, 20.1) <sup>^</sup>	
<b>Some College</b>	17.2 (12.6, 21.7)	19.9 (13.1, 26.6)	25.8 (18.4, 33.1)	15.6 (13.2, 17.9) <sup>^</sup>	
<b>College Grad</b>	18.1 (13.6, 22.5)	16.5 (10.6, 22.3)	18.4 (14, 22.8) <sup>^</sup>	14.2 (12.6, 15.8) <sup>^</sup>	
<b>&lt;\$35,000</b>	15.1 (10.7, 19.5)	16.8 (10.9, 22.7)	22.1 (12.9, 31.3)	12.6 (10.7, 14.5) <sup>^</sup>	
<b>\$35,000-\$74,999</b>	20.9 (14.8, 27.0)	13.2 (5.7, 20.7)	25.9 (17.4, 34.3)	15.9 (13.2, 18.5) <sup>^</sup>	
<b>\$75,000 or greater</b>	19.3 (14.3, 24.3)	17.5 (11.8, 23.2)	18.8 (14.4, 23.2) <sup>^</sup>	17.2 (15.1, 19.2) <sup>^</sup>	

<sup>^</sup> Significant difference between estimate and Healthy People 2030 target

<sup>†</sup> Unreliable estimate (Relative Standard Error>0.3)

<sup>1</sup> Point estimates were not evaluated for significance against Healthy People 2030 Target, as they were previously evaluated against Healthy People 2020 Target.

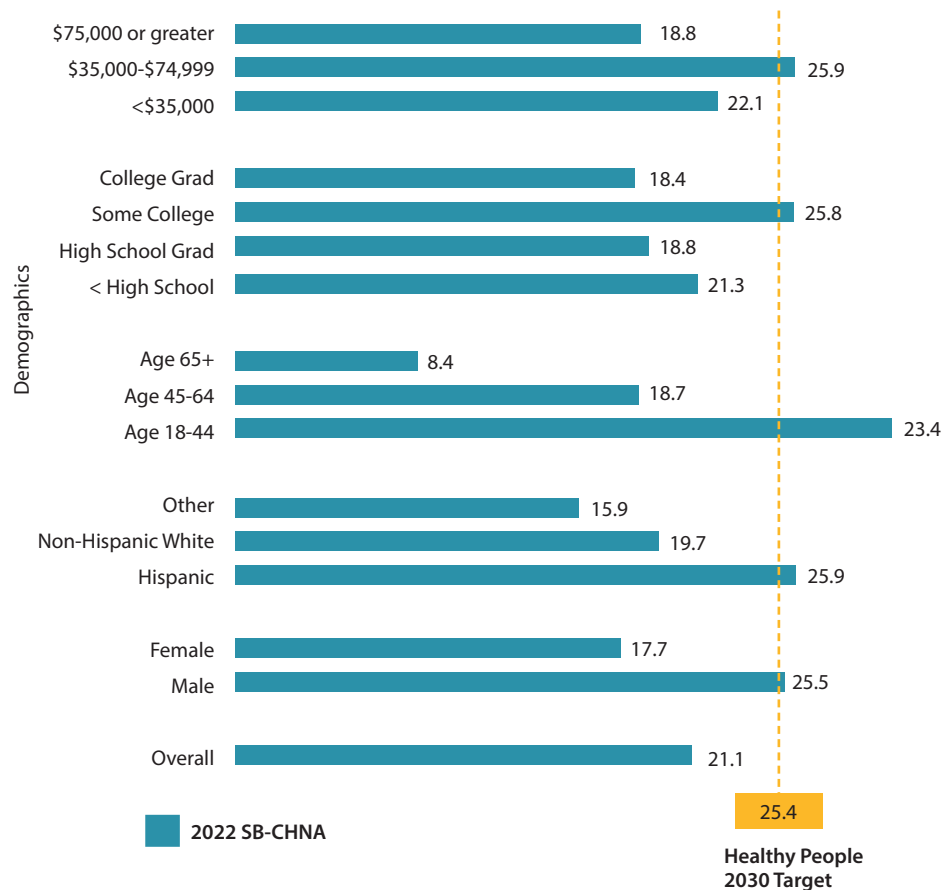
\* Healthy People 2030 target excludes adults aged 18-20, whereas CHNA estimates include these ages.

## Health Disparities

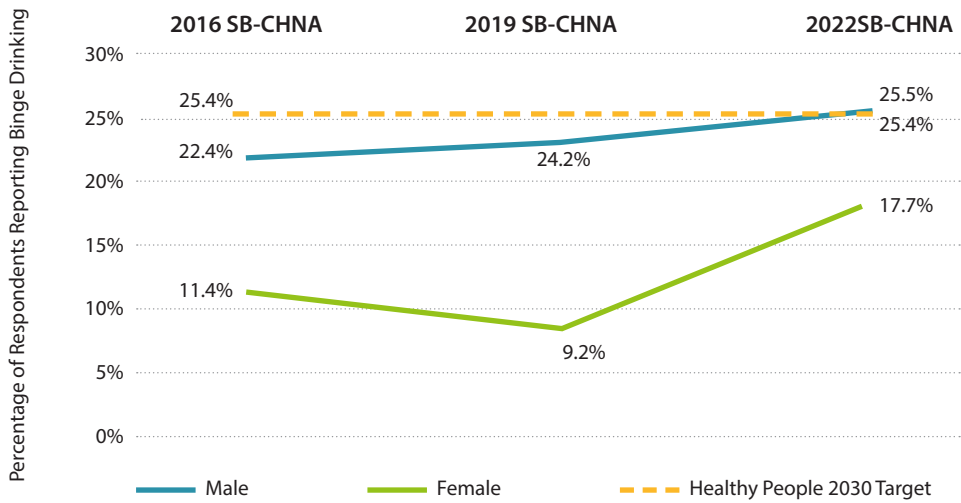
Overall and for most demographic subgroups, Santa Barbara County meets the Healthy People (HP) 2030 target of below 25.4% reporting binge drinking. Santa Barbara County had higher rates of binge drinking in 2022 compared to Californians in 2021, 21.1% vs. 14.9%. Between 2019 and 2022, Santa Barbara County saw an overall increase of 26% in reported binge drinking. The largest increases in binge drinking were observed for females, Hispanics, those aged 18-44 years old, those with less than high school education, and those with household incomes below \$75k. Males continue to report binge drinking more so than females, but females reporting binge drinking nearly doubled since 2019 moving from 9.2% to 17.7% (see Figure 1, below). No significant racial/ethnic disparities were observed across racial groups for 2022. The percentage of those 65+ years old who reported binge drinking remains lower than those less than 65 years old, yet reported binge drinking in this group more than doubled from 3.8% in 2019 to 8.4% in 2022.

Most impacted demographic subgroups include males, Hispanics, those aged 18-44 years old, those with some college education, and those with household incomes below \$75,000 (see figures below).

Figure 1. 2022 Percentage Reporting Binge Drinking by Demographic Group



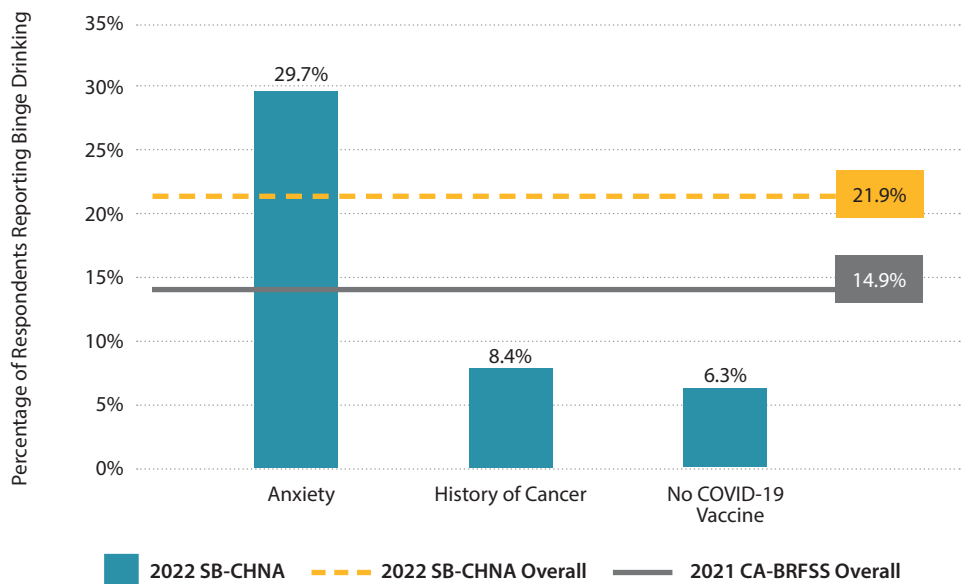
**Figure 2. Changes in Alcohol Use 2016-2022: Percent Reporting Binge Drinking by Sex at Birth**



**Factors and Health Outcomes Associated with Binge Drinking**

Figure 3 below depicts the three health indicators that were most significantly related to self-reported binge drinking. Those reporting as having a history of a cancer diagnosis or no receipt of at least one COVID-19 vaccination were much less likely to report binge drinking (8.4% and 6.3%, respectively) than the average for Santa Barbara County, 21.9%. Those reporting having anxiety or other mental health disorders reported significantly higher binge drinking than the County estimate (29.7% vs. 21.9%). The odds of reporting binge drinking are 1.9 times higher for those with anxiety or other mental health disorders than those without. For both those with a history of cancer and those reporting not receiving a COVID-19 vaccination, the odds of reporting binge drinking are 84% and 71% lower than those without a history of cancer and those who received a COVID-19 vaccine, respectively.

**Figure 3. Binge Drinkers by Significant Related Factors**



**Table 2. Odds Ratio Estimates for Binge Drinking by Significant Related Factors**

Significant Related Factor	Point Estimate	95% Confidence Limits	
Anxiety or other mental health disorder	1.9	1.0	3.4
History of Cancer	0.16	0.05	0.44
No COVID-19 Vaccine	0.29	0.09	0.86
Has Diabetes	0.0	0.0	0.4

NOTE: The degrees of freedom in computing the confidence limits is 1423.

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## Findings from the 2022 Santa Barbara County Listening Tour

Participants in the Listening Tour described key issues to consider when it comes to use of alcohol. **Excessive youth drinking has become normalized amongst youth** in Santa Barbara County, as highlighted by youth themselves. Participants explained that parents could serve as vital interventionists for youth drinking, but heavy workloads needed to survive in Santa Barbara County serve as a barrier. Participants also shared that **people self-medicate** with alcohol to treat serious mental illness, ameliorate stress from excessive work in a place with a high cost of living, and smooth over the rough experiences of social marginalization.

### Youth Alcohol Use Normalized

Drinking to the point of passing out has become normalized amongst youth in Santa Barbara County.

*I would say regular use of alcohol, marijuana, and nicotine. But, I mean, even the term 'blacking out,' like that's pretty common. And I would say that's probably an abuse of alcohol. So things like that are pretty normalized. And a lot of people being high at school or other places pretty frequently. I think we're desensitized to what substance abuse looks like. – Student*



## Overworked Parents and Limited Involvement

When speaking about how to address youth drinking, community members often brought up parents being too overworked to be able to supervise their children and pointed towards the need for further resources to help parents address youth drinking.

*A lot of my foster youth that we work with are typically at higher risk. A lot of families we support too, by no fault of the parents—very well meaning, caring parents, work three jobs, work in an apartment complex and share rooms with their whole family. They don't have the ability to supervise, like provide the supervision and support to their child. And so oftentimes, the student is not coming to school. And therefore is out in the community, and often engaging in alcohol and drug abuse during that time. And, again, by no fault of the parent, they don't have the ability to follow through on how to support their child. So that's a huge struggle for that population. – School Administrator*

*How do we talk about alcohol? Where do we get the information from, in a way that's not blaming or shaming? How are we modeling our use of substances in front of our kids? You know, really just a lack of conversation around that in general, or any kind of healthy conversation around that. So I think that's something that we work on with our families. – School Administrator*

## Schools Play a Limited Role

Participants working in schools describe schools as difficult sites for intervening on alcohol use due to multiple factors, including general unmet mental health needs of school personnel themselves, student readiness to receive help, and resource allocation. Amidst this, students often felt more disciplined and stigmatized for substance use rather than supported, and school leaders also mentioned the need for more specialized drug and alcohol counselors.

*Typically people that you would hope could be a resource for our youth are not...and are suffering themselves. And so they're not really in a place where they have the bandwidth and like, to regulate, and to be present, and to help support the needs of the students in the way that the students really need. – Service Provider*

*They're usually disciplined. And they say, go see the therapist...If the schools find out, they'll refer to counseling, and what we do is, we do a screening and kind of get information on how often they're using. I like to use a little bit of motivational interviewing like, "what [do you like about it?] When do they use it? What is it? What does it do for you?" and a lot of it ends up being just curiosity, because their friends have it, and they share it. But I think, obviously, it's looked at in a negative light. And so, school staff will start freaking out, like, "Ah you're using drugs!" – Service Provider*

*I think a lot of times, they're just not ready. Like we really want them to be ready. We're ready to support them and help them to make some positive changes. And yet they, due to so many factors and circumstances, are not in a place to access that in a meaningful way. And so we just try to keep working with all of the providers that are supporting them, to keep them as safe as possible during this really challenging time. So a lot of times, I know that our experience is, we're just really working on maintaining safety to the best of our ability. – School Leader*

*There are some other therapists who do have an alcohol and drug abuse background, but getting access to those people is challenging. – Service Provider*

## Conclusions

The Listening Tour findings reveal that excessive alcohol use has become normalized by youth in Santa Barbara County. When talking about excessive alcohol use by youth, providers often mention the key role that parents have in prevention; however, the high cost of living keeps parents working multiple jobs, sometimes with long hours, that don't allow parents to spend time with their children. Parents countywide describe a need for more youth extracurricular activities, spaces, and programming to overcome excessive youth drinking. Providers describe a need and desire for **culturally informed parent education resources** that cover both stigma and how to help youth who are struggling with excessive alcohol use. To address the limited time that parents have because of the multiple jobs many hold, more support is needed to address substance use and embed education and services in local community centers, churches and other easily accessed locations.