

1603

HJ

HB 74

-

HB 112

Debtor's dwelling (Mobile home) ..... \$12,000 ..... \$12,000 ..... \$19,000<sup>1</sup>  
 (\$10,000 if mobile home on rented apnce)

Tracing of proceeds ..... 1 year from time of removal or absence ..... 1 year from date of voluntary sale ..... 1 year from sale, destruction, compensation

Firearms ..... none ..... 1 rifle ..... none  
 ..... 1 pistol

Property Exempt Without Limitation

Burial Plots	exempt	exempt	exempt	exempt
Health Aids	no provision	no provision	no provision	exempt
Social Security Benefits	exempt	exempt	exempt	exempt
Unemployment Benefits	exempt*	exempt	exempt*	nonexempt**
Medical, Surgical, Hospital Benefits	exempt*	exempt	exempt	exempt** (only to the extent used to pay medical services)
Violent Crimes Benefits	no provision	no provision	no provision	exempt
Unmatured Life Insurance	exempt	exempt	exempt	exempt***
Workmen's Compensation	exempt	exempt	exempt*	nonexempt**
General Relief Assistance	exempt	N/A	N/A	nonexempt**
PERS benefits	exempt*	} exempt (all pensions)	} exempt (all pensions)	nonexempt**
TRS benefits	exempt*			

\* Totally exempt until paid to beneficiary  
 \*\* Treated as income to which a separate exemption amount is provided  
 \*\*\* If cash surrender value does not exceed \$5,000

Debra's dwelling (Mobile home) ..... \$17,000 ..... \$12,000 ..... \$19,000<sup>1</sup>  
 (\$10,000 if mobile home on rented apoco)

Tracing of proceeds ..... 1 year from time of removal or absence ..... 1 year from date of voluntary sale ..... 1 year from date, destruction, compensation

Firearms ..... none ..... 1 rifle ..... none  
 ..... 1 pistol

Property Exempt Without Limitation

Burial Plots	exempt	exempt	exempt	exempt
Health Aids	no provision	no provision	no provision	exempt
Social Security Benefits	exempt	exempt	exempt	exempt
Unemployment Benefits	exempt*	exempt	exempt*	nonexempt**
Medical, Surgical, Hospital Benefits	exempt	exempt	exempt	exempt** (only to the extent used to pay medical services)
Violent Crimes Benefits	no provision	no provision	no provision	exempt
Unmatured Life Insurance	exempt	exempt	exempt	exempt***
Workmen's Compensation	exempt	exempt	exempt*	nonexempt**
General Relief Assistance	exempt	N/A	N/A	nonexempt**
PERS benefits	exempt*	} exempt (all pensions)	} exempt (all pensions)	nonexempt**
TRS benefits	exempt*			nonexempt**

\* Totally exempt until paid to beneficiary

\*\* Treated as income to which a separate exemption amount is provided

\*\*\* If cash surrender value does not exceed \$5,000

THE LEGISLATURE OF THE STATE OF ALASKA  
TWELFTH LEGISLATURE

FISCAL NOTE

I. REQUEST

Bill/Resolution No. HB-74

Title An act relating to the rights of debtors and creditors.

Requested by Rules Committee

Date 2/11/81

II. FISCAL DETAIL

Agency Affected Department of Commerce and Economic Development

Program Category Affected Public Protection

BRU, Program, or Subprogram(s) Affected DIVISION OF Insurance

(Note: If more than one budget component is affected, separate line-item amounts and funding for each component in the analysis section.)

EXPENDITURES (Thousands of Dollars)

	FY 81	FY 82	FY 83	FY 84	FY 85	FY 86
100 PERSONAL SERVICES						
200 TRAVEL						
300 CONTRACTUAL						
400 COMMODITIES						
500 EQUIPMENT						
600 LAND & STRUCTURES						
700 GRANTS, CLAIMS, ETC.						
<b>TOTAL</b>	0	0	0	0	0	0

FUNDING (Thousands of Dollars)

	FY 81	FY 82	FY 83	FY 84	FY 85	FY 86
GENERAL FUND	0	0	0	0	0	0
FEDERAL FUNDS						
OTHER (Specify Fund Source)						

POSITIONS

	FY 81	FY 82	FY 83	FY 84	FY 85	FY 86
FULL TIME	0	0	0	0	0	0
PART TIME	0	0	0	0	0	0
TEMPORARY	0	0	0	0	0	0

III. ANALYSIS (See Fiscal Note Preparation Instructions, Section III)

IV. DATE 2/11/81

PREPARED BY Kenneth C. Moore, Director

AGENCY Division of Insurance

PHONE 465-2515

Original: Legislative Finance

cc: Budget and Management

Prime Sponsor (First Legislator Named)

THE LEGISLATURE OF THE STATE OF ALASKA  
TWELFTH LEGISLATURE

FISCAL NOTE

I. REQUEST

Bill/Resolution No. HB-74  
 Title An act relating to the rights of debtors and creditors.  
 Requested by Rules Committee Date 2/11/81

II. FISCAL DETAIL

Agency Affected Department of Commerce and Economic Development  
 Program Category Affected Public Protection  
 BRU, Program, or Subprogram(s) Affected DIVISION OF Insurance

(Note: If more than one budget component is affected, separate line-item amounts and funding for each component in the analysis section.)

EXPENDITURES (Thousands of Dollars)

	FY 81	FY 82	FY 83	FY 84	FY 85	FY 86
100 PERSONAL SERVICES						
200 TRAVEL						
300 CONTRACTUAL						
400 COMMODITIES						
500 EQUIPMENT						
600 LAND & STRUCTURES						
700 GRANTS, CLAIMS, ETC.						
<b>TOTAL</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

FUNDING (Thousands of Dollars)

GENERAL FUND	0	0	0	0	0	0
FEDERAL FUNDS						
OTHER (Specify Fund Source)						

POSITIONS

FULL TIME	0	0	0	0	0	0
PART TIME	0	0	0	0	0	0
TEMPORARY	0	0	0	0	0	0

III. ANALYSIS (See Fiscal Note Preparation Instructions, Section III)

IV. DATE 2/11/81 PREPARED BY Kenneth C. Moore, Director  
 AGENCY Division of Insurance  
 PHONE 465-2515  
 Original: Legislative Finance  
 cc: Budget and Management  
 Prime Sponsor (First Legislator Named)

THE LEGISLATURE OF THE STATE OF ALASKA  
TWELFTH LEGISLATURE

FISCAL NOTE

I. REQUEST

Bill/Resolution No. 10 74  
 Title An Act relating to the rights of debtors and creditors  
 Requested by House Judiciary Committee Date 2/23/82

II. FISCAL DETAIL

Agency Affected Alaska Court System  
 Program Category Affected Administration of Justice  
 BRU, Program, Or Subprogram(s) Affected Trial Courts  
 (Note: If more than one budget component is affected, separate line-item amounts and funding for each component in the analysis section.)

EXPENDITURES (Thousands of Dollars)

	FY 82	FY 83	FY 84	FY 85	FY 86	FY 87
100 PERSONAL SERVICES		166.6	175.0	190.0	205.0	220.0
200 TRAVEL		6.0				
300 CONTRACTUAL						
400 COMMODITIES						
500 EQUIPMENT		10.0				
600 LAND & STRUCTURES						
700 GRANTS, CLAIMS, ETC.						
<b>TOTAL</b>		<b>182.6</b>	<b>175.0</b>	<b>190.0</b>	<b>205.0</b>	<b>220.0</b>

FUNDING (Thousands of Dollars)

	FY 82	FY 83	FY 84	FY 85	FY 86	FY 87
GENERAL FUND		182.6	175.0	190.0	205.0	220.0
FEDERAL FUNDS						
OTHER (Specify Source)						

POSITIONS

	FY 82	FY 83	FY 84	FY 85	FY 86	FY 87
FULL TIME						
PART TIME						
TEMPORARY						

III. ANALYSIS (See Fiscal Note Preparation Instruction, Section III)

SEE ATTACHED

IV. DATE 2/23/82

PREPARED BY Richard P. Barrier *R.P.B.*

AGENCY Alaska Court System

PHONE 264-0545

Original: Legislative Finance  
cc: Budget and Management

Prime Sponsor (First Legislator Named)

33-001 (Rev. 12/81)

### III. ANALYSIS

Since the Uniform Exemptions Act upon which HB 74 is based has not been adopted in any other state, there is no comparative basis for estimating costs to the Court System.

From a review of the statute in light of current clerical and judicial workload it appears that five new positions would be required to implement HB 74: two Court Clerk IIIs (Range 12) in Anchorage, one in Juneau and one in Fairbanks, and a Standing Master (Range 20) in Anchorage.

The Court Clerk IIIs would develop and maintain an ongoing accounting system in conjunction with statutory provisions for continuing liens on wages; would process affidavits submitted by creditors and orders issued by the court; adjust dollar amounts in conjunction with changes in the Consumer Price Index; and other related duties. The Standing Master would be located in Anchorage, which has the largest volume of executions (approximately 360 per month), and would review debtor affidavits for increased exemption amounts, would conduct hearings relating to execution upon security interests in exempt goods, and would conduct other hearings as required by the statute and as requested by creditors and debtors pursuant to the statute.

The cost of these positions is shown below.

#### Positions:

Anchorage:	
2 Clerk IIIs at Range 12 (\$21,768)	\$43,536
1 Standing Master at Range 20 (\$37,836)	37,836
Fairbanks:	
1 Clerk III at Range 12 (\$24,756)	24,756
Juneau:	
1 Clerk III at Range 12 (\$21,768)	21,768
	<u>\$127,896</u>
Benefits:	<u>38,677</u>
Total Personnel	\$166,573
Travel (initial training)	6,000
Equipment	
5 desks, chairs, typewriters, file cabinets	<u>10,000</u>
Total FY '83 Cost	\$182,573

STATE OF ALASKA  
THE LEGISLATURE

POUCH Y - STATE CAPITOL  
JUNEAU ALASKA 99811  
907-465-3800

LEGISLATIVE AFFAIRS AGENCY

MEMORANDUM

March 31, 1981

SUBJECT: Conflict between HB 74 and current federal  
law (Work Order Number 12-1247)

TO: House Judiciary Committee

FROM: Randolph G. Berry  
Legislative Counsel

Attached is a memorandum prepared by Bernie M. Tuggle, a legal extern serving with the Division of Legal Services. I have reviewed the memorandum and agree with his conclusions.

RGB:ljb

Attachment

STATE OF ALASKA  
THE LEGISLATURE

POUCH Y - STATE CAP. IOL  
JUNEAU, ALASKA 99811  
907-465-3800

LEGISLATIVE AFFAIRS AGENCY

MEMORANDUM

March 31, 1981

SUBJECT: Conflict between HB 74 and current federal law (Work Order Number 12-1247)

TO: House Judiciary Committee

FROM: Bernie M. Tuggle  
Legislative Legal Extern

You have asked whether there is a conflict between HB 74 relating to the rights of debtors and creditors and federal law, especially federal bankruptcy law. I have reviewed current federal law and have found that no conflict exists. In particular, where HB 74 specifically refers to federal law, there is no conflict.

"Sec. 09.38.015. PROPERTY EXEMPT WITHOUT LIMITATION.  
(a) An individual is entitled to exemption of the following property:

\* \* \*

(6) compensation or benefits paid or payable and exempt under federal law."

11 U.S.C. 522 exempts from the debtor's estate benefits such as the debtor's right to receive social security, unemployment compensation, local public assistance benefits, etc. Therefore, HB 74 also would exempt social security benefits, etc. 11 U.S.C. 522(b)(1) meanwhile says that an individual debtor may exempt from property of his estate those benefits and compensation listed in Sec. 522, "unless the State law that is applicable to the debtor . . . specifically does not so authorize". Since Sec. 09.38.015(a)(6) specifically does authorize such an exemption, HB 74 and federal law are clearly consistent.

Sec. 09.38.020. Exemption of earnings and liquid assets. This section states that an individual who does not receive

earnings in excess of \$500 a month may exempt that amount.  
But,

"(c) A creditor may levy upon earning exempt under  
. . . this section if his claim is

\* \* \*

(2) enforceable under an order of a court of bank-  
ruptcy under Chapter XIII of the Bankruptcy Act . . ."

Since earnings of the individual are part of his estate  
under 11 U.S.C. 541 and 1306, this section does not conflict  
with federal law.

Sec. 09.38.030(d). If the individual debtor is a non-  
resident, the limitations on garnishment imposed under  
15 U.S.C. 1673 shall apply.

The Sec. 1673 restrictions are applicable to the "maximum  
part of the aggregate disposable income of individuals which  
would encompass resident and nonresident individuals. HB 74  
incorporates the federal restrictions by reference and applies  
them only to nonresidents. Therefore, there is no statutory  
conflict between HB 74 and federal law. However, potential  
constitutional problems arise whenever a statutory scheme  
discriminates between nonresidents and residents. I believe  
that due to the nature of bankruptcy legislation, the state  
could show interests strong enough to defeat any privileges  
and immunities clause and equal protection clause attacks.

Sec. 09.38.055. BANKRUPTCY PROCEEDINGS. In a pro-  
ceeding under the Bankruptcy Act . . . only the  
exemptions under AS 09.38.010, 09.38.015(a), 09.38.020,  
09.38.025 and 09.38.030 apply . . .

This first sentence of Sec. 09.38.055 does not conflict with  
federal law, since 11 U.S.C. 522 allows for exemptions under  
state law of certain types of property.

Sec. 09.38.055. The second sentence of this section makes  
it clear that the exemption of certain permits, licenses and  
certificates does not apply to a chapter VII proceeding. The  
Title VII definitions of "customer property" do not exempt  
licenses, permits and certificates. See U.S.C. 741 and 761.  
Again, there is no conflict between HB 74 and federal law.

BMT:ljb

LAW OFFICES OF  
ALASKA LEGAL SERVICES CORPORATION  
POST OFFICE BOX 131  
SITKA, ALASKA 99635  
TELEPHONE 747-2037

TO: Alaska Code Revision Commission  
FROM: Alaska Legal Services Corporation  
Elisabeth A. Werby *EAW*  
RE: Proposed Alaska Exemptions Act  
DATE: May 25, 1978

M E M O R A N D U M

---

I

INTRODUCTION

At the April meeting of the Commission, Alaska Legal Services Corporation (hereinafter ALSC) was asked to compare the exemptions and procedures of existing law with those set forth in the AEA and, additionally, to comment on the impact of the proposed Act on low income debtors. Don Clocksin's Comments on a Proposed Alaska Exemptions Act, dated January 12th, thoroughly addresses each of these requests. It seems unnecessary to reiterate that extensive analysis here.

Many of the specific comments and comparisons made by ALSC in January have been mooted by subsequent revisions of the AEA. For the most part, these revisions have been responsive to ALSC's concerns, beneficial to low income debtors, and have clarified inconsistent or confusing portions of the AEA. Substantial sections of the AEA, however, continue to balance the competing interests of the creditor and debtor strongly in favor of the creditor. An example of this balancing, the treatment of welfare benefits under the AEA, is discussed below. The issue was raised by ALSC in the April meeting, and this discussion summarizes the comments made at that time.

II

DISCUSSION

Current law provides unlimited exemptions for welfare benefits based on need. See, e.g. AS 47.25.395; AS 47.25.500; AS 47.25.710; AS 47.25.080. Under the AEA, these benefits are treated as earnings or liquid assets, exempt only to the extent they do not exceed the ceiling set forth in 09.38.060 or the increased exemption available under 09.38.100.\*

\*Citations refer to the Commission's Work Draft of 4/12/78 as revised and amended at the April meeting.

Where liquid assets are derived from State assistance programs such as AFDC or APA, a ceiling on the total liquid asset exemption will result in an unjustifiable hardship for Legal Services' clients, regardless of the dollar amount of the exemption. The procedures designed to insure that a recipient debtor in fact requires assistance are unnecessarily burdensome on the debtor and a drain of judicial resources. Provisions of existing law are therefore preferable to those of the AEA. Simplified procedures should be drafted to offer further protection to these low income debtors.

A. Substantive Treatment of Welfare Benefits

The AEA seems to reflect the notion that most recipients of welfare programs are accumulating benefits far beyond what is actually necessary for their support. The Reports submitted by Legislative Affairs on March 23, 1978 and March 31, 1978 belie this notion. These reports indicate that eligibility and assistance levels are carefully calculated to serve the needs of the recipients and, in the long term, the needs of the public.

It is true that a person with relatively high earnings may be eligible for some form of assistance. This would be most likely to occur in AFDC cases. For purposes of AFDC, portions of earned income (\$30.00 plus one third of the remainder) and the costs of earning the income (transportation, union dues, child care) are disregarded in eligibility and benefit calculations. See example of Ms. Higher Earnings in March 31 Report from Legislative Affairs. However, the purpose of the AFDC formula is to encourage recipients to develop skills allowing them to become independent of welfare. This goal is consistent with the purpose of the AEA: "to afford to a judgement debtor adequate protection of his...income while remaining independent of further public assistance".

In this example, execution or garnishment in any amount would operate as a disincentive to further employment and, consequently, increase dependence on public funds. It should be noted also that, if she continues working, amounts garnished from Ms. Higher Earnings wages would probably not be compensated by an adjustment in AFDC benefits. Therefore, the children of the recipient, to whom the program is directed, will not receive the assistance they have been deemed to require.

The Legislative Affairs Report of March 31st indicates that the example of Ms. Higher Earnings is rare, indeed: "Such a situation is not common; most welfare cases have little or no income."

In most situations, the liquid assets of a welfare recipient will not exceed the increased exemption or will do so only by marginal amounts. In all cases, the actual need of the recipient and his or her family has been carefully calculated in accordance with the legislative and administrative mandates. Overpayments resulting from error or misrepresentation will be collected from the recipient in accordance with established procedures.

In light of both the prior administrative determination of need and the fact that, ordinarily, benefits will not accumulate much beyond the increased exemption permitted under the AEA, the absolute exemptions available under existing law should be retained. To the extent that a creditor may reach welfare benefits, the AEA conflicts with the policy of the public assistance statutes and the agencies that effectuate these statutes.

B. Procedural Provisions Relating to Welfare Benefits Exemptions.

Pursuant to 09.38.100 of the AEA, a debtor who is already determined needy is required to submit proof to obtain an increased exemption based on need or disability. To avoid conflicts with administrative agencies and statutory policies, it would seem likely that an affidavit stating that liquid assets are traceable to welfare benefits will be deemed prima facie proof of actual need. The procedures of the AEA, then, appear a waste of judicial resources, an unnecessary rubber stamp.

Obviously, many ALSC clients receiving various welfare benefits are unfamiliar with formal documents and legal proceedings. For them, even a straightforward explanation of exemptions and procedures in lay terminology may be inadequate to insure timely assertion of legal rights. The benefits of the increased exemption may be inaccessible to those who need it the most.

III

SUGGESTIONS FOR REVISION OF THE AEA

ALSC's objections to the substantive and procedural treatment of welfare benefits can be met by (1) incorporating the existing absolute exemptions into the AEA and (2) making such exemptions automatic, shifting the burden of proof from the debtor to the creditor. Procedural provisions should be revised to insure that prior to a garnishment or execution, the creditor submits proof that the liquid assets in the hands of the debtor are not traceable to exempt welfare benefits; that no wages may be garnished from an ALSC recipient; and that the debtor be provided with notice and an opportunity to contest any determination prior to garnishment or execution.

It has been suggested that an absolute, automatic exemption of the kind proposed here will tighten the credit market for ALSC clients. There appears to be no evidence before the Commission to substantiate this claim. The discussion at the April meeting indicated that few creditors would bother to reach the limited assets of a welfare recipient. Therefore, the substantive and procedural changes suggested above may be inconsistent with the attitude of the Commission in theory only.

IV

CONCLUSION

The treatment of welfare benefits under the AEA is one example of the manner in which the Act reflects the interest of creditors rather than low income debtors. This example and the specific criticisms set forth in Don Clocksin's memorandum provide the basis for ALSC's inability to support the AEA in its present form.

LAW OFFICES OF  
ALASKA LEGAL SERVICES CORPORATION

524 WEST SIXTH AVENUE, SUITE 204  
ANCHORAGE, ALASKA 99501

TELEPHONE 272-9431

COMMENTS ON A PROPOSED ALASKA  
EXEMPTIONS ACT

ALASKA LEGAL SERVICES CORPORATION  
By: Donald E. Clocksin  
Chief Counsel  
January 12, 1978

I. INTRODUCTION AND SUMMARY

The proposed Alaska Exemptions Act (AEA), dated November, 1977, has been compared with the Uniform Exemptions Act (UEA)<sup>1</sup> and with existing Alaska state laws. The Act states the Legislature's intent, adds a new chapter of twenty-one sections to Title 9, amends A.S. 09.35.250, recalls a list of Alaska Statutes, and establishes an effective date. In general form the AEA attempts to place all personal exemptions from execution of judgments in one chapter of the statutes, and establish a new procedure for claiming those exemptions.

My review has concluded that the AEA is sufficiently different from the Uniform act to make the goal of national uniformity an unfulfilled one. In addition, it would be a serious setback for low-income debtors in Alaska, would provide essentially no streamlining of present procedures, does not dovetail with existing law, and therefore, should not be adopted in its present form.

earnings, this provision might well result in a greater amount taken from these debtors than allowed under the federal limitation at 15 U.S.C. § 1673(a). See 29 C.F.R. § 170.10(c) establishing the manner of calculating pay for a period longer than a week.

09. 38.035

~~09.38.060~~: Continuing Lien on Wages.

The AEA creates a continuing lien on wages, so that one execution will be sufficient to levy on earnings each time they are paid until the debt is paid off. The UEA, the federal garnishment law, and the existing Alaska law do not have such a provision and it should not now be adopted. In Anchorage Helicopter Service v. Anchorage Westward Hotel, 417 P.2d 903 (Alaska 1966), the supreme court held that Civil Rule 89<sup>4</sup> does not allow prospective garnishment.

The magistrate's order was invalid and ineffective so far as it purported to regulate wages to be earned in the future . . ."

Supra, 417 P.2d at 909.

Continuing liens should not be allowed because 1) they deprive the debtor of an opportunity to utilize exemptions made available under section .050 which accrue after the garnishment is originally imposed; 2) authorizing them will increase the number of garnishments, which is inconsistent with the federal finding that garnishments "divert money into excessive credit payments and thereby hinder the production and flow of goods in interstate commerce." 15 U.S.C. § 1671; and 3) it is unfair to the extent that it regulates wages earned in the future and encourages job terminations.

09. 38.040

~~09.38.070~~: Priorities Between Continuing Liens.

No comment, except that this section should be deleted.

09. 38.045

~~09.38.080~~: Effective Date of Continuing Lien.

Same comment.

---

<sup>4</sup> The existence of Civil Rules relating to attachment and garnishment and the need to amend those rules as well as the statutes will be discussed later.

09.38.050

~~09.38.090~~: Increased Exemption Amount.

Subsection (a) is an attempt to allow debtors receiving payments for injury or disability to increase the garnishment exemption of section .050(d) and (e) if they must rely on the money for support for a long time.

Subsection (b) allows the \$125 per week exemption (or the \$500 lump sum exemption)<sup>5</sup> to be increased to \$200 per week if the debtor 1) is married, 2) has a spouse who has no earnings or liquid assets, and 3) supports the household on these earnings alone.

Subsection (c) defines certain benefits as earnings for purposes of the garnishment section when they are received.

This section .090 should be deleted. Sub(a) is unnecessary if injury or disability payments are made totally exempt as they are now. Besides, the complex motion, affidavit, hearing and order procedure will only burden the court. One can expect every recipient of a workmen's compensation award or an insurance award to proceed under this section if they are garnished. All this subsection does is put the burden on the debtor to prove that he/she really needs the injury or disability award or to prove he/she can't support the household on \$125 per week. Both those things should be assumed. Finally, this subsection conflicts with the personal property seizure procedure in CR 88 and the garnishment hearing in CR 89.

Sub(b) should be deleted and replaced by a wage exemption sufficient to support a family that has no outside income, or by a means of obtaining a total exemption. Why \$200 when even that amount would be inadequate to support a large family?

Sub (c) is completely irrelevant to (a) and (b) and should go in section .050. Even if it were in the right place, the policy of including these items as earnings and thereby subjecting them to garnishment is wrong.

09.38.055

~~09.38.100~~: Bankruptcy proceedings.

This section deprives bankrupt debtors of the right to increased exemptions under section .090. Since bankruptcy exemptions are determined on state law, this chapter would seem to dictate those exemptions. However, depriving a person exercising a federal right of an exemption available to persons not exercising that right is of questionable legality. Note the discussion of the affect of state exemptions on bankruptcies in 13 Uniform Laws Annotated at 23 (1977 Supp.).

---

<sup>5</sup> How the lump sum exemption of \$500 in section .050(e) can be "increased" to \$200 per week when the two are mutually exclusive escapes me.

09.38.060

09.38.105: Tracing Exempt Property.

Subsection (a) allows a debtor to exempt the proceeds of forced sale or loss of a burial plot, homestead, health aid, or other goods partially exempt as household or employment items for 12 months. The proceeds of a voluntary sale of a homestead may be exempt for three months. The UEA, by comparison, allows tracing of ~~the~~ the proceeds from converted goods for 18 months and allows exemption of proceeds from a voluntary sale of a homestead.<sup>6</sup> Existing Alaska law exempts all the proceeds of the homestead, whether or not voluntarily sold, without a time limit. A.S. 09.35.090. I see no reason why the proceeds of a voluntary sale should not be exempt, though a reasonable time in which to reinvest in another home makes sense. The creditor is protected by the requirement that the debtor live in the house, so that he/she cannot keep several houses, selling them all periodically, and claim an exemption.

Sub (b) of the AEA section .105 establishes the standard for tracing proceeds by allowing "the individual" to decide which method to use. Is "the individual" the debtor, the creditor, or the third party subject to the levy?

The most important point about section .105 is what it leaves out. The comparable UEA section--section 9--contains a subsection stating that certain benefits which are exempt remain exempt even when they are deposited in a bank account. This is an important provision, since much of the litigation Alaska Legal Services does on behalf of debtors involves welfare benefits, etc. garnished from bank accounts. Money which is identifiable, i.e., traceable, should continue to be exempt. The current Alaska law, as well as the UEA, allows such tracing. Miller v. Monrean, 507 P.2d 771 (Alaska 1973) and Etheredge v. Bradley, 502 P.2d 146 (dictum) (Alaska 1972).

09.38.065

09.38.110: Claims Enforceable Against Exempt Property.

This section creates a preference for certain creditors which supercedes any exemptions. I will discuss each in turn. First, I must confess that I do not understand the distinction between those preferences in section .110(a)(1) and those in section .110(a)(2). The only difference is the words "of any kind" which appear in (1) but not (2). This obscure sentence structure appears in the UEA as well, but seems meaningless.

(a)(1)(A): Alimony, support and separate maintenance may be collected from any exempt property. I should note here a matter which confused me at first. This section allows the person receiving

---

<sup>6</sup> It should be noted that, by transposing the words "taken or sold" on p. 9, line 7, the AEA reversed the meaning of the UEA language "sold or taken." The UEA intends the language to allow exemption of proceeds of a voluntary sale (see Comment 1 to UEA Section 9) while the AEA intends the opposite.

the support to collect it from exempt property of the debtor. Section .090(c)(2) says these types of support are the earnings of the person receiving them and are thus subject to section .050(c). That section, in subsection (d)(2)(A), completely exempts "support of any person" from garnishment. Thus, we have the amount of the support exempt from any garnishment except garnishment by the recipient of the support. Or do we have conflicting provisions? At the same time one should note A.S. 09.35.085 which totally exempts child support to be paid by the debtor.

(a)(1)(B): One month's earnings for personal services of an employee may be collected despite the exemptions in section .050(d) and (e). A similar conflict to that discussed above is present. A wage earner who hires another wage earner can have wages garnished despite the exemption in section .050. It is possible that this conflicts with the federal garnishment law because it provides less protection for certain wage earners than the federal law, thereby resulting in federal preemption. See Comment 2 to UEA section 10 regarding this conflict.

(a)(2)(A): The exemptions don't apply to a levy against property to collect the purchase price of that property or to collect a loan made to buy that property. This preference goes far beyond the traditional purchase money security interest situation to allow any person who makes a loan to claim that the borrower-debtor intended to buy the property with the money. The definition of a purchase money security interest in the Alaska commercial code is much narrower than this. A.S. 45.05.702. If the loan did not result in a security interest under the law, no preference should be given.

(a)(2)(B): The preference in (B) extends far beyond the traditional mechanics lien. In fact, since the various liens summarized in (B) have not been repealed, a conflict exists. See A.S. 34.35.050 et seq. and A.S. 34.35.220. The inconsistent wording of these statutes will result in a great deal of confusion as to the extent of this preference. The problem is worsened by subsection (b) which reaffirms existing statutory leases.

(a)(2)(C): A preference is provided for the cost of a "public improvement" which benefits the property. Again, such a preference conflicts with an existing statute (A.S. 34.35.085) and raises the question whether only improvements by local improvement districts or other governmental entities should be preferred. Allowing a landlord to impose an involuntary improvement on a tenant, for example, and then garnishing all his/her wages to pay for it is a questionable policy. If only public bodies are intended, the "state or local taxes" provision should suffice.

09.38.070  
~~09.38.120~~: Limitation on Enforcement of Certain Security Interests in Exempt Goods.

This section allows a non-purchase money secured party to execute on goods or wages exempt under section .050 if 1) the debtor refuses to voluntarily surrender the goods or wages, 2) he obtains a court hearing, and 3) either the debtor can afford to pay the debt or can get along without the exempt item.

The section should be deleted completely. I do not believe that a secured creditor who does not hold a purchase money security interest should be allowed to execute on exempt property. A non-specific security interest does not justify eliminating the protections for debtors provided by the exemptions. A security interest created to assure payment of the purchase price is essential to a healthy commercial environment. However, the generalized security interests created pro forma in "all household goods" or other overbroad categories are not as vital as the ability of the debtor to continue to work and live a decent life.

~~09.38.075~~

~~09.38.130~~: Special Procedures Relating to Limited Value Exemptions.

~~09.38.080~~

~~09.38.140~~: Procedures Applicable to a Levy on Property of an Individual.

~~09.38.085~~

~~09.38.150~~: Contents of Notice

Section .130 allows a creditor to levy on the property listed in section .050(a), (b), and (c) by 1) filing an affidavit with the court (not the debtor) alleging the existence of non-exempt property, 2) requesting a court order notifying the debtor of his/her right to contest the claim in writing within 15 days, 3) getting the order served (an automatic restraining order is imposed on the debtor), 4) requiring the debtor to respond in writing or appear in court, and 5) requiring the debtor to prove that the property is exempt.

Since many of my objections to section .130 also relate to sections .140 and .150, I will also discuss them here.

Sections .140 and .150 provides the procedure for levying on any of the debtor's property, not just section .050 property. The differences with section .130 are 1) the affidavit to the court can be held at the same time or after the property is taken; 2) this time the debtor gets a copy of the affidavit; 3) an automatic restraining order does not go into effect; 4) a "declaratory judgment" procedure is provided to determine what exemptions, if any, are available; 5) the debtor only has 10 days to object; 6) the debtor does not have a right to personally appear, except in the "declaratory judgment" proceeding which may fall after the 10 days; and 7) the notice provided must contain certain information set out in section .150.

My comments on this scheme are as follows:

1. The procedures make it very difficult for a debtor to claim the exemptions that are rightfully his/hers. The presumptions favor the creditor. A way should be found to place the burden on the creditor to prove the goods and wages, especially those with partial exemptions under section .050, are not exempt.

2. The ex parte restraining order against the debtor, without a hearing, raises serious constitutional questions, especially to the extent it stops the debtor from moving property or spending money which is exempt under section .050. Etheredge v. Bradley, 502 P.2d 146 (Alaska 1972).

3. The procedures repeatedly conflict with Civil Rules regarding injunctions, attachments, garnishments, etc. See civil Rules 65(b), (c) and (d), 69(b), 88(c) and (j), and 89(m) and (n).

4. The notice provisions are a serious setback from existing Alaska law. A.S. 09.35.035(3) and (7), which are repealed by the AEA, require notices "in lay terminology," require the provision with the notice of blank forms for the debtor to complete and return, and require the supreme court to provide and distribute a pamphlet with information, in lay terminology, of available exemptions. All of this is eliminated and replaced with optional forms. The case of Aguchak v. Montgomery Ward, 520 P.2d 1352, 1357 (Alaska 1974), recognized the need for more complete and simple information. The AEA would wipe out the efforts made since A.S. 09.35.035 was promulgated and that case decided.

Other provisions should be in the notices (both of them, not just the notice under section .150) including 1) the right to free attorneys if unable to afford private counsel and how to contact them, 2) bilingual notices in areas where a substantial portion of the population use English as a second language, 3) a notice pursuant to Aguchak that they need not appear and venue can be changed to a place closer to where they live, Aguchak supra, 520 P.2d at 1356-57.

5. I can see no reason to separate sections .130 and .140. In both situations, the creditor should, at a minimum, give the debtor an opportunity to evaluate whether the levy affects exempt property and object, both in writing and in person. In the situation where the levy is on section .050 property, the debtor will receive two notices, one affidavit, two time periods to respond, and a restraining order, some with overlapping provisions. The analysis of those notices, etc. and the decision about what to do and in what period of time will often be overwhelming. And, since the burden is on the debtor, a delay can be disastrous.

6. The section .150 notice requires information about the underlying judgment "if any." If that language implies that a judgment need not be obtained prior to using these procedures. I respectfully refer the drafters to Sniadach v. Family Finance Corp., 395 U.S. 337 (1969); Fuentes v. Shevin, 407 U.S. 67 (1972);

Goldberg v. Kelly, 397 U.S. 254 (1970); and Etheredge v. Bradley,  
supra.

7. It is not clear how A.S. 09.35.035(1), (2), (4), (5) and (6) fit in to all this. These subsections are not repealed and seem to conflict with the scheme proposed in the AEA.

09.38.090

~~09.38.160~~: Assertion of Rights by Another.

This section allows a third party to claim an exemption in property or object to a levy if the debtor fails to do so. Third parties include a spouse, a dependent, or "any other person authorized by law" to make such claims or exemptions. The UEA, in comparison to the quoted language, allows "any other authorized person" to make the claims or exemptions. The language in the AEA seems to allow, for example, the holder of a mortgage to claim a homestead exemption for the debtor. Or the language may allow a person with power of attorney to select among the choices available under section .050(a)-(c). See Comment 2 to UEA Section 16. The alteration in the AEA from the UEA language may eliminate the possibility that the first example will occur, but the intent is not clear.

09.38.095

~~09.38.170~~: Judicial Review.

No comment, except that the same "any other person authorized by law" has been inserted here too. Also, to the extent the last sentence of sub(a) conflicts with Civil Rule 82, it is void.

09.38.100

~~09.38.100~~: Debtor's Property Owned With Another.

This section allows a creditor of one of two owners of a piece of non-exempt property to force the partition and sale of the property. To the extent that it allows a creditor to take anything more than rents and profits to pay the debts of one owner, the section conflicts with A.S. 34.15.140, as interpreted in Pilip v. United States, 186 F. Supp. 397 (D. Alas. 1960). The tenancy is indivisible, and the creditor can only divide the rents or profits and, perhaps, take the property as the survivor when the other owner dies. A.S. 34.15.140 is not repealed by this AEA, and probably should not be. AS the comments to the UEA indicate:

The constitutionality of applying this section to tenancies by the entirety created prior to the enactment of the Act is not settled.

13 Uniform Laws Annotated, at 45, Comment 2, UEA Section 18.

HB

81

(SEE HB 434)

H B

1 1 2

"The Scandinavian Myth: The Effectiveness of Drinking and Driving Legislation in Sweden and Norway," *Journal of Legal Studies* 4 (1975):285-310; and J.R. Gusfield, "Categories of Ownership and Responsibility in Social Issues: Alcohol Abuse and Automobile Use," *Journal of Drug Issues* 5 (1975):285-295.

41. R.J. Bonnie, *Marijuana Use and Criminal Sanctions: Essays in the Theory and Practice of Decriminalization* (Charlottesville, Virg.: Michie/Bobbs Merrill, 1980), pp. 14-16. Reprinted with permission.

This report is basically inconclusive as it pertains to the effects of RAISING the drinking age, although some preliminary stats suggests a significant reduction in single vehicle, nighttime, male (18 yrs) crashes.

Studies are underway in a few eastern states to make some firmer conclusions. Most of the published reports deal with the effects of LOWERING the drinking age. Consensus is that it has had a negative impact on teen-age alcohol-related crashes.

# 4

## Historical Trends In Alcohol Use and Driving by Young Americans

Robert B. Voas and John Moulden

Early in this century, improvements in hygiene and nutrition significantly reduced mortality due to infectious diseases, which had been the principal threat to the lives of children and young adults in industrialized nations. Since that time, the principal threat to life for young Americans, particularly for males, has become traumatic injury. Consider the group of particular interest regarding the issues discussed in this book: males aged 15 to 19. Statistics reveal that this is the age group with the highest proportion (39 percent) of deaths resulting from motor-vehicle accidents. The total accidental death picture for this group shows that another 22 percent die in job-related or recreational accidents, 10 percent die from homicide, and 8 percent from suicide. This means that 79 percent of deaths among 15- to 19-year-old males are the result of trauma! All these types of death are frequently associated with the use of alcohol. Those related to homicide and motor-vehicle accidents are particularly significant, since alcohol involvement has been estimated to be present in up to 50 percent of the deaths in these categories.<sup>1</sup>

Since World War II, exposure to the potential for death and injury resulting from a combination of drinking and driving has increased, as shown in figure 4-1. Total per capita alcohol consumption was relatively constant during the 1950s, rose significantly in the 1960s, and leveled off again in the 1970s.<sup>2</sup> At the same time, per capita motor-vehicle mileage has increased rather steadily, with no reduction in its upward trend during the past decade.<sup>3</sup> The mortality rates related to these two factors are shown in figure 4-2. Deaths from cirrhosis of the liver—a common measure of alcoholism in a population—generally increased throughout the 1960s but leveled off in the 1970s and even dropped in 1975.<sup>4</sup> The trend for motor-vehicle fatalities is remarkably similar. The number of such deaths increased until 1967-1968 when they seemed to reach a plateau. In 1974, when the fuel crisis occurred and the national maximum speed limit was set at 55 mph, traffic fatalities dropped, although such deaths appear to be increasing slightly again.<sup>5</sup> The similarity of the trends of these two mortality rates is interesting. Whereas both rates rose rapidly in the 1960s, they have remained constant or dropped slightly in more recent years.

The opinions and conclusions are those of the authors and not necessarily those of the National Highway Traffic Safety Administration.

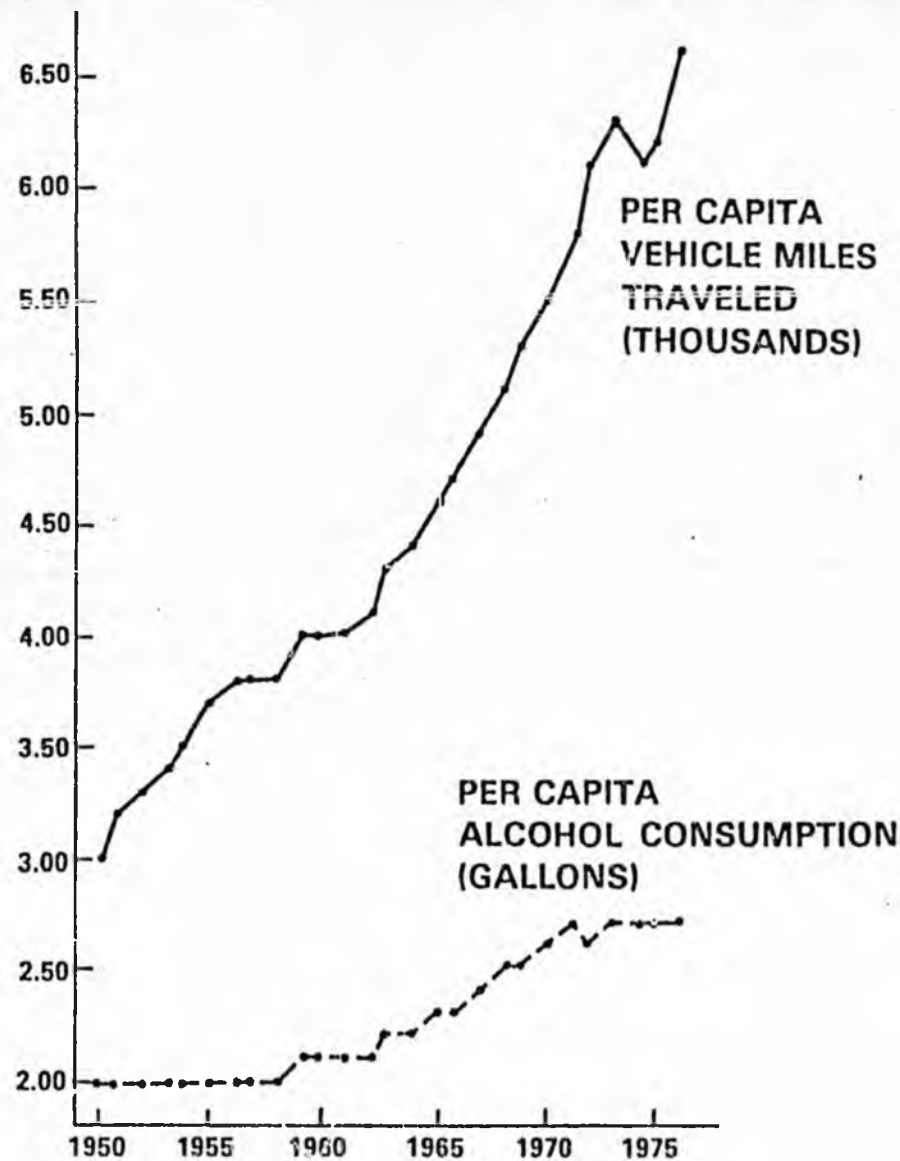


Figure 4-1. Miles Traveled and Alcohol Consumption, 1950-1975

Motor-vehicle accidents related specifically to alcohol use are a highly patterned variable, correlating strongly with the age and sex of drivers and to a lesser extent with drivers' marital status, the severity of the crash, and the time and day of the week on which the crash occurs.<sup>6</sup> This patterning reflects the impact of the life-style of American males, especially of young unmarried males. As can be seen in figure 4-3, the traffic-accident fatality rate among teenage males is four times that of female teenagers, and the fatality rates

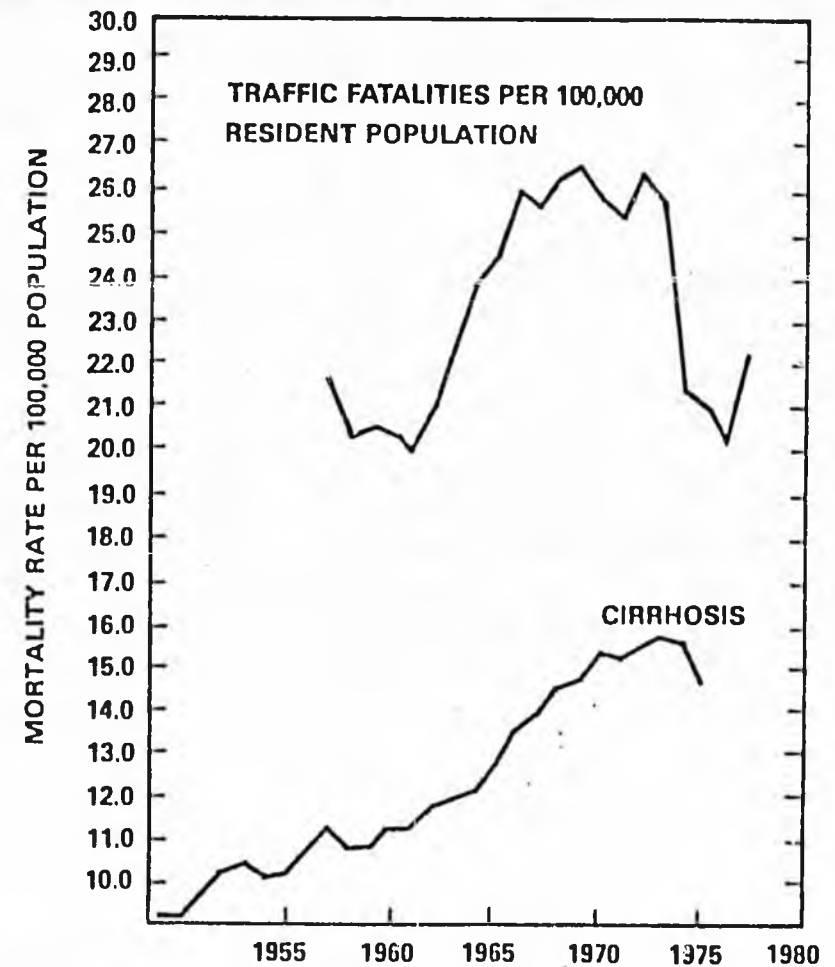


Figure 4-2. Mortality Rate: Traffic Fatalities and Cirrhosis, 1955-1980

for teenagers of both sexes is about three times that of same-sex drivers over 45 years old.<sup>7</sup>

Not surprisingly, motor-vehicle-accident involvement is also related to the amount of alcohol the driver has consumed. This has been shown repeatedly by studies that have contrasted the blood alcohol content (BAC) of drivers involved in accidents with the BAC of drivers who were not so involved but who were using the same road at the same time.<sup>8</sup> These studies show that the risk of being in an accident for which the driver is judged responsible increases as a function of the driver's blood alcohol content. Although there is some increase in risk of crash involvement at BACs below 0.10 percent, particularly among inexperienced drivers, most of those drivers involved in fatal crashes who have been drinking have been shown to be at or well above this level.

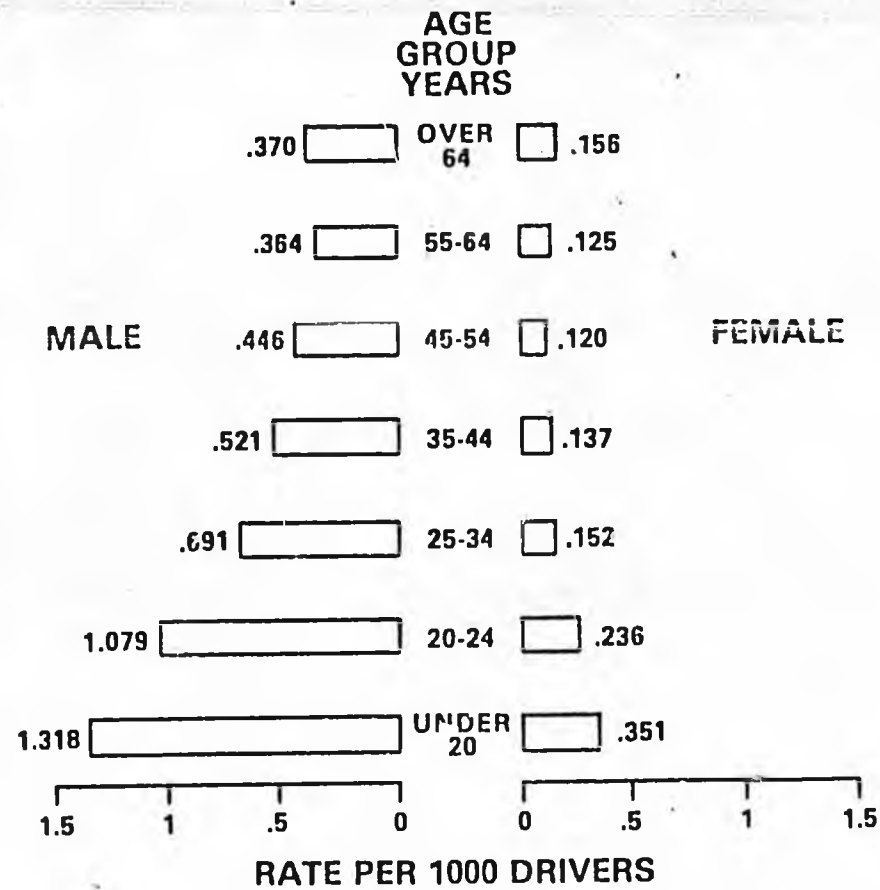
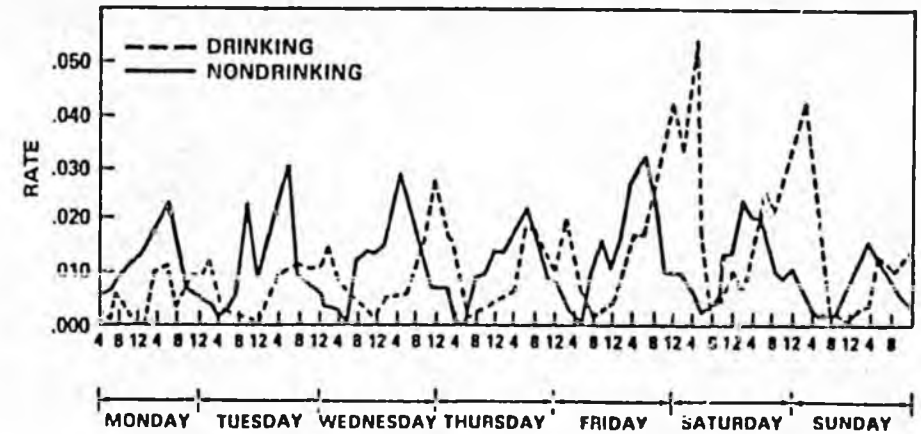


Figure 4-3. Fatal Traffic Accident Involvement Rate per 1000 Licensed Drivers by Sex and Age Group, 1977

Since heavy drinking in the United States seems to occur primarily at night and particularly on weekend nights, it is not surprising that most alcohol-related automobile crashes also occur at night. This is illustrated by the data presented in figure 4-4. The dashed curve represents the frequency of accidents about which the investigating police officer reported that the driver "had been drinking"; the solid line represents the accidents about which there was no such report. (Of course, police estimates of this factor can be unreliable, as is discussed later in this chapter.) As can be seen, the alcohol-related accidents peak around midnight and are especially high on Friday and Saturday nights. In contrast, the non-alcohol-related accidents peak in the late-afternoon and early-evening rush hours.



Source: J.D. Epstein, "A Preliminary Report on Alcohol-Involved Crashes in Washtenaw County, Michigan," HIT Lab Reports 1-7 (Ann Arbor, Mich.:University of Michigan, Highway Safety Research Institute, August 1971), p. 29.

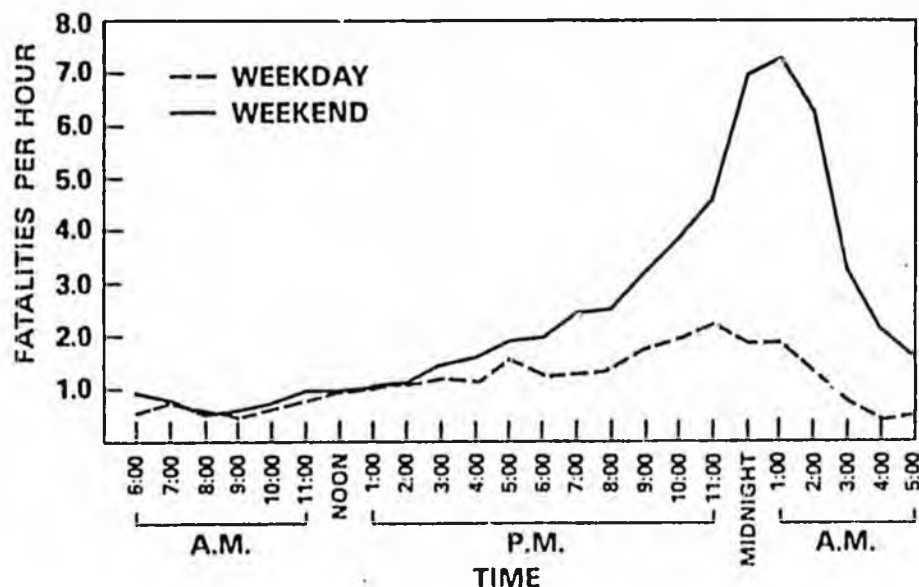
Figure 4-4. Comparison of Alcohol-Involved and Nonalcohol-Involved Crashes in Washtenaw County, Michigan, 1970

This correlation between alcohol consumption and the time of day of accidents has been used as a surrogate measure of the accident involvement of those who have been drinking when the best evidence, the blood alcohol content of the responsible driver, is not available.<sup>9</sup> Forty-seven of the fifty states have laws permitting or requiring determinations of the BAC of fatally injured drivers, but only ten states actually do measure as many as 75 percent of their dead drivers. Most states make these determinations on fewer than 25 percent of their fatally injured drivers, and in any case, many drunk drivers live through accidents in which others are killed and consequently are not tested for BAC. As a result, BAC data on drivers involved in fatal crashes are very incomplete. Thus, when using national accident statistics, researchers must generally contrast the number of nighttime and the number of daytime crashes to ascertain alcohol involvement.

It is instructive to consider the relationship of the time of day and highway fatalities as it is affected by the age of drivers. This can be done by using the Fatal Accident Reporting System (FARS), a system maintained by the National Highway Traffic Safety Administration to record all accidents in which a highway user dies within thirty days of the crash.<sup>10</sup> Figures 4-5, 4-6, and 4-7 show

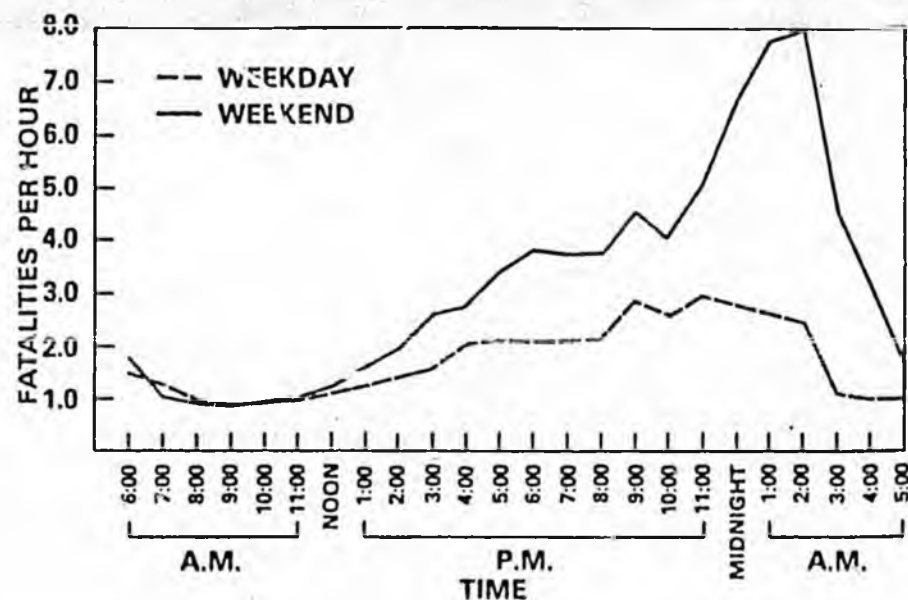
the fatalities per hour for weekdays and weekends for three age groups. For those aged 45 or older (figure 4-7), the weekday and weekend curves are very similar; the peak accident rate among this group occurs during the afternoon rush hours on weekdays and slightly later on weekends. In contrast, the highest weekday fatality rate for young adults between 22 and 44 years of age (figure 4-6) takes place in the late-night hours, around midnight. This rate is two to three times higher on weekends, with the highest rate occurring one to two hours after midnight on Friday and Saturday nights. The youngest drivers, those from 15 to 21 years old, show an even more extreme skewing of the fatality rate during the night hours (figure 4-5). On both weekdays and weekends, young adults have fairly high fatality rates in the afternoon and evening. But drivers between 15 and 21 years old have fewer accidents in the afternoon, particularly on weekends, and a high number of late-night fatalities.

These patterns of fatalities occur for many reasons. The number of vehicles on the road, the type of driving (commuting versus recreational), weather conditions, and roadway characteristics, as well as the characteristics of the drivers and their alcohol use—all influence the rate of fatal accidents. The correlation between driver age and time of fatality involvement nevertheless



Source: National Highway Traffic Safety Administration, *Fatal Accident Reporting System, 1978 Annual Report* (Washington, D.C.: U.S. Department of Transportation, 1978).

Figure 4-5. Fatalities by Hour, Ages 15-21, 1978



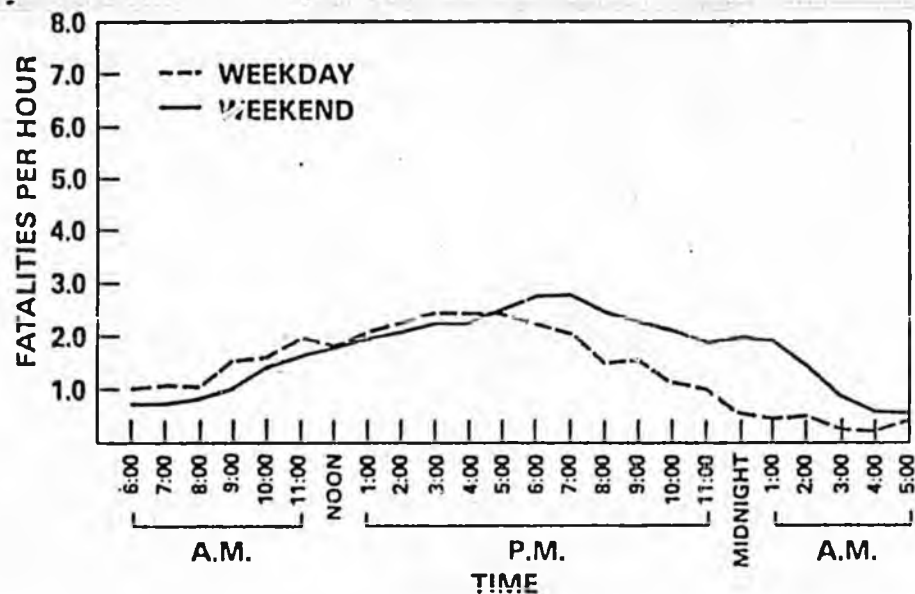
Source: National Highway Traffic Safety Administration, *Fatal Accident Reporting System, 1978 Annual Report* (Washington, D.C.: U.S. Department of Transportation, 1978).

Figure 4-6. Fatalities by Hour, Ages 22-44, 1978

provides evidence to support the hypothesis that adolescent life-styles, particularly among males, increase teenagers' exposure to fatal crashes.

One factor that must be considered in relation to the involvement of adolescents in accidents during weekend nights is the general pattern of teenage driving. Measurements of driving exposure are approximate at best but can be attained through questionnaires or interviews with drivers. The results of one such study are shown in figure 4-8.<sup>11</sup> Drivers were asked to estimate the number of miles they drove annually, and those in their teens reported less-than-average amounts of driving. Furthermore, these drivers constitute a low percentage of all U.S. drivers. But random roadside surveys conducted on weekend nights (8 P.M. to 4 A.M.) in several locations throughout the United States reveal, as shown in figure 4-9, that drivers in their teens and twenties are greatly over-represented at these times.<sup>12</sup>

Thus, the evidence indicates that (1) most alcohol-related accidents occur at night, particularly on weekend nights; (2) the highest fatality rates for young drivers occur at night, particularly on weekend nights; and (3) drivers younger than 30 are found on the road on weekend nights more frequently than would be expected from their numbers in the driving population. The question then



Source: National Highway Traffic Safety Administration, *Total Accident Reporting System, 1978 Annual Report* (Washington, D.C.: U.S. Department of Transportation, 1978).

Figure 4-7. Fatalities by Hour, Ages 45 and Over, 1978

arises, is the high late-night weekend fatality rate simply a function of the amount of driving done by young people at these times, or do these drivers have a greater risk of involvement in accidents, even when their exposure is controlled? (The common understanding of the term *exposure* is that it refers to conditions external to the driver: the condition of the roadway, traffic, environmental conditions, and perhaps the condition of the vehicle. However, it is possible that drivers who use the road at night differ significantly in personal characteristics from those who drive during the day. If so, part of their increased exposure is related to these characteristics as well as to the external factors mentioned previously.)

It is not surprising, of course, that although teenagers do drive considerably less frequently than their seniors, they may drive most often on weekend evenings. But if the highest rates of fatal accidents and alcohol-related accidents occur on these evenings, then teenagers appear to drive at the times of highest risk, both for causing an alcohol-related crash and for being victimized in an accident caused by another driver.

On the other hand, since a high fatality rate occurs among licensed teenage drivers anyway, and such drivers reveal a low overall mileage rate, it seems that these young vehicle operators must have a much higher risk per mile than their

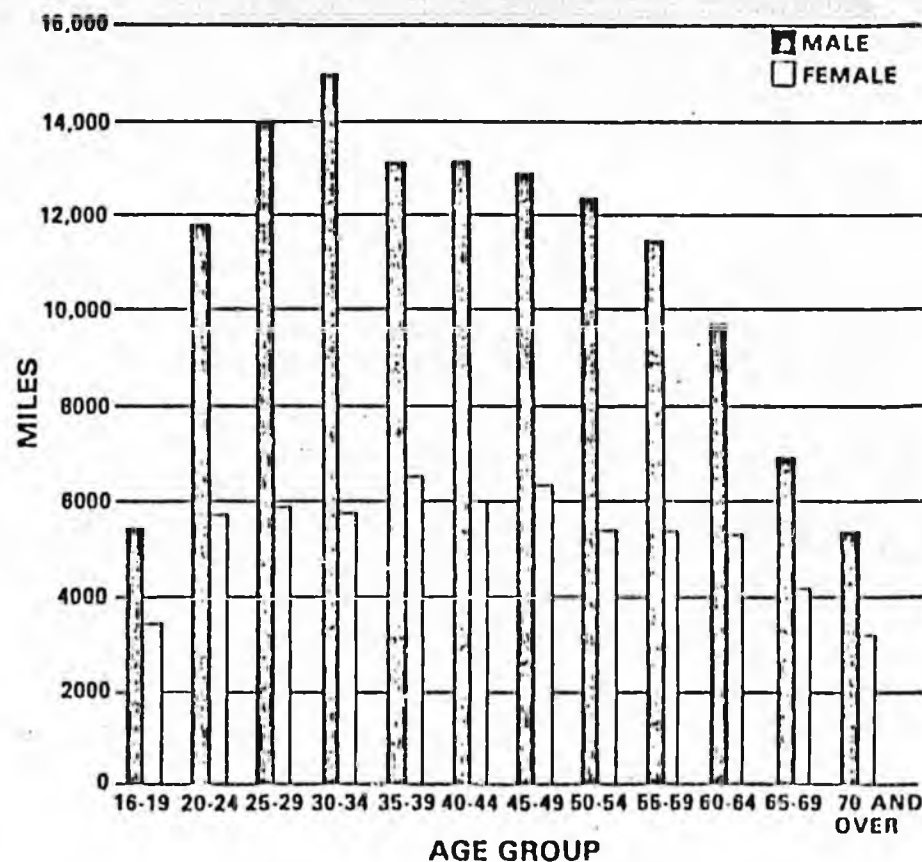
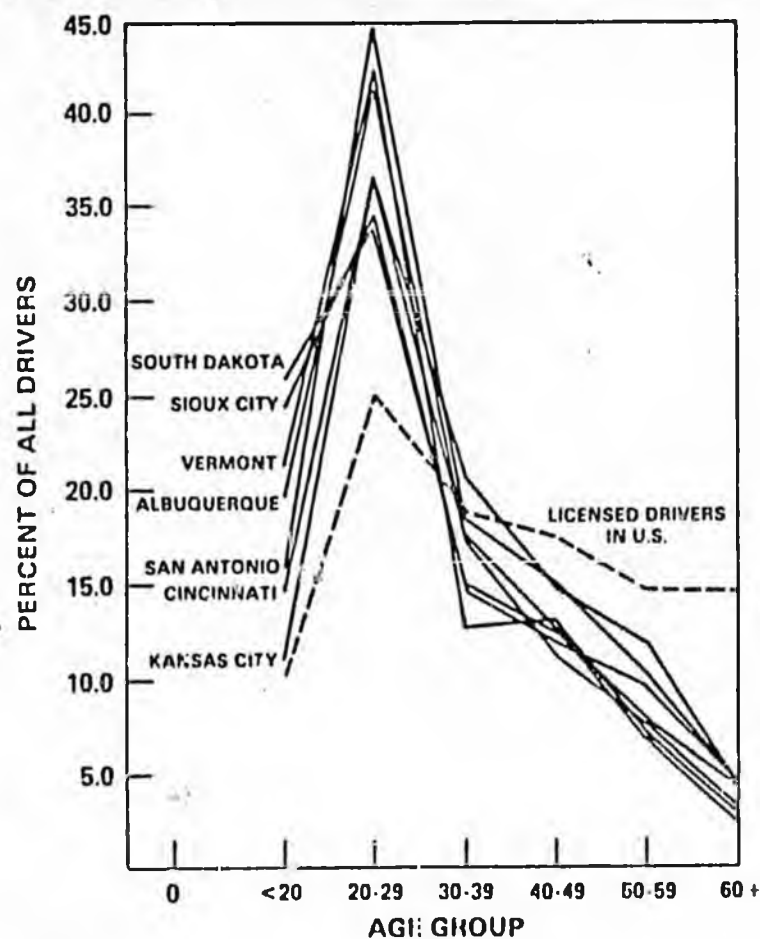


Figure 4-8. Estimated Average Annual Miles Driven per Licensed Driver by Age and Sex

older counterparts. Although a part of this risk may be due to the dangerous times of day and week at which young people drive, teenagers do appear to have a higher risk of involvement in nighttime alcohol-related crashes than their elders did. One study, for example, compared the age distribution of nighttime drivers stopped in random roadside surveys and of drivers involved in nighttime single-vehicle crashes (that is, accidents for which the driver was held responsible).<sup>13</sup> Only among the 16- to 20-year-old age group was the crash involvement proportionately higher than the frequency with which people of that age group were found in the nighttime driving population.

Additional evidence for the overinvolvement of teenagers in accidents even when exposure is controlled is presented by the well-known Grand Rapids study of Borkenstein and his coworkers.<sup>14</sup> These researchers used their data to calculate accident risk as it related to age and blood alcohol concentration



Source: National Highway Traffic Safety Administration, *Alcohol Safety Action Project: Evaluation of Operations*, 1972, Vol. 2 (Washington, D.C.: U.S. Department of Transportation, April 1, 1974).

Figure 4-9. Age Distribution of Drivers Using the Road at Night in Seven Areas in the United States 1971-1972

of drivers. They found that among sober drivers, teenagers are two to three times more at risk for accidents than drivers in their forties. The lowest risk per mile of exposure appears to occur among drivers from about 30 to 60 years of age, and younger and older drivers have a slightly increased risk of crash. Even low amounts of alcohol consumption accentuate this difference, and the trend becomes more pronounced as the BAC increases.

In view of the apparent higher risk of younger drivers for involvement in nighttime and alcohol-related crashes, it is particularly interesting to note the

enforcement pattern of the police, as indicated by data on arrests for driving while under the influence of liquor (DUIL). In a study in Michigan, which used data that are probably typical of most areas of the nation, Clark contrasted the age range of drivers arrested for DUIL with the age range of fatally injured drivers in the same area.<sup>15</sup> The results show that the younger age groups are overrepresented among fatalities but that older drivers are most frequently arrested for driving while under the influence of alcohol. One explanation may be that about the same proportion of younger drivers and drivers in their thirties and forties have alcohol in their bodies, but the older drivers tend to have higher BACs than their younger counterparts. Other factors also play an important role; for example, police may be more likely to take teenagers home to their parents than to arrest them. This behavior, along with many other elements that enter into a police officer's decision to make an arrest, has been well documented.<sup>16</sup>

The tendency for the older drinking driver to appear in official records while the younger driver is more likely to die on the highway but less likely to have a record is paralleled in the field of alcoholism. "On-the-record" hospitalizations of alcoholics occur most frequently among men in their middle to late forties, but self-reported drinking problems are more typical of younger males. In his study of problem drinking, Cahalan found the greatest number of reported problems (on the job, marital, and so on) among young men in the 21 to 24 age bracket.<sup>17</sup> This same group is most frequently found on the roads on weekends and, next to teenagers, has the highest accident fatality rate.

One question that remains to be considered is the role of changes in minimum-drinking-age laws on the accident morbidity and mortality of the affected age groups. In particular, it may be of interest to ask what effects might be expected if states that still have a 21-year-old minimum drinking age were to lower their limit. Some indirect evidence on this question can be obtained from the FARS file.<sup>18</sup> Among the ten states that report the blood alcohol concentrations in their fatally injured drivers in 75 percent or more of the cases are five western states—California, Oregon, Washington, Nevada, and Colorado—that have laws limiting sales of liquor, beer, and wine to those 21-years-old or older. In these states, 64 percent of fatally injured young adults, aged 22 to 44, had some alcohol in their bodies, and 53 percent had an illegal BAC of 0.10 percent or higher. But the data show that a similar proportion of fatally injured teenagers had been doing some drinking or had illegal BACs near the level of the older drivers, even though they could not legally purchase alcoholic beverages. In fact, by age 17, half of all fatally injured drivers in these states have alcohol in their bodies, and a third have an illegal BAC. This suggests that much of the effect of lowering the legal minimum drinking age might already be discounted by the apparent availability of alcohol to teenagers.

Given the number of states that have reduced the minimum legal age for the purchase of alcohol and are now thinking of raising it again, recent trends

In teenage automobile crashes may be relevant. Unfortunately, the FARS file has only been in existence since 1975, so it provides consistent national trend data for only the five years 1975 through 1979. Reliable individual state trend data may be available in some cases, but no sufficiently sensitive national file of fatalities other than FARS is currently in existence. To study alcohol-related accident trends over the four years from 1975 to 1978, data on nighttime (8 P.M. to 4 A.M.) single-vehicle crashes (a surrogate measure for crashes involving alcohol) were drawn from the FARS file. Trend analyses were conducted on data for the young adult group (ages 22 to 44) and the teenage group (ages 16 to 21). Both groups showed a rise in fatalities, probably due at least in part to the general reduction in adherence to the 55 mph national speed limit. However, the teenagers showed a significantly smaller rise in fatalities during this four-year period.

Previous studies have shown that lowering the legal minimum drinking age increases the number of automobile accidents among adolescents.<sup>19</sup> To determine whether raising the drinking-age limits is having an impact on traffic accidents involving young drivers, the National Highway Traffic Safety Administration is conducting studies of those states that have recently raised their legal minimum drinking age. These studies focus on states that have raised their limit by two or more years of age because of the probability that crash statistics would be insensitive to a one-year shift. Included in these studies are Maine (which raised its limit from 18 to 20), Massachusetts (18 to 20), New Hampshire (18 to 20), and Michigan (18 to 21). New York, which has always allowed 18-year-olds to purchase liquor, will provide comparison data.

Because of the limitations in state data concerning automobile accidents related to alcohol consumption, NHTSA researchers are employing the surrogate measure used by Richard Douglass in his 1974 study, single-vehicle nighttime male crashes (SVNM).<sup>20</sup> The statistical analysis employs the Box-Tiao intervention analysis technique.<sup>21</sup>

[An initial analysis has been made of crash data from Maine, which raised its legal minimum drinking age in October, 1977. This analysis suggests that a significant reduction in SVNM accidents began two months after the law took effect, averaging 5.51 crashes per month (SE. 1.71) over the twelve-month period of December 1977 to December 1978. A sizeable reduction in SVNM crashes (averaging 11.78 accidents a month) was also detected for the two months of December 1977 and January 1978. This reduction is believed to have been caused by the severe winter weather that paralyzed the Northeast during that year.

For comparison, single-vehicle daytime crashes of 18-year-old male were also analyzed. These data were used to determine the trend in non-alcohol-related crashes. This series shows similar results but of lesser magnitude. The effect attributed to the change in the minimum-drinking-age law is an average accident reduction of 2.38 per month from December 1977 to December 1978.

(SE. 1.04). What might be called the severe-winter effect accounted for a reduction of 15.84 crashes (SE. 3.38) for the month of December 1977. Crash data for 19-year-old drivers in Maine have shown no effect of the change in the law, but do show a severe-weather effect for December 1977-January 1978, on both day and night single-vehicle male accidents.

These data on crashes in Maine cover too short a period of time for researchers to place much reliance on the results to date. Only as additional data from Maine, Massachusetts, New Hampshire, and Michigan become available will we be able to make a reliable determination of whether the raising of the minimum-drinking-age laws is reducing automobile accidents among young people. The data in this chapter thus indicate that although young drivers comprise only a small percentage of the national driving population, they do drive more frequently at night, especially on weekends, when the risk of accidents related to alcohol use is highest, and they do form a disproportionately high percentage of those involved in such accidents at such times.

#### Notes

1. E.P. Noble, ed., *Alcohol and Health: Special Report to the U.S. Congress from the Secretary of Health, Education, and Welfare, June 1978*. (Washington, D.C.: U.S. Government Printing Office, 1979), chap. 8.

2. *Ibid.*

3. National Highway Traffic Safety Administration, *Fact Book: Statistical Information on Highway Safety, 1979* (Washington, D.C.: U.S. Government Printing Office, 1979).

4. Noble, *Alcohol and Health*.

5. National Highway Traffic Safety Administration, *Fact Book*.

6. See R.K. Jones and K.B. Joscelyn, *Alcohol and Highway Safety 1978: A Review of the State of Knowledge*, vols. 1 and 2, Report no. DOT-HIS-803-764 (Springfield, Virg.: National Technical Information Service, 1978); Organization for Economic and Cooperative Development, *Road Research: New Research on the Role of Alcohol and Drugs in Road Accidents* (Washington, D.C.: Organization for Economic and Cooperative Development, September 1978); and R.B. Voas, *Alcohol, Drugs and Young Drivers* (Washington, D.C.: U.S. Department of Transportation, National Highway Traffic Safety Administration, May 1974).

7. National Highway Traffic Safety Administration, *Fact Book*.

8. Jones and Joscelyn, *Alcohol and Highway Safety*.

9. See R.L. Douglass, L.D. Filkins, and F.A. Clark, "The Effect of the Lower Drinking Age on Youth Crash Involvement" (Final Report for the National Highway Traffic Safety Administration, U.S. Department of Transportation, Report no. UM-HISRI-AL-74-1-2) (Ann Arbor, Mich.: University of Michigan, 1974); and National Highway Traffic Safety Administration, *Alcohol*

*Safety Action Project: Evaluation of Operations, 1972*, vol. 2 (Washington, D.C.: U.S. Department of Transportation, April 1, 1974).

10. National Highway Traffic Safety Administration, *Fatal Accident Reporting System, Annual Report for 1978* (Washington, D.C.: U.S. Department of Transportation, 1978).

11. National Highway Traffic Safety Administration, *Fact Book*.

12. National Highway Traffic Safety Administration, *Alcohol Safety Action Project*.

13. W.L. Carlson, "Alcohol Usage of the Nighttime Driver," *Journal of Safety Research* 4 (1972):12-25.

14. R.F. Borkenstein, R.F. Crowther, R.P. Shumate, W.B. Ziel, and R. Aylman, *The Role of the Drinking Driver in Traffic Accidents* (Bloomington, Ind.: Indiana University, 1964).

15. C.D. Clark, "A Comparison of the Driving Records and Other Characteristics of Three Alcohol-Involved Populations and a Random Sample of Drivers" (HIT Lab Reports II, 10) (Ann Arbor, Mich.: University of Michigan, Highway Safety Research Institute, June 1971).

16. See, for example, Jones and Joscelyn, *Alcohol and Highway Safety*, p. 52.

17. D. Cahalan, *Problem Drinkers* (San Francisco: Jossey-Bass, 1970).

18. National Highway Traffic Safety Administration, *Fatal Accident Reporting System*.

19. Douglass et al. "Effect of Lower Drinking Age."

20. Ibid.

21. G.E.P. Box and G.C. Tiao, "Intervention Analysis with Applications to Economic and Environmental Problems," *Journal of the American Statistical Association* 70 (1975):70-79.

# 5

## Research Strategies to Evaluate the Impact of Changes in the Legal Drinking Age

Paul C. Whitehead

Studies of the impact of changes in the legal drinking age have addressed a number of different questions and have employed a wide array of research methodologies. Of the possible effects of changes in the minimum drinking age, automobile collision involvement of young drivers has received the most attention. In fact, this subject has acquired a well-developed line of inquiry in its own right. Other questions have also been investigated, including the impact of the change in the legal drinking age on overall consumption and patterns of consumption of alcoholic beverages and on consequences of alcohol use such as admissions for treatment of alcoholism or problems in secondary schools. Most of these studies are "one-of-a-kind" and they involve widely differing methodologies and data from diverse sources.

This chapter has two major objectives differing markedly in magnitude. The first objective is to provide a review of the research strategies that have been used in ascertaining whether the lowering of the legal drinking age had an impact on the collision involvement of young drivers. This serves as an introduction to chapter 5, which presents the exemplary set of contributions to this field of study. The second objective is to introduce some methodological issues about the research strategies that have been used to study other possible impacts of the change in the legal drinking age. These comments will introduce the review of much of the relevant research that is covered in chapter 6. In addition, this chapter is intended to provide a framework within which general conclusions and directions for future research can be considered, which is the topic of chapter 8.

### Collision Involvement

The most serious problem usually associated with drinking and driving is the automobile collision. Collisions may involve only property damage or they may result in injury or even death for the occupants and others. Data on collisions routinely are collected independently of the needs of scientists. For these reasons, studies of the impact of the change in the drinking age generally use measures associated with collisions rather than impairment as the dependent variable.<sup>1</sup> These measures are of two kinds. The first is the type of

# Effects of Reducing the Legal Alcohol-Purchasing Age on Drinking and Drinking Problems

## A Review of Empirical Studies

Reginald G. Smart and Michael S. Goodstadt<sup>1</sup>

**SUMMARY.** A review of studies of the effects of reducing the legal age for drinking and purchasing alcoholic beverages suggests that there are public health reasons for not introducing such changes in jurisdictions which have not already done so.

CONCERN HAS BEEN EXPRESSED recently about the effects of the reductions in the legal age for drinking and purchasing alcoholic beverages across North America; some of these jurisdictions (e.g., Massachusetts and Ontario) are even considering the advisability of returning to former legal age limits. Chart 1 shows the provinces in Canada and states in the United States which have reduced the legal purchasing age. All 10 Canadian provinces and 26 of the 50 American states have implemented age reductions, usually as part of a movement to create a single age of majority, usually 18, at which most legal rights are achieved.

The trend toward reductions in the legal purchasing age began in 1970, since when a number of preliminary studies have been undertaken to examine some of the consequences of the changes. Many of these studies were conducted without adequate comparison or control groups; some were, of necessity, conducted with haste because of lack of warning about forthcoming changes in the law; several had to rely on post hoc analyses with or without the advantages of data extending over a long time period before and after changes in the law. The purposes of the present article are to review the empirical research related to the changes in the alcohol-purchasing age and to indicate what consequences have so

<sup>1</sup> Addiction Research Foundation, 33 Russell St., Toronto, Ont., Canada M5S 2S1. Received for publication: 8 April 1976. Revision: 28 October 1976.

RECEIVED  
FEB 9 1981  
ADDITION X  
Act. Ind. J.

	HALL
	CARLSON
	CHAPMAN
	DAVIS
✓	EDDY, H.
	EDDY, R.
	KINGMAN
	SWANT
	SWIERKOS

CHART 1.—Recent Changes in Alcohol-Purchasing Age  
By State (U.S.A.) and Province (Canada)

<i>From 21 to 18</i>	Alberta (1973)	<i>From 21 to 20</i>
Connecticut (1972)	Manitoba (1970)	Delaware (1972)
Florida (1973)	Ontario (1971)	
Georgia (1972)	Prince Edward Island	<i>From 20 to 18</i>
Iowa (1972-73)	(1972)	Hawaii (1972)
Maryland (1975)*		Maine (1972)
Massachusetts (1973)	<i>From 21 to 19</i>	Quebec (1971)
Michigan (1972)	Alabama (1975)	
Minnesota (1973)	Arizona (1972)	<i>From 20 to 19</i>
Montana (1971-73)	Idaho (1972)	Alaska (1970)
New Hampshire (1973)	Wyoming (1973)	Nebraska (1972)
New Jersey (1973)	Newfoundland (1972)	
Rhode Island (1972)	Nova Scotia (1971)	<i>From 19 to 18</i>
Tennessee (1971)	New Brunswick (1972)	Saskatchewan (1972)
Texas (1973)	British Columbia (1970)	
Vermont (1971)	North West Territories	
West Virginia (1972)	(1970)	
Wisconsin (1972)	Yukon (1970)	

\* Beer and light wine only.

far been identified. Several of the studies are unpublished, and apparently no critical review has been made of research in this area.

Expectations as to what consequences might ensue from changes in the alcohol-purchasing age vary with the view generally taken about alcohol-control policies. For example, Wilkinson (1) argues a type of "forbidden fruit" theory in which alcohol is seen as especially attractive to young people because of its illegality. According to this view, it was expected that once it became legal for young people to drink it would be possible for acceptable drinking norms to develop. Wilkinson recommended lowering the purchasing age to 18 in all jurisdictions. On the other hand, those in favor of the "distribution" theory (e.g., 2) argue that it is likely that any liberalization would contribute to higher per capita consumption and hence to alcohol-related problems.

It can be argued that changing the law would have no effect on consumption at all. Many young people drank before the law was changed and a new legal age may only legalize the status quo. It has also been observed that many European countries such as Britain have always had low alcohol-purchasing ages and they have relatively low per capita consumption and alcoholism rates. However, France and Italy also have low purchasing ages and lead the world in both alcohol consumption and its problems. International comparisons, however, may be of little real value compared with before-and-after studies in a single jurisdiction.

## EFFECTS OF NEW AGE LAWS ON DRINKING

Few studies have been made of the effects of the new alcohol-purchasing laws on alcohol consumption. Only Canadian studies have been identified, and all but one refer only to Ontario; most of these studies have no control or comparison groups.

In Ontario the legal age for buying and drinking alcoholic beverages was reduced from 21 to 18 in July 1971. Smart and Schmidt (3) report a survey of Toronto high-school students which has been conducted every 2 years since 1968. The study was a cross-sectional one, employing the same sampling system in all years but not resurveying the same students. The sample included approximately 20% of the available high-school districts; 120 students of each sex were selected from each of grades 7, 9, 11 and 13. In 1970, 6882 students were surveyed; in 1972, 6627 students; and in 1974, 3479 students. The number of drinkers increased significantly between 1970 and 1972 and between 1972 and 1974. Sixty per cent of the students were drinkers in 1970, 70% in 1972 and 73% in 1974. It is, however, interesting to observe that the 1970-72 increase was greater than that occurring between 1972 and 1974. (A change in the questionnaire between the 1968 and 1970 surveys precludes easy comparisons for these years.) Also, changes in drinking were greatest among grade-13 students who because of their age (18-20) should have been most affected by the new law.

In May 1972 students were also asked directly about changes in their drinking behavior since the new law; 27% reported no drinking at all, 41% said there had been no change, 20% reported more drinking, 4% less drinking, and 9% started drinking after the new law. The most frequent drinkers reported increases in the frequency of drinking more often than did the less frequent drinkers.

Smart and Schmidt (3) also report a study conducted in February 1972 in Ontario on drinking among college students 7 months after the passage of the new law. First-year students at community colleges and universities ( $N = 448$ ) were asked whether the new law made a difference in how often they drank. Most (57%) reported no change. However, 25% of the men and 21% of the women reported an increase in the frequency of drinking. The increases were greater among students who were younger and among those who were more frequent drinkers. However, few students claimed that they drank more on each drinking occasion. The type of drinking occasion also appeared to change after the new law. About

54% of students reported increased visits to bars and pubs, but only 19% reported more drinking with parents. About 40% reported more frequent purchases at liquor stores after the new law. The percentage of students who went to bars or pubs 3 or more times a week doubled from 3 to 6%. Again, the largest changes were among the younger students who were most affected by the new law. For example, 81% of those 18 years of age, but only 45% of those aged 21, reported never having made purchases before the new law. It would appear from this study that the major effects of the new law were not on family drinking but on drinking in bars and pubs and on purchases from liquor stores.

A study by Schmidt<sup>2</sup> examined the effect of the change in the Ontario law on sales of alcoholic beverages. On- and off-premise sales were analyzed separately. The new law increased the population of those legally permitted to buy alcohol by only 8.1% (i.e., those between 18 and 21 years of age), many of whom were drinking before the new law. Schmidt calculated an expectancy of the proportion of total annual sales accounted for by sales between January and July and between August and December, taking into account the increase in population after the change in the drinking age law. He found that the increase of on-premise consumption was greater than expected, although that of off-premise consumption was lower than expected; the sales of beer, wine and distilled spirits all increased.

The only study of drinking that included comparison groups against which to assess changes in areas which lowered the legal alcohol-purchasing age was reported by Smart and Finley (4). The effect of the change on per capita beer consumption in each of the 10 Canadian provinces was examined. Beer was chosen because it is popular among young people and also because monthly sales data on wine or spirits were not available. Per capita beer consumption in each province was computed for the year before and the year after the change. Two control provinces—British Columbia and Saskatchewan—were selected in which there had been no change during the year before or after the change in the experimental provinces. Only data for the year after the change were used for the control provinces, because earlier data would have

<sup>2</sup> SCHMIDT, W. A note on the effect of lowering the drinking age on the consumption of alcoholic beverages. (Addiction Research Foundation, Substudy No. 525.) Toronto; 1972.

included data affected by earlier changes. (Consumption in British Columbia had been increased by an earlier change in alcohol-purchasing age from 21 to 19 and in Saskatchewan by a change from 19 to 18.) The observed and expected proportions of sales before and after the age change were computed using Schmidt's<sup>2</sup> method.

The findings were that (1) there was considerable inconsistency in apparent beer consumption—striking changes were not obvious; (2) there was an over-all increase in beer consumption in the pre-post comparison but this increase was not greater than in the control provinces; problems in finding control provinces not affected by earlier age changes made firm conclusions difficult; (3) there appears to have been a decrease in consumption in five provinces and an increase in five, but the increases were larger, and the reasons for the variations are not clear; and (4) the method suggested by Schmidt indicated that beer consumption during the year of the change was not greater than that expected on the basis of adding new drinkers to the drinking population. Unfortunately, separate data on on- and off-premise consumption were not available. The findings suggest that the effects of new age laws may vary from one jurisdiction to another and that more control studies should be done.

#### EFFECTS OF NEW AGE LAWS ON DRIVING

A variety of studies in several jurisdictions have shown the effects of alcohol-purchasing age laws on accident involvement. Several of these studies employed control jurisdictions in which there had been no change; there is, however, little agreement at the present time concerning the effects of the changes.

One of the first studies of accidents after a change in alcohol-purchasing age was made by Schmidt and Kornaczewski<sup>3</sup> of Ontario alone with no comparison province. They found a gradual increase in the proportions of accidents involving young drivers from 5.5% in 1967 to 5.8% in 1968, 6.7% in 1969 and 6.9% in 1970, but in 1971, the year of the change, the proportion rose to 10.5%. It does appear, however, that even without an age change young drivers were accounting for more of the drinking accidents in

<sup>2</sup> SCHMIDT, W. and KORNAJCZEWSKI, A. A note on the effect of lowering the legal drinking age on alcohol related motor vehicle accidents. (Addiction Research Foundation, Substudy No. 552.) Toronto; 1972.

each succeeding year. Whether the 1971 rates would have been as high without a change is difficult to answer with certainty without a control area in which no change in law occurred.

A similar study was conducted by Whitehead et al. (5). They examined the accident records of men drivers in London, Ontario, a city of 237,000 persons. They found that after the reduction in the alcohol-purchasing age alcohol-related collisions increased 339% among 18-year-olds and 346% among 19-year-olds over 2 years while the total collisions among these age groups increased by only 42 and 37%. Increases in alcohol-related collisions were far lower (20%) among 24-year-olds, who ought not to have been affected by the law. The authors reject two alternative explanations, (1) that a public clamor resulted in increased police activities against younger drivers, and (2) that the change in the age of majority allowed more car ownership via loans for young drivers. The first is rejected because a search of newspapers found no clamor, and the second because nighttime accidents increased more than daytime accidents. Neither refutation is totally convincing, as police surveillance may have increased without a public clamor, and a higher proportion of nighttime driving is accounted for by youthful drivers. Whitehead et al. concluded (5, p. 1221) that "the change in the alcohol-purchasing age had an independent effect of increasing the incidence of alcohol-involved collisions and total collisions among young drivers."

The validity of this conclusion as it relates to the Michigan alcohol-purchasing age law has been debated at length. Hammond (6) showed that after the alcohol-purchasing age was reduced in January 1972 there was an increase in the number of young drivers involved in collisions. Among drivers aged 18 and 19, the number of fatal crashes increased by 29% from 1971 to 1972. However, Zylman (7) argued that the increase could have been due to increased police surveillance, expected year-to-year fluctuations in numbers, or to a change in drinking or driving practices of young people. Ferrence and Whitehead (8) countered the argument of greater police surveillance by showing that the increase in alcohol-related crashes persisted into 1973, beyond the point at which Zylman expected such surveillance to stop. However, stronger arguments presented by Zylman are that (1) the total number of licensed drivers increased by 31% in the years 1968-73, and (2) in several years between 1962 and 1971 there were greater

increases in the proportion of crashes involving young drivers than there were after the age change (e.g., 35, 40 and 31%). Apparently, data are not available for alcohol-related crashes by age for the years 1962-72. Perhaps in Michigan the law was changed at a low point in the fluctuating curve for alcohol-related accidents, and postlaw effects are, in part, artifacts of that occurrence.

Problems similar to those outlined above apply to some of the Michigan data described by Hammond (6). He showed that there was a 141% increase in driving-under-the-influence charges in the period 1971-72 among those aged 18-20, but only a 26% increase among those over 21. He also referred to a Highway Safety Research Institute report indicating that in road surveys the proportion of drivers aged 16-20 with blood alcohol concentrations (BACS) of over 0.05% increased from 1.3 to 4.9%. Although these changes appear to be very large and outside normal fluctuations, it is difficult to attribute them directly to the new law.

Pelz et al. (9) also analyzed data on young men drivers in Michigan. They found evidence that just prior to the lowering of the alcohol-purchasing age a drop in the increase in fatal crashes occurred. They suggested that perhaps awareness of the forthcoming legal change encouraged young drivers to drive more responsibly. They did not, however, present any postchange data.

Naor and Nashold (10) studied the effect of a new alcohol-purchasing age law in Wisconsin. This change was different from that in Ontario and Michigan because it made only wine and spirits newly available to those aged 18-20. Beer had been available earlier on a local-option basis and hence somewhat smaller effects on driving problems might be expected. They studied the change in BACS of drivers aged 18-20 involved in fatal accidents during 1968-73; the law was changed in March 1972. The proportion of drivers with BACS over 0.05% had remained essentially unchanged; a very slight increase in 1973 compared with 1972 and 1971 was noted, but the changes were not greater than had occurred in earlier years. Similar nonsignificant changes were found in the rates of fatalities per 100,000 licensed drivers. The latter statistic, however, may not be very sensitive to the effects of a partial liberalization of the drinking age law among young people; a larger impact may be expected on average BACS among all drivers in accidents or at risk as found in Hammond's report (6).

Fortunately, there are two studies with more convincing quasi-

experimental designs than those discussed so far. Douglass and Filkins (11) selected Vermont, Maine and Michigan as states which reduced the alcohol-purchasing age to 18. New York and Louisiana were selected as controls, having for a long time allowed drinking at 18, while Pennsylvania and Texas were selected as consistent "21-year-old" states. The authors studied single-vehicle nighttime accidents among men for several years before and after the change in all but Vermont, where data were available for only 1 year, before and after the change. An interrupted time series analysis was used on age-specific data freed of cyclic variations and linear trend. They found no evidence of increases in alcohol-related accidents among 18-to-20-year-olds in control states, except in Pennsylvania where there was also an increase among older drivers. In Michigan, and less so in Maine, alcohol-related accidents increased "beyond any normally expected level after the legal drinking ages were changed"; this effect was attributed to the legal changes. In Vermont, however, no increase was observed after the change in law; this could have been because (1) Vermont has a long border with New York (which has a 40-year history as an "18-year-old" state), (2) an Alcohol Safety Action Project may have reduced drinking accidents in 1972, or (3) limiting the analysis to 1 pre- and 1 post-change year rendered the time series analysis for Vermont inadequate. The largest change in Michigan was found in Washtenaw County, perhaps because of the large population of young persons and because the earlier age laws had been more strictly enforced. The study indicates, as did Smart and Finley's (4), that the effects of age laws may vary from one jurisdiction to another, but that the effects do not necessarily occur randomly, as suggested by Douglass and Filkins's analysis and discussion.

Another carefully controlled study was reported by Williams et al. (12). Michigan, Wisconsin and Ontario were the experimental states and Indiana, Illinois and Minnesota, "21-year-old" states contiguous to three experimental states, were the control states. A novel aspect was the inclusion of data on both 18-to-20-year-olds and 15-to-17 year-olds. The latter were too young to purchase drinks legally under the new laws but could have had more access to alcohol as a result of changes in the alcohol-purchasing age. Comparison of the incidence of driver fatalities, adjusted for the size of the driver population in the experimental and control states, revealed a small but significant increase in young driver fatalities

in Michigan, Wisconsin and Ontario, especially in nighttime and single-vehicle crashes, in which alcohol is most often involved. This occurred among both those aged 18-20 and those aged 15-17, indicating that alcohol-purchasing age laws can affect those who are technically too young to be covered by them. Since the observed increase was small—only 5% more than expected—the authors suggest that the law affected the perception of the extent of alcohol-related fatalities or the reporting of alcohol involvement by the police more than it affected the actual fatal crash rate.

#### EFFECTS OF NEW PURCHASING AGE LAWS ON DRINKING PROBLEMS

Only three studies have investigated the variety of drinking-related problems which could have been affected by the new laws, such as crime rates, public drunkenness, school attendance, family functioning or employment. Two of these studies (3, 6) concerned school problems and one (4) dealt with admissions to treatment facilities.

Both Hammond (6) and Smart and Schmidt (3) reported reactions of school officials to the changes in the alcohol-purchasing age 6 months after the change. Hammond's study involved 354 principals "which was only 46% of the total"; it is not clear whether the remainder did not reply or were not surveyed. Of the 354 respondents, 44% reported that school functions such as dances were more of a problem after the change; 26% reported increased drinking at lunch hour and 32% reported more problems with drinking during school hours. Most (66%) thought that there was more drinking than before among 15- to 17-year-olds.

Smart and Schmidt (3) reported the results of a survey of 220 vice principals conducted in the Toronto area 7 months after the change in the law; 86% replied. Slightly more vice principals were against the new law than were for it. Those who were against it reported more drinking problems in their schools after the change. It is uncertain whether their unfavorable attitude to the law led to or followed their negative perceptions about the effects of the law. About 28% reported no increase in drinking but two-thirds said there had been an increase and the remainder did not reply. Over-all, 40% reported more drinking at lunchtime, 34% more alcohol-related disciplinary problems, 20% more drinking-related absenteeism, and 23% more students with hangovers. Studies of this type are of interest but suffer from the confounding effects of

attitudes, distorted memory and the lack of adequate baselines for the observed changes. Before-and-after studies using actual school records have not yet been conducted.

Smart and Finley (4) studied the numbers of young people admitted to alcoholism treatment facilities before and after the change in the law in Ontario. Prior to 1971 very few persons 21 or under were admitted, but by 1974 this age group accounted for 4.4% of all admissions. The first significant change in the number of admissions during the period 1964-74 occurred in 1971, the year the alcohol-purchasing age was changed. Of course, these increased admissions could reflect (1) a change in acceptability of treatment among young problem drinkers, (2) a decreased delay between first appearance of a problem and seeking treatment, or (3) an increased incidence of alcohol problems among young people. More research will be necessary to determine whether the age change was the most important factor in these increased admissions.

#### SUMMARY AND CONCLUSIONS

In general, there has not been extensive research on the effects of changes in the alcohol-purchasing age, except for alcohol-related traffic accidents. Much of the research on drinking and drinking problems has not involved comparisons with areas where the law has not been changed. However, the results of all these studies indicate some consistent and possibly reliable effects. It would seem that the following conclusions could be supported:

(1) Both self-report and sales studies indicate that substantial increases in youthful drinking occurred in Canada after the legal age for purchasing alcoholic beverages was reduced, probably, but not certainly, because of the change. Relevant data for the United States seem not to be available.

(2) The largest changes in drinking probably involved on-premise consumption rather than sales in liquor stores or drinking with families.

(3) The effects of the age change on per capita beer consumption varied from province to province in Canada.

(4) There are usually greater increases in alcohol-related automobile accidents in areas where the purchasing age has been reduced than in comparison areas. These increases do not occur in all states (e.g., Vermont), but the reasons for the inconsistency are uncertain.

(5) Changes in the alcohol-purchasing age probably affect the automobile crash experience of those aged 15-17 as well as those 18-20.

(6) No information is available which shows conclusively (e.g., pre-post study with appropriate comparisons) that reducing the purchasing age has caused increases in educational, family or public-order problems. The data indicating increased admissions of young persons for alcoholism treatment are subject to a variety of interpretations.

(7) The evidence, chiefly from studies of traffic accidents and inferentially from studies of changes in drinking patterns, suggests that there are public health reasons for not introducing changes in jurisdictions which have not yet reduced purchasing ages. Whether the arguments based on human rights or age of majority are superior depends on political, social and cultural values too numerous to discuss here.

#### REFERENCES

1. WILKINSON, R. L. *The prevention of drinking problems; alcohol control and cultural influences*. New York; Oxford University Press; 1970.
2. POPHAM, R. E., SCHMIDT, W. and DE LINT, J. The effects of legal restraint on drinking. Pp. 579-625. In: KISSIN, B. and BEGLITTER, H., eds. *The biology of alcoholism. Vol. 4. Social aspects of alcoholism*. New York; Plenum; 1970.
3. SMART, R. G. and SCHMIDT, W. Drinking and problems from drinking after a reduction in the minimum drinking age. *Brit. J. Addict.* 70: 347-358, 1975.
4. SMART, R. G. and FINLEY, J. Increases in youthful admissions to alcoholism treatment in Ontario. *Drug Alc. Depend., Lausanne* 1: 83-87, 1975.
5. WHITEHEAD, P. C., CRAIG, J., LANGFORD, N., MACARTHUR, C., STANTON, B. and FERRENCEZ, R. C. The collision behavior of young drivers; impact of the change in the age of majority. *J. Stud. Alc.* 36: 1208-1223, 1975.
6. HAMMOND, R. L. Legal drinking at 18 or 21—does it make any difference? *J. Alc. Drug Educ.* 18 (No. 3): 9-13, 1973.
7. ZYLMAN, R. Fatal crashes among Michigan youth following reduction of legal drinking age. *Quart. J. Stud. Alc.* 35: 283-286, 1974.
8. FERRENCEZ, R. C. and WHITEHEAD, P. C. Fatal crashes among Michigan youth following reduction of the legal drinking age. *J. Stud. Alc.* 36: 171-173, 1975.
9. PELZ, D. C., McDOLLE, T. L. and SCHULMAN, S. M. Drinking-driving behavior of young men in relation to accidents. *J. Stud. Alc.* 36: 956-972, 1975.
10. NAOR, E. M. and NASHOLD, R. D. Teenage driver fatalities following reduction in the legal drinking age. *J. Saf. Res., Chicago* 7: 74-79, 1975.
11. DOUGLASS, R. L. and FILKINS, L. D. The effect of the lower legal drinking ages on youth crash involvement; final summary report. Washington, DC; U.S. National Highway Traffic Safety Administration; 1974.
12. WILLIAMS, A. F., RICH, R. F., ZADOR, P. L. and ROBERTSON, L. S. The legal minimum drinking age and fatal motor vehicle crashes. *J. leg. Stud., Chicago* 4: 219-239, 1975.

## POSITION PAPER

## HOUSE BILL NO. 112

"An Act authorizing an advisory vote by the qualified voters of the State on raising the age of majority to 21 for the purposes of regulation of intoxicating liquor; and providing for an effective date."

Overview

Passage in 1971 of the 26th Amendment to the United States Constitution not only allowed 18 year olds to vote but this action assisted in extending certain other privileges to this age group. During the period of 1970 to 1975, 27 states including Alaska, lowered their minimum drinking age for all alcoholic beverage, and another 11 states lowered the drinking age for wine and/or beer. However, 1976 saw a reversal of this trend when Minnesota raised its minimum drinking age and since then, eight (8) other states have also raised their drinking age. A key factor in states decisions to raise drinking ages has been their experience of sharp increases in alcohol-related highway accidents and fatalities that have coincided with the reduction in drinking age. Massachusetts, for example, found that traffic fatalities involving drinking teenagers nearly tripled in the years following lowering the legal drinking age.

Alaska Experience

Alcohol abuse and alcoholism are generally recognized as Alaska's number one health and social problems. Alcohol has also been linked with the state's high accidental death rate and other manifestations of social ills, such as homicide, suicide, crime, violence, child and spouse abuse and neglect, etc.

Youth of Alaska are not immune from the ill effects of alcoholism and alcohol abuse. For example, the State Alcoholism Plan estimates that over 7,000 of Alaska's youth are problem drinkers, defined as drinking alcohol to an extent, or in a manner that an alcohol-related disability is displayed. Also, our state-funded alcoholism treatment programs report that youth make up 5.9% of all persons seen for treatment and counselling. Our Department finds 16-17% of all juvenile arrests are for driving under the influence, liquor law violators and public drunkenness, ranging to as high as 52% in Bethel and 45% in Juneau.

These statistics appear to indicate that alcoholism and alcohol abuse continues to be a serious health and social problem in the State and to which our youth are vulnerable as well.

Department's Position

The Department offers its expertise in looking at the social and health aspects of the problem. Our experience must be considered in combination with expert advice from the other agencies and groups impacted by the problem, such as the Department of Public Safety and Department of Law. We wish to note that the raising of the legal drinking age, although not a panacea for alcohol abuse, may decrease the availability of alcohol to a population that is at risk from this major health and social service problem.

Recommended by:

Robert L. Cole  
Robert L. Cole  
Coordinator  
Office of Alcoholism/  
Drug Abuse

Date:

02/02/82

Approved by:

Helen D. Beirne  
Helen D. Beirne  
Commissioner  
Dept. of Health and  
Social Services

Date:

2-2-82

THE LEGISLATURE OF THE STATE OF ALASKA  
TWELFTH LEGISLATURE

FISCAL NOTE

I. REQUEST

Bill/Resolution No. HB 112  
Title "An Act authorizing an advisory vote by voters raising age to 21."  
Requested by \_\_\_\_\_ Date \_\_\_\_\_

II. FISCAL DETAIL

Agency Affected Health & Social Services  
Program Category Affected Alcoholism/Drug Abuse  
BRU, Program, Or Subprogram(s) Affected \_\_\_\_\_  
(Note: If more than one budget component is affected, separate line-item amounts and funding for each component in the analysis section.)

EXPENDITURES (Thousands of Dollars)

	FY 82	FY 83	FY 84	FY 85	FY 86	FY 87
100 PERSONAL SERVICES						
200 TRAVEL						
300 CONTRACTUAL						
400 COMMODITIES						
500 EQUIPMENT						
600 LAND & STRUCTURES						
700 GRANTS, CLAIMS, ETC.						
<b>TOTAL</b>	-0-	-0-	-0-	-0-	-0-	-0-

FUNDING (Thousands of Dollars)

GENERAL FUND						
FEDERAL FUNDS						
OTHER (Specify Source)						

POSITIONS -0- -0- -0- -0- -0- -0-

FULL TIME						
PART TIME						
TEMPORARY						
	-0-	-0-	-0-	-0-	-0-	-0-

III. ANALYSIS (See Fiscal Note Preparation Instruction, Section III)

*Robert L. Cole*

IV. DATE January 27, 1982 PREPARED BY Robert L. Cole  
AGENC.: Alcoholism/Drug Abuse  
Original: Legislative Finance PHONE: 86-6201  
cc: Budget and Management  
Prime Sponsor (First Legislator Named)  
33-001 (Rev. 12/81)

*JCC*

## CROSSROADS

SECTION  
B

## Teen drinking:

by Clark Brooks  
Times Writer

When ghetto youths started passing joints to their middle-classed counterparts in the late '60s, the government decided to do something about the country's drug problem.

What was needed, experts figured, was another scare campaign, something to update the theme of "Reefer Madness," the 1930s film about a crazed marijuana addict whose only joy in life aside from puffing funny cigarettes was luring young people to his house and hooking them on the weed with roots in hell.

But too many youths had already learned about drugs first-hand. They didn't swallow stories that LSD users always leaped out of the nearest second-story window or that everyone who smoked grass wound up shooting heroin.

While the so-called drug-education programs had little effect on the kids, they so scared the parents that many were relieved if their children just used alcohol. That, at least, was something mom and dad could understand. Or so they thought.

But alcohol, drug-abuse counselors say, is as volatile as any other chemical concoction. It affects people, especially young people, in different ways.

"What teen-agers develop," says Karen Burner, public information coordinator for the Alaska Council on Prevention of Alcohol and Drug Abuse, "is something called accelerated alcoholism. It takes an adult anywhere from one to 19 years to become an alcoholic. But with their bodies not being mature, it takes teenagers one to 18 MONTHS."

This is not, to be sure, meant to support the '60s cliché, "You lose with booze, but with dope there's hope." It's meant instead to show that alcohol can be as harmful as illegal drugs.

Ninety Alaskans died in 80 fatal vehicle accidents last year, according to the State Highway Safety Planning Agency. At least one of the drivers was drunk in 56 of those

pot and some are on a combination of the two. I think the drinking is a bigger problem than the kids smoking pot. We get a lot of cases where we find kids between the age of 12 and 17 just passed out on the road."

Warner said he wasn't sure how many kids use harder drugs. Users, he said, are hard to catch. However, he did estimate that 97 percent of the juvenile drug cases are for marijuana.

"It's not uncommon for somebody arrested for driving while intoxicated to also have marijuana on him," says Anchorage district attorney Larry Weeks. "But unless you find it on them, you can't tell if it's in their system. As for alcohol, probably 75 percent of the stuff we get in with people under 21, they're under the influence of alcohol when committing it."

The recent, well-publicized hockey-stick murder, for example, occurred after 18-year-old Rick Van Cleve had consumed malt liquor, beer and rum, according to friends who had been with him the night of the killing.

Van Cleve, convicted of murder in June, last year repeatedly beat 40-year-old Mike Hiratsuka with a hockey stick. The attack was provoked, Van Cleve said at the time, by name-calling from natives on Fourth Avenue.

The National Institute on Alcohol Abuse and Alcoholism estimates there are 3.3 million problem drinkers — kids who get into trouble with teachers or the police as a result of drinking — among the country's junior high and high school students.

"Some parents still think alcohol is better for their kids than other drugs," says Mike Dunham, a counselor for Akela House, a local drug-treatment center. "That's just not true. If a parent is using alcohol, they'll probably feel more comfortable if their kids are using it, too, instead of something they're not familiar with even if it's just as harmful and addictive."

If overall national drinking statistics are any indication, Alaska's teen-age drinking problem is worse than in most states. The 49th state ranks first in per capita resident drinking, according to the State Divi-

to get out of it."

Perhaps the most widely discussed measure to mitigate Alaska's teen-age drinking problem is raising the drinking age from 19 to 21. Between 1970 and 1975, some 26 states, including Alaska, lowered their drinking age to 18 or 19 in the wake of the 26th Amendment which allowed 18 year olds to vote. More than a third of those states have since gone back to 21, primarily because of an increase in drunk-driving accidents.

A bill to raise the drinking age was introduced in Alaska's last legislative session. When that bill died in the House, it was revised to authorize only an advisory vote. That bill also failed.

Opponents of the bill saw it as a freedom issue. If the government can take away some rights, the argument went, it can revoke other rights. Another argument contended that if a person is old enough to fight and die for his country, he's old enough to drink.

"I'll probably try to just go ahead and pass a bill where no one can be sold anything but 3.2 beer if they're under 21," says Sen. Brad Bradley, author of the original bill. "If I can't pass that, I might try an advisory vote again. Nobody should want to deprive the public of making a choice."

A recent poll sponsored by The Anchorage Times and conducted by Dittman Research Corp. showed that the majority of Alaskans favor raising the drinking age. The statewide poll, in which Dittman interviewed 419 randomly selected people in 47 Alaska communities, found that 55 percent wanted the drinking age raised to 21.

Raising the age would make a difference, Goldston says. "Some young people who are marginal, who don't know whether they want to drink or not, won't if it's against the law. My personal experience was that the two years between 19 and 21 made a difference. Instead of borrowing money from their parents to drink and party, people over 21 have to make their own money to do it."

"The drinking age definitely should be raised," says juvenile court intake officer Warner. "There

*The younger they are,  
the faster they fall*



wrecks. That's 20 percent alcohol-related, 20 percent above the national average.

Youths between the ages of 15 and 18 were behind the wheel in 13 of last year's fatal accidents. Ten of them were drunk. That age group represents a mere 3.4 percent of Alaska motorists yet accounts for 11.3 percent of all alcohol-related accidents.

Teen-agers dying on the highway is nothing new, of course. It was 10 years ago that three 17-year-old East High School cheerleaders died in one of the worst car crashes in Anchorage's history. A fourth youth also died in the accident and several others were injured.

Cheryl Iverson, Chris McDannel and Gloria Buenafe were killed when a car driven by 19-year-old James Lee Gullard slammed into them head-on. A passenger in Gullard's car, 16-year-old Jack Cremin, also was killed. Gullard, who suffered multiple leg fractures and head lacerations, was charged with driving while intoxicated.

ASIDE FROM being a highway killer, alcohol is the leading cause of crime among Alaska's youth, according to Anchorage juvenile court intake officer Jay Warner.

"I'd say at least 70 percent of the crimes of violence or robbery are committed by kids who are under the influence of alcohol," Warner says. "Some are drunk, some are

drunk on alcoholism.

"The fact that there are more adults here who have problems is one of the reasons more kids drink," says Rich Tolman, clinical director of Open-Door Clinic, an Anchorage drug-treatment center for people 12 to 18 years old. "But there are a lot of other reasons. All you gotta do is look around. Look at the movies that appeal to kids. And the records. They're getting lots of pro-drug messages from movies and records. Right now it's the norm for kids to be drinking and smoking marijuana at least a little."

Experts say kids also drink because they're bored, pressured by peers and need an escape from problems. But instead of escaping, what drinkers end up with, of course, are more problems.

"Aside from killing themselves on the highways and committing crimes," Tolman says, "they get emotionally ripped, too. Even if they survive adolescence without looking like they have a severe problem, they've started a career of alcohol and drug abuse."

"KIDS," SA's local alcoholism counselor Tom Waldston, "tend to have a more difficult time getting off alcohol after they start. They haven't been involved with it long enough to see that it can be detrimental both physically and emotionally. And the younger somebody gets into drinking, the more difficult it is

may not be much difference between 19 and 21 but there's a substantial difference in a 17-year-old passing for 19 than 21.

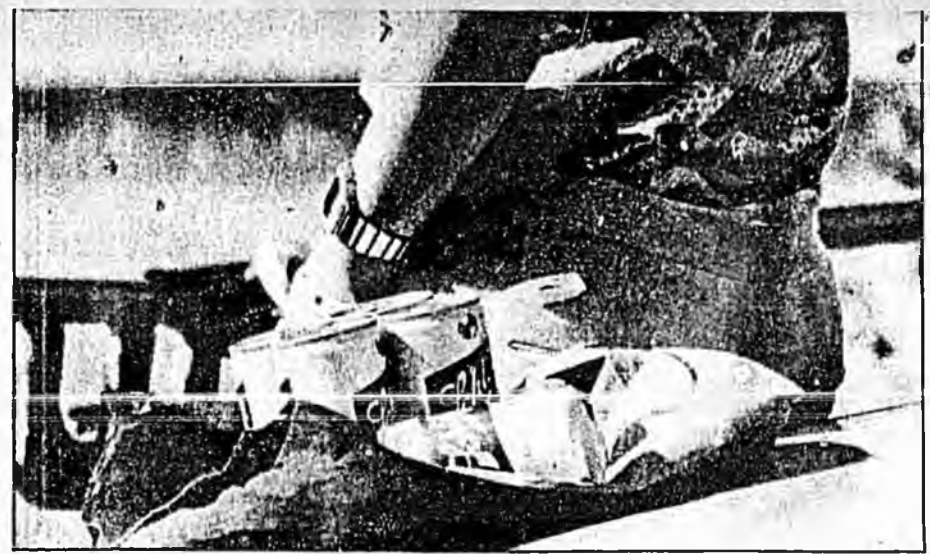
Most experts agree that while raising the drinking age to 21 would be of some help, it would merely be one of many steps that need to be taken.

"Nobody is going to find startling effects as a result of raising the drinking age," says Dr. Dennis Kelso, director of Altam Associates, a consulting firm that researches alcohol-related matters. "The most important step is to increase the relative price of alcohol — relative in relation to average personal disposable income and the consumer price index."

Societies which have the fewest problems with alcohol, Kelso says, are the ones with the most controls and limitations on drinking. These include higher drinking age, higher price, limits on advertising, shorter hours and fewer retail outlets.

THE TEEN-AGERS themselves appear to be against raising the age. Some feel it's not fair to the responsible young drinkers. Others don't think the increase would affect those it's intended to harmess.

"It should stay at 19," says Mike Hazlewood, a 19-year-old Anchorage Community College swimming instructor. "They're drafting us, why shouldn't we be able to enjoy privileges, too?"



"They should leave it at 19," says 19-year-old sales clerk Tina Rowell. "Older people abuse alcohol, too. So what do you do, raise the age to 92?"

Although Alaska's youth have had a staggering drinking problem for years, state leaders are only beginning to do something about it. The Open Door Clinic, an outpatient facility

for drug abusers under age 18, is less than a year old. Akeela House, which has a resident program for adults and outpatient care for youths, began helping the latter last July.

Treatment centers are essential, but counselors say prevention programs are needed as well. Some

steps finally are being taken toward prevention.

The state legislature, for example, upped its allocation to the governor's council on alcohol and drug abuse from \$3.5 million to \$13 million. The legislature, according to Bob Cole, coordinator of the state office of alcohol and drug abuse, finally has realized that it costs more to cure people than to educate them.

Alaska also is starting a program in elementary and high schools to teach students how to avoid the pitfalls of alcohol. Called Here's Looking at You, the four-part program deals with developing a positive self-image, decision-making skills, coping skills and provides information about alcohol and other drugs.

"One thing we know for sure about young people and drinking," Burner says, "is that they're going to have to make decisions about whether or not they want to drink or use drugs. So they need good decision-making skills. We feel optimistic that in 10 years there will be a reduction of alcohol consumption because of Here's Looking at You."

Such programs are a start, but many believe that much more is needed. "We need a program that will appeal to kids in a lot of different ways," Tolman says. "We need recreation-based programs and more recreational facilities in town. We're behind other places in terms of our treatment facilities. With all the money we have in Alaska, there's no excuse for us not to have top-notch programs."

"What we need," Burner says, "is to develop a public awareness of what's happening and how serious the problem is. Kids today don't use just alcohol or drugs, they use both in concert. When I think about what that's doing to them, it scares me to death."

## It's easy to get into, tough to get out of

Ken is only 18, but he's been using alcohol for eight years.

He's being treated at Akeela House, a local drug-abuse center. He's progressing well, but isn't sure if he can keep the bottle corked after he's released.

Ken began drinking to get the courage to go to school. He has dyslexia, a learning disability which causes transposition of written letters and words. The other kids teased him because he read poorly.

"I just got a bottle out of my mom's cupboard," he says, "poured some in a jar and sat out in the cold and drank. After a while all I was doing was getting s---faced and going to school."

A year later, he began smoking grass. The booze continued to flow. By the time Ken reached the sixth grade, he had a lot of company. Half of the 200 students in his Kenai school, he says, were either drinking or smoking grass, mostly drinking.

"Everybody thought that since booze was accepted it must be good," he says. "With weed, you always hid and did it with just a friend or two. With booze a lot of kids would sit around and get drunk."

Next came LSD and amphetam-

ines, which he washed down with alcohol.

"I did acid heavily for a couple of years," he says, "mostly on weekends. I only did it before school about eight times a semester. I remember going to school on two hits of acid. I had a good time but I didn't learn much. At the time I thought it was really right on."

Meanwhile, Ken had been breaking into houses in Kenai, not to get money for alcohol or other drugs, but just for something to do after drinking. When he was 15, he got caught stealing a car.

While on probation, Ken got busted for driving a stolen dune buggy while intoxicated. He was sent to McLaughlin Youth Center, but they decided to give him another chance.

By this time, some of Ken's friends started dying off. One, driving while drunk, was killed in a head-on car crash. A couple of others died in a snow-machine accident. They, too, had been drinking. Ken had planned to accompany them the night of the accident but had stayed home at the request of his mother.

Ken continued to drink and take drugs. He said he merely tried to

drive less frequently while intoxicated.

"I didn't think I had a problem then," he says. "And I was getting pretty sneaky. I wasn't supposed to be drinking or doing drugs while on probation. They were giving me my urine analysis on Friday, so I'd party all weekend and hope everything got washed out by Friday."

But it turned out that the urine analyses weren't always on Friday. His probation officer called him in one day to arrest him. They had found cocaine in his urine.

"My P.O. didn't tell me they were going to arrest me," he says. "I got loaded on the way down and brought another joint to smoke on the way home. So they busted me for that, too."

Ken served 30 days in McLaughlin, kept his nose clean, and was put back on probation. He got a job and was determined not to drink or take any drugs.

"It lasted two weeks," he says. "I was living with my dad. I didn't like that because he was always telling me what I was doing wrong with a bottle of booze in his hand."

So two months ago he moved out of the house, which he wasn't sup-

posed to do until he was 19. The authorities decided to send him back to McLaughlin.

"I told them it wouldn't do me any good," he says. "They'd just kick me out in the streets without any money and I'd go back to drinking."

He had been an outpatient at Akeela House and had reached age 18, the minimum age to become a resident there. He told his probation officer that he thought he could benefit from the program, and she agreed to send him there.

Akeela house has 25 residents and 12 counselors. Thirty-seven counselors if you count the residents.

"In this place everybody knows what everybody's done and they keep pushing it in your face," Ken says. "You gotta take it or go."

Counseling is done in groups of two or three, sometimes with staff therapists, sometimes just with residents. The residents also do cleaning and other chores. Ken is the town crier. He announces meals and special events.

"I can't get off on all the functions we do here," he says. "But it's done me a lot of good already. It's made me see the way I act out there.

It's letting me get a stronger hold on myself."

At his current rate of progress, Ken will be ready to leave Akeela House in about a year, counselor Mike Dunham says. When he leaves, Ken intends to learn body and fender work at a technical school.

"I feel good not drinking or doing drugs," he says. "But when I get out of this program I can't honestly say that I'll never touch booze or pot. But if I do, I will put a stronger hold on what I do. I've got to."

He ran the fingers of both hands through his medium-length blond hair and leaned back on the couch.

"You always think it'll never happen to you," he said. "You always think you can handle it. But believe me, if you keep drinking and doing drugs something will come down. I always thought I could outsmart the police and the schools. But you can't. Tell the kids out there to just think about what they're doing. Nobody can tell them anything. They've gotta run it through their own heads."

# Alcohol health and research World

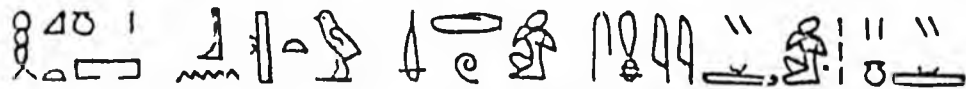
national institute on alcohol abuse and alcoholism

volume four, number two  
winter 1979/80

## ABC Laws



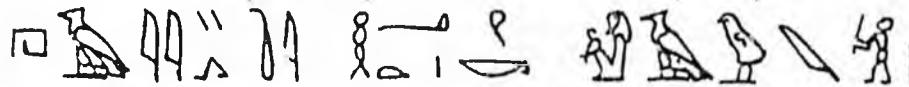
Make not thyself helpless in drinking in the



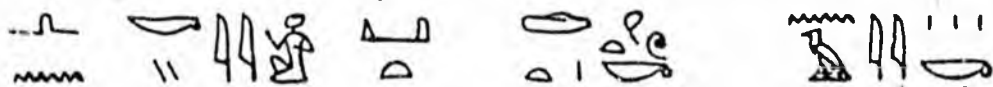
beer shop. For will not the words of thy report repeated



slip out from thy mouth without thy knowing that thou hast uttered them?



Falling down thy limbs will be broken, and



no one will give thee a hand to help thee up as for thy



companions in the swilling of beer, they will get up



and say, "Outside with this drunkard."

u.s. department of health, education, and welfare

public health service-alcohol, drug abuse, and mental health administration

DRAFT

---

The Above Sponsor is duly  
authorized to circulate Petition No. \_\_\_\_\_

INITIATIVE PETITION

ENTITLED "A BILL RAISING THE LEGAL AGE FOR PURCHASE AND  
CONSUMPTION OF ALCOHOLIC BEVERAGES BACK UP TO 21 YEARS."

PROPOSITION

This initiative would amend the provisions of Title 4 of the Alaska Statutes, and all other appropriate references in Alaska Law to raise the legal age at which persons may purchase or consume alcoholic beverages from 19 years back up to 21 years.

WARNING

" A PERSON WHO SIGNS A NAME OTHER THAN HIS OWN ON THE PETITION, OR WHO KNOWINGLY SIGNS HIS NAME MORE THAN ONCE FOR THE SAME PROPOSITION AT ONE ELECTION, OR WHO SIGNS THE PETITION KNOWING HE OR SHE IS NOT A QUALIFIED VOTER, UPON CONVICTION IS PUNISHABLE BY A FINE OF NOT MORE THAN \$1,000 OR BY IMPRISONMENT FOR MORE THAN ONE YEAR, OR BOTH. (AS 15.45.100)"

(See next page for text of bill.)

DRAFT

AN INITIATIVE

For an act relating to raising the legal age for purchase and consumption of alcoholic beverages from 19 back upwards to 21, and providing for an effective date.

BE IT ENACTED BY THE PEOPLE OF THE STATE OF ALASKA:

AS 04, and all other statutes relating to the sale purchase and consumption of alcoholic beverages are ammended so that all references to the age of 19 are changed to the age of 21

and

EFFECTIVE DATE

Fourth Special Report to the U.S. Congress on  
**Alcohol and Health**  
from the Secretary of Health and Human Services  
January 1981

U.S. Department of Health and Human Services  
Public Health Service  
Alcohol, Drug Abuse, and Mental Health Administration

National Institute on Alcohol Abuse and Alcoholism

*youth alcohol -  
other than auto accidents*

## Foreword

Alcoholism and problem drinking are among the most serious public health problems in the country today. In addition to their economic impact, they continue to have ~~serious personal and social consequences.~~ The need for national concern in alleviating the illness of our alcoholics and in helping problem drinkers is underscored by the magnitude of these consequences. Alcohol-related accidents result in tens of thousands of injuries and deaths. ~~Physical, psychological, and social disruptions are experienced by large numbers of American teenagers as a result of destructive patterns of drinking.~~ Thousands of children are born with abnormalities due to maternal drinking during pregnancy. Many children of alcoholic parents suffer psychological and behavioral disorders. In addition, problem drinking creates further difficulties for those population groups already suffering from years of neglect and discrimination.

This report to the Congress demonstrates the significant progress to control and treat alcoholism and alcohol abuse that has been made through the Department of Health and Human Services' emphasis on alcohol-related problems. It provides a new base of information on which to build future efforts. To those who work in the field and to those millions who know the ravages of this illness first-hand, the *Fourth Special Report on Alcohol and Health* should prove a source of encouragement. I am pleased to present it to the Congress and to the Nation.

Patricia Roberts Harris  
Secretary of Health and Human Services

January, 1981

## Preface

Among the many problems that diminish the strength and well-being of the American people, alcohol-related problems are most salient. With significant linkages to suicide, homicide, accidental death and injury, chronic disease, family distress, and lowered productivity, alcoholism and problem drinking invade virtually every important aspect of reality. Personal tragedy, human suffering, and social burden follow in the wake of these problems with alarming consistency.

Fortunately, as this *Fourth Special Report on Alcohol and Health* gives evidence, substantial progress is being made in understanding the disease of alcoholism and in coping with the myriad of dysfunctional personal and social behaviors associated with problem drinking. A comprehensive alcoholism treatment system now exists when, just a decade ago, a systematic network of treatment services could only be imagined. Prevention programs addressed to alcohol-related problems have been conceived, designed, and started. In laboratories throughout the Nation, distinguished scientists are turning their attentions to the biological, psychological, and sociocultural factors that contribute to alcoholism and problem drinking. In the workplace and on the Nation's highways, important programs that increase the likelihood of early identification and intervention are now in place.

Recently, as Surgeon General of the United States, I published *Healthy People: The Surgeon General's Report on Health Promotion and Disease Prevention*. In that report, threats to health were identified, discussed, and analyzed. The important concepts of health promotion and disease prevention were presented as major approaches to achieving significant reductions in these various threats to the health and well-being of the American people. *Healthy People* referred to destructive drinking practices as a major risk factor; our new knowledge suggests that these practices may constitute a preeminent risk factor. The *Fourth Special Report on Alcohol and Health* underscores these prior convictions. It presents the conditions under which drinking becomes a risk to health, the range of adverse consequences that may be incurred, and the measures that are being taken to diminish the risk.

As did the three documents that preceded it, this fourth report on new knowledge concerning the relationships between alcohol and health challenges some of our previously held beliefs about alcohol-related problems, substantiates others, and encourages us to search for further insights and understandings.

Julius B. Richmond, M.D.  
Assistant Secretary for Health and  
Surgeon General

## Introduction

The National Institute on Alcohol Abuse and Alcoholism was established in 1971 because alcoholism in our society had become increasingly recognized as both a debilitating disease and a major public health problem in need of a significant Federal response. It is appropriate that we mark this 10-year anniversary in the life of the Institute by reflecting on the accomplishments of the past decade and on the challenges of the next.

There have been a number of specific advances since 1971, but perhaps the most significant achievement is the greater maturity that now guides this public health effort. This is apparent in the greater depth and breadth of understanding of those within the field, and in a more sophisticated understanding of alcoholism by the public. This maturity has brought us a deepened appreciation of the complexity of the disease, and has enabled us to discard many myths that once affected our responses to it. The veil of shame that in the past surrounded alcoholism is being lifted, allowing us to see it as a treatable disease and not as a failure of character. We now recognize that alcoholism is a multidimensional disease that cannot be simply defined or understood. And, like all diseases, it can strike the unsuspecting, reaching into all classes, races, and nationalities

We now know that alcoholism involves an interplay of biological, behavioral, and cultural components within the individuals who are afflicted. We have come to understand that alcoholism involves biological factors, either as etiological indicators or as biomedical consequences, and that psychological and sociocultural factors enter in as well. The interaction of these components, varying as they do from individual to individual, further deepens the complexity of this disease and makes it quite unlike any other.

Our experience in this past decade has also made us acutely aware of the broad impact of problem drinking on our society, so much so that the litany of the damage done has become familiar to us all. Establishing a consensus on precise numbers is difficult, but there is no doubt that alcohol problems cost this country billions of dollars each year. We pay this cost in lost productivity in the workplace, in health and medical care expenses, in deaths and injuries from highway accidents, violent crimes, and fires. We also pay in ways that cannot be measured by cost accounting: in broken families, abused children, ruined careers, unrealized ambitions, in lives cut short. The ultimate cost to our Nation, reckoned in personal tragedies and social burdens, is incalculable.

Surveys consistently find that approximately 10 percent of adult Americans who drink are either alcoholics or experience problems with their drinking. ~~Alcohol problems also reach into our schools, jeopardizing the futures of thousands of young people and causing their parents deep concern and anxiety.~~ Ten percent of all deaths in this country are alcohol related, and many of them are caused when young people drink and drive.

More sophisticated analyses of how alcoholism and excessive drinking affect the human body have increased our understanding of their vast range of indirect health consequences. Alcohol appears to be involved in cancer, heart disease, and a number of serious gastrointestinal and neurological disorders. Its sweep is wide and its damage great.

## Highlights

### 1—Patterns of Alcohol Consumption

- During the 1970s, the Nation's apparent consumption of ethanol continued to rise, but the rate of increase slowed considerably. By 1978, apparent consumption had risen to more than 2.7 gallons per year of ethanol per person 14 years of age and older.
- Beer accounts for 49 percent of the ethanol consumed by Americans; wine accounts for 12 percent; and distilled spirits for 39 percent.
- In 1979, self-reported consumption for U.S. adults showed no dramatic changes from previous years. Approximately one-third of the adult population continued to report abstinence, one-third reported light drinking, and one-third reported either moderate (24 percent) or heavier (9 percent) drinking.
- In the heavier drinking category, males (14 percent) outnumber females (4 percent). While 25 percent of males reported abstaining from alcohol, 40 percent of females reported abstaining.
- Heavier drinking appears to peak at age 21–34 for males (19 percent), at age 35–49 for females (8 percent), and to decline thereafter for both sexes.
- Hispanic groups of both sexes, but especially males, reported relatively high rates of heavier drinking.
- Blacks of both sexes reported relatively high rates of abstinence. However, among black adults who drink, the proportions of self-reported heavier drinkers are similar to those for most other groups.
- ~~While the frequency and quantity of adolescent drinking does not appear to have changed much since the 1974 national survey, the proportion of 10th–12th graders who reported ever having consumed alcohol is very high—87 percent.~~
- ~~In terms of volume of drinking, in the year prior to the 1978 survey, 25 percent of 10th–12th graders reported abstinence, 7.6 percent reported infrequent drinking, and 18.8 percent reported light drinking. Heavier drinkers constituted approximately 15 percent of the sample surveyed.~~
- ~~In the 1978 survey, a substantial number of youths reported drinking fairly large amounts of alcohol by age 15. Heavier and moderate/heavier drinking appears to increase to age 17 and then level off.~~
- Larger numbers of adolescent females reported abstinence while larger numbers of adolescent males reported heavier drinking.
- With regard to trends in self-reported consumption, neither adults nor youths in the 10th–12th grades reported changes in either frequency or quantity of consumption since earlier surveys.

## 2-Drinking Problems: Variations and Prevalence

- Drinking problems are defined in terms of alcohol dependence, adverse effects of consumption, and alcohol consumption. Self-reports of various drinking problems are possible indicators of alcoholism and problem drinking but are not synonymous with them.
- When low criteria were used for classifying responses to a survey as indicating drinking problems, substantial numbers of adult drinkers reported experiencing various alcohol-related problems. Twenty percent of male drinkers and 10 percent of female drinkers reported one or more symptoms of alcohol dependence or loss of control over a 1-year period. Nine percent of male drinkers and 5 percent of female drinkers reported adverse consequences of consumption. Twenty-eight percent of adult male drinkers and 8 percent of adult female drinkers were classified as heavier drinkers.
- ~~Approximately 15 percent of adolescent drinkers reported drinking at least once a week and consuming five or more drinks per drinking occasion. Thirty-one percent of 10th-12th graders reported experiencing drunkenness at least six times a year. Two percent of adolescents reported adverse consequences of consumption two or more times a year.~~
- ~~In terms of alcohol misuse (defined as self-reports of drunkenness at least six times a year or negative consequences two or more times in at least three of five social areas), 31.2 percent of the adolescent sample were classified as alcohol misusers.~~
- More adolescent males reported alcohol misuse than did adolescent females. Increases in alcohol misuse with age were reported by males but not by females. Black and Hispanic adolescent males were substantially lower in alcohol misuse than were white males. Black and Hispanic adolescent females reported the lowest levels of alcohol misuse.
- With regard to trends in drinking problems, comparisons of 1979 national survey data with data from a number of earlier surveys revealed no striking changes—with one exception: Increases in symptomatic drinking are apparent, particularly for males, when 1979 national survey data are compared with survey data gathered in 1967. For youths, comparisons of 1978 national survey data with 1974 national survey data do not reveal significant changes in volume of consumption but do suggest a small, though probably reliable, decrease in adverse social consequences.
- Level of consumption is related substantially to both alcohol dependence and adverse effects. The higher the level of consumption, the greater the probability that a person will experience dependence symptoms and adverse physical and social consequences. Regular heavy drinking appears to be related to both adverse consequences and dependence. Intermittent heavy drinking may result in adverse consequences only.

### **3-Biomedical Consequences of Alcohol Use and Abuse**

- When high criteria were used for classifying responses to a survey as indicating drinking problems, substantial numbers of persons were classified as ~~being at increased risk for alcoholism and problem drinking~~. Fifteen percent of adult male drinkers and 3 percent of adult female drinkers reported consuming 120 or more drinks per month. Five percent of male drinkers and 2 percent of female drinkers reported experiencing three or more symptoms of alcohol dependence. Nine percent of male drinkers and 5 percent of female drinkers reported adverse social consequences of consumption.
- A study reported that approximately 14 percent of U.S. Air Force personnel experience a serious alcohol problem over a period of a year. Approximately 5 percent of U.S. Air Force personnel reported alcohol dependence and an additional 9 percent reported experiencing at least one serious adverse consequence of alcohol consumption.
- On the basis of heavier consumption, approximately 15 percent of 10th-12th graders and 11 percent of 7th-12th graders surveyed were either at substantial risk for developing a drinking problem or were currently problem drinkers.
- Considering all measures of drinking problems and available recent survey data, approximately 10 percent of adult American drinkers are likely to experience either alcoholism or problem drinking at some point in their lives.
- While alcohol-related mortality for several selected causes appears to have remained relatively constant, mortality rates for alcoholics continue to be higher than expected. One recent study reported a mortality rate 2.5 times greater than expected in a group of alcoholics followed over time.
- Cirrhosis mortality has been decreasing since 1973, but this decline has been offset by an increase in other types of alcohol-related mortality, especially highway accidents. For all ages, cirrhosis mortality is nearly twice as high for blacks as for whites. And for urban black males aged 25 to 34 the rates are 10 times as high as for white males of the same age.
- Heart muscle contractility is decreased at blood alcohol levels representing very mild to severe intoxication. Biochemical, microscopic, and submicroscopic changes are seen in the heart muscle cells of heavy drinkers.

4. Job problems (job loss or near loss because of drinking; advice from people in the workplace to cut down; loss of raises, promotions, or better jobs).

#### *Alcohol Consumption Scale.*

The 1979 national survey provided information on consumption on a monthly basis.

#### ***Results for Dimensions of Drinking Problems Using Relatively Lower Data Cutting Points***

A variety of measures and data cutting points were used in the 1979 national survey for different analyses. Separate analyses were conducted using lower data cutting points and higher cutting points (see figure 1 for actual values). The lower cutting points were intended to provide information on the distribution of drinking problems in the general population. These results for lower cutting points, discussed first, cannot be taken as estimates of the prevalence of either problem drinking or alcoholism.

When self-reports of behaviors and characteristics often associated with alcohol dependence were examined, approximately 15 percent of those who were drinkers reported experiencing such problems during the 12 months prior to the survey (see figure 1). Twenty percent of the male drinkers and 10 percent of the female drinkers reported behaviors and characteristics associated with alcohol dependence or loss of control. Nine percent of the male drinkers reported adverse social consequences as

did 5 percent of the female drinkers. With regard to heavier alcohol consumption, 18 percent of the drinkers reported consumption in excess of 60 drinks per month. Twenty-eight percent of the drinkers were heavier drinking males while 8 percent of the drinkers were heavier drinking females.

Figure 1 gives results for drinkers only for low data cutting points on the drinking problems dimensions.

As the results in figure 1 indicate, a substantial minority of drinkers reported having experienced drinking problems in the 12 months prior to the survey. Consistent with most other survey data, males exceeded females on all drinking problems dimensions. They reported more symptoms of alcohol dependence or loss of control, more adverse social consequences, and heavier consumption than did females.

The 1979 national survey data showed clear relationships with regard to age. For both sexes, reports of drinking problems decreased with age, with the highest percentages reported for the 18- to 20-year age group:

As mentioned in chapter 1, the 1979 national survey provided some information on drinking patterns among members of selected minority groups. Self-reports of drinking problems indicated that Hispanic groups of both sexes, but especially males, reported relatively high levels of heavier drinking and of problems associated with drinking. And while blacks of both sexes showed relatively high abstention rates, among blacks who reported drinking, the proportions of heavier drinkers and of drinkers with alcohol-related problems were similar to the proportions for most other groups.

#### ***Drinking Problems Among Adolescents***

Recent studies of the prevalence of drinking among adolescents indicate that ~~alcohol is the most widely used drug among American youth~~ (Abelson et al. 1977; Johnson et al. 1977). The 1978 national survey of 10th-12th graders discussed in chapter 1 led to the same conclusion but provided further information on drinking problems (Rachal et al. in press).

In the 1978 national survey, drinking problems among adolescents were defined in terms of two dimensions: alcohol consumption and adverse social consequences.<sup>2</sup> Alcohol consumption was measured by two methods. In the first method, a volume of drinking index was derived from questions concerning frequency and quantity consumed on a typical drinking occasion. By this method, 14.8 percent of the sample reported themselves to be heavier drinkers.<sup>2</sup>

The second method employed by Rachal et al. (in press) to estimate alcohol consumption was self-reported frequency of drunkenness. Respondents were asked, "During the last year, about how many times have you gotten drunk or very, very high?" Approximately 31 percent of 10th-12th graders reported drunkenness at least six times in the year prior to the survey.

<sup>2</sup> Heavier drinkers were defined as those who drank at least once a week and five or more drinks per drinking occasion. A drink was equivalent to 12 fluid ounces of beer, 4 fluid ounces of wine, or 1 fluid ounce of distilled spirits.

Adverse social consequences were concerned with self-reports in the following five areas:

1. Trouble with teachers or principal because of drinking;
2. Difficulties with friends because of drinking;
3. Driving after having had a good bit to drink;
4. Criticism of respondent's drinking by a date;
5. Trouble with the police because of drinking.

Two percent of the sample reported negative consequences two or more times in the year prior to the survey.

TABLE 1  
Percentages of 10th-12th Graders Classified as Misusers Due to Drunkenness, Adverse Social Consequences, or Both

Misuser Criteria	Percentage
Drunkenness	93.3
Negative consequences	1.2
Drunkenness and adverse social consequences (N)	5.5 (1,396)

SOURCE: Rachal et al. (in press).

Rachal et al. (in press) combined frequency of drunkenness with adverse social consequences in order to develop an index of alcohol misuse.<sup>3</sup> When "alcohol misuse" was defined as drunkenness at least six times in the past year, or negative consequences two or more times in the past year in at least three of the five social areas, 31.2 percent of the sample were categorized as "alcohol misusers." However as the data in table 1 show, the alcohol misuser category is accounted for largely by self-reported drunkenness.

In general, the 1978 national survey data for 10th-12th graders indicated that more males (37.8 percent) than females (25.5 percent) reported alcohol misuse.

Increases in alcohol misuse with age were reported for males but not for females. Black and Hispanic males were ranked substantially lower in self-reported misuse compared with white males (and others). Black and Hispanic females showed the lowest levels of self-reported misuse. Except for females of lower socioeconomic status who were relatively low in self-reported misuse, no substantial socioeconomic status relationships were apparent (Rachal et al. in press).

<sup>3</sup> While alcohol misuse as defined here is considered one indicator of a drinking problem, it must be interpreted with caution since self-reported "drunkenness" is to some extent arbitrary and subjective. Alcohol misuse is not synonymous with the term "drinking problem" and "alcohol misuser" is not synonymous with the term "problem drinker."

### **Criteria for Assessing Problem Drinking Among Adolescents**

In attempting to arrive at meaningful conclusions concerning the extent of problem drinking among adolescents, it is important to note that adolescent drinking and adult drinking cannot be judged from a single set of standards. A given quantity of alcohol or the frequency with which it is consumed is likely to have a differential impact upon individuals at various maturational and developmental levels. Adolescence is a period of much growth and development of cognitive, social, and physical skills. For many adolescents, such skills are only recently established ones. Such skills in adolescents are vulnerable to disruption by quantities of alcohol lower than those necessary to produce similar changes in adults. For example, it has been noted that adolescents become involved in fatal automobile crashes at blood alcohol concentrations significantly lower than those found in adults involved in similar accidents (Carlson 1972; Waller 1972; Zylman 1972).

Adolescence is traditionally construed as a period of much new learning. Not only must recently acquired skills be solidified but changing external circumstances require the continuous acquisition of new cognitive, social, and physical skills. The significance of any pattern of consumption of alcohol must be construed in terms of its potential impact on new skills acquisition and ongoing maturational processes.

In effect, problem drinking among adolescents cannot be assessed by the same criteria used to assess adult alcoholism or problem drinking. Alcohol-related diseases, classical symptoms of alcohol dependence, and many of the adverse consequences that occur in adult alcoholics are reported infrequently in adolescent populations.<sup>5</sup> Moreover, frequency of adolescent drinking may not be as big a problem as quantity consumed on a given occasion (Harford and Mills 1978). For example, only 1.8 percent of 10th–12th graders reported themselves to be daily drinkers (Rachal et al. in press). While frequency of drinking rises gradually with age well into the adult years, by age 16–17 the mean number of drinks consumed on each occasion rises to a total of nearly six drinks for males and more than four drinks for females, and then declines. Given the fact that much adolescent drinking takes place away from home, in or around cars, and prior to driving, this aspect of adolescent drinking is indeed troublesome. Data for 1978 (National Safety Council 1980) indicate that drivers under age 20 were involved in 11,500 crashes with at least one fatality. Also, in 1978 there were 5.6 million reported traffic accidents caused by young drivers (15–20 years old).

<sup>5</sup> This statement does not mean that symptoms of alcoholism are not found among adolescents. While such symptoms are reported infrequently in surveys, adolescents showing symptoms of clinical alcoholism are admitted to treatment. The distribution of these persons in the general population, however, is unknown.

Considerable justification exists for assigning a central role to heavier consumption as an indicator of adolescent problem drinking. Considering heavier consumption alone, and using the definition of heavier consumption developed by Rachal et al. (in press), approximately 15 percent of 10th–12th graders and approximately 11 percent of 7th–12th graders might be classified as problem drinkers on the basis of self-reports. These are the percentages of students reporting a regular consumption pattern of drinking at least once a week and five or more drinks on each drinking occasion.

Among 10th–12th graders, male problem drinkers (20.9 percent) outnumber female problem drinkers (8.9 percent). As for ethnic self-classification, many more whites (12 percent) than Hispanics (4 percent) or blacks (4 percent) are classified as problem drinkers in terms of heavier consumption patterns alone.

It is appropriate to close this discussion of problem drinking among adolescents with a caveat. On any given day, approximately 20 percent of the school population is absent (Rachal et al. in press). It is quite possible that a disproportionate number of problem drinkers are absentees and that, as a consequence, school-based survey data underestimate prevalence.

The effects of having been members of an alcoholic family do not cease when the children marry and leave home. Young adults from alcoholic homes frequently retain adaptive styles and personality characteristics which they had learned in order to survive (Deutsch et al. in press). Children from alcohol-abusing families have been reported to be twice as likely to develop an alcohol problem as children of nonalcoholics (Goodwin et al. 1973).

Among families experiencing alcohol problems, a high rate of divorce is also reported. Studies summarized by Schuckit and Morrissey (1976) indicated a divorce rate of 40 percent. This is significantly higher than for the general population.

#### Youth

Adolescent drinkers list their own homes as the most frequent drinking location, with drinking companions most often being friends or peers, followed by parents or relatives (Rachal et al. in press). Surveys of adolescent drinking patterns indicate that most teenagers are introduced to alcohol at home in the presence of their parents (Davies and Stacey 1972; Maddox and McCall 1964). Some studies show that teenagers whose early use of alcohol occurs with peers rather than with parents may experience more problems with alcohol (Harford and Speigler in press).

The favorite drinking setting among adolescents is outside the home with peers (Rachal et al. in press). Heavier drinking appears to be related to drinking in settings outside the home, with peers, and not with adults. While the prevalence of drinking alone is, in general, low, it is directly related to high levels of drinking (Rachal et al. in press).

Alcohol use among adolescents is also related to peer influence, specifically peer attitudes toward drinking and peer drinking behavior (Rachal et al. in press). A number of studies have analyzed the relationship between use of alcohol by adolescents and use of alcohol by their peers. These studies consistently reveal that adolescent drinking becomes more prevalent, frequent, heavier, or more problem related as the extent of drinking among friends increases (Harford and Speigler in press).

Rachal et al. (in press) found in their survey of adolescent alcohol use that teenagers' drinking is related to their perception of their parents' alcohol use, with abstainers more likely to report having abstaining parents. Further findings indicate that there is consistency between teenagers' drinking and their parents' approval or disapproval of drinking. Fewer abstainers reported parental approval, and more reported parental disapproval, while the situation was almost exactly reversed for heavier drinkers.

Additional correlates fall into the sociocultural realm and include size of community, socioeconomic status, and religious affiliation. In general, adolescents in larger urban communities tend to use alcohol more than those in smaller rural communities and drinking rates in the Northeast and North Central regions are higher than those in the South (Braucht in press; Harford and Speigler in press; Rachal et al. in press). These regional differences have been shown to relate to variations in religious affiliation, ethnicity, and other demographic characteristics of subgroups (Cahalan and Room 1974).

Religious affiliation is consistently related to adolescent alcohol use, with drinking least prevalent among teenagers affiliated with fundamentalist denominations such as Mormons and Baptists and most prevalent among liberal Protestants, Catholics, and Jews. Of the latter three denominations, use is heaviest among Catholic youth and lowest among Jewish teenagers (Rachal et al. in press).

Adolescent problem drinking is associated with several parental, peer group, and other environmental factors. Compared with those who are not problem drinkers, adolescent problem drinkers are more likely to be in an environmental context in which (1) they feel more disagreement between what their parents expect of them and what their friends expect of them; (2) their friends seem to have relatively more influence on them compared with the influence their parents exert; (3) there is less parental

disapproval for their drinking; (4) there are more peers who model problem drinking and other problem behavior for them; (5) there is more peer approval of their drinking; (6) their parents are less involved with them and their lives; (7) their parents are heavier drinkers themselves; and (8) their parents are less positive or affectionate toward them (Braucht in press).

There are also several personality correlates associated with adolescent problem drinking. Relative to nonproblem drinkers, problem drinkers (1) are more tolerant of deviance; (2) attach less importance to religion; (3) are more apt to weigh the positive aspects of drinking more heavily than the negative aspects; (4) place lower personal value on academic achievement; (5) place more value on self-determination and autonomy from parents; and (6) hold lower expectations of achieving academic success. Some studies have found problem drinkers to have more personal problems and to be more alienated (Braucht in press).

Characteristics of heavier and problem adolescent drinkers include pessimism, unhappiness, boredom, aggressiveness, frustration, impulsiveness, distrust, cynicism, irresponsibility, inflexibility, and dissatisfaction (Rachal et al. in press).

Alcohol use among adolescents appears to lead to other problem behavior, with some studies indicating a significant correlation between antisocial or delinquent behavior and adolescent drinking (Braucht in press; Donovan and Jessor 1978; Jessor and Jessor 1975). Heavy drinking has also been linked to precocious sexual behavior, poor school performance, problem behavior in the classroom, problems within the family, number of classes cut, and higher school dropout rates (Braucht in press).

### **Economic Costs**

Assessment of the economic costs that alcoholism and alcohol use impose upon society is limited by a lack of definitive measurements. Individual researchers, differing in their interpretation and analysis of the data, report varying estimates.

Based on an analysis of six major categories, Berry et al. (1977) estimated that alcoholism and alcohol misuse cost the United States approximately \$43 billion in 1975. Six areas were analyzed: lost production, health care expenditures, motor vehicle accidents, violent crimes, fire losses, and social response (table 1).

ed to  
has been  
criticized as both inflated and conservative. Those who argue that this amount overcompensates support the premise that none of the costs in the six categories analyzed may be attributed unconditionally to alcohol misuse (McGuire 1980). Other researchers contend that the omission of several groups, including males older than 59 and younger than 21, "skid-row" alcoholics, and women in all age brackets, results in serious understatement (Schifrin et al. 1980). A study commissioned by the Alcohol, Drug Abuse, and Mental Health Administration to provide an indepth analysis of alcohol-related costs to society is currently in progress.

**TABLE 1**  
Economic Costs of  
Alcohol Misuse and Alcoholism in  
the United States, 1975

Item	Cost (in Billions)
Lost production	19.64
Health and medical	12.74
Motor vehicle accidents	5.14
Violent crime	2.86
Social responses	1.94
Fire losses	0.43
Total	42.75

SOURCE: Berry et al. (1977).

With regard to age limitations on drinking, only a few relevant evaluative studies have been carried out. An unpublished study by Schmidt showed that a change in drinking age from 21 to 18 in Ontario led to a greater increase in alcohol consumption in licensed premises than was expected. Surveys of college and high school pupils also revealed reported increases in drinking, especially in bars and taverns (Smart and Schmidt 1975). Increased rates of road accidents among young people as a result of lowering the legal drinking age limit have been reported (Schmidt and Kornaczewski 1975; Williams et al. 1974; Douglass et al. 1974). Smart (1977) concluded from his review that good presumptive evidence exists that laws lowering age limits for purchase and consumption of alcohol lead to increased alcohol consumption and alcohol problems among young people. The findings of Whitehead et al. (1975) were similar. Barsby and Marshall (1977), however, found that apparent increases in consumption of distilled spirits after reductions in minimum legal purchasing age were not statistically significant.

Another example comes from the United States, where a campaign that began in 1970 to grant full drinking rights to the newly enfranchised 18- to 20-year-olds resulted in 24 States' reducing the minimum age limit for alcohol consumption from 21 to 18, 19, or 20 by 1973. In 1976, Minnesota raised the age from 18 to 19 years, and since then several States have followed. Two

Canadian Provinces—Ontario and Saskatchewan—have also recently raised the minimum age from 18 to 19 years. This reversal of the trend seems to have been prompted by an increase in alcohol-related driving accidents and fatalities among 18- to 20-year-olds and by a continuous rise in juvenile crime.


In general, then, prevention strategies involved with reducing per capita consumption are continuing to receive research attention. Present results indicate that the questions and issues raised are exceedingly complex, and specific answers are not yet at hand. Smart (1977, 1980), for example, has recently raised questions about the relationship between availability and alcoholism rates. Smart's review suggested that income and urbanism are more closely related to consumption and alcoholism rates than is availability. Methods for reducing per capita consumption that are not only effective but free of undesirable long-term consequences do not appear to exist at the present time.

#### *The Sociocultural Model.*

The sociocultural approach emphasizes the relationship between alcohol problems and the normative patterns of alcohol use within a society (Blane 1976). Problems of alcohol are considered likely to occur when the norms are conflicting. Problematic conflicts are viewed as personal ambivalence and anxiety about drinking that lead to alcohol abuse; juxtaposition of drinking events and social situations that generate social conflict and problematic consequences (Room

1977a); or as norms which in themselves encourage excessive and problem drinking. "Norms" can be interpreted through interactions between informal social controls and more formal regulations (Gusfield 1975). In the sociocultural approach alcohol problems may be viewed at levels ranging from the individual to the community (Cahalan and Room 1974) to the national and international (Frankel and Whitehead 1979). Alcohol problems may be seen as difficulties in their own right; the properties of alcohol combined with the sociocultural milieu generate alcohol problems. Or alcohol problems may be seen as one set of problems in a cluster of other problems that occur in the individual's relationship to immediate and more distant social structures (Jessor and Jessor 1980). Implications for prevention projects are as many and as varied as the many turns of theory.

The relationship between the sociocultural and the distribution of consumption models remains unclear, though attempts are under way to make the two sets of theory compatible (Edwards 1980; Frankel and Whitehead 1979). The alcohol problems field has grown so complex that fresh assessments are under way to try to make sense of the variety of theories and findings for purposes of establishing better prevention policy (National Academy of Sciences 1981). Despite these efforts powerful explanations of the causes of alcohol problems have yet to be found that are widely accepted and clear as to their implications for prevention efforts.



Just how big is this problem? It is estimated in the Alaska State Alcoholism Plan for FY 80 that 13,141 Alaskans between the ages of 20-29, 7,372 Alaskans 30-39, and 5,635 Alaskans 40-49 are persons with alcohol related problems. It is projected that these 26,148 people directly and seriously affect the lives of four to six other people, many of whom are children (there are 177,643 young people) in this state where the median age is 22 years. However, considering the extended family system throughout Alaska, young people are seriously affected by those 2,212 Alaskans 50-59, 1,028 Alaskans 60-69, and 72 Alaskans over 70 who are aunts, uncles and grandparents with alcohol-related problems.

Statewide statistics pertaining to youth with alcohol related problems were unavailable as studies deal with the "legal" drinking age. However, in a study done for NIAAA it was found that:

- Over 1/4 of the nation's teenagers are problem drinkers.
- Fewer than 18% of the nation's 17-year-olds never have taken a drink.
- 1/4 of the 13-year-olds surveyed could be classified as moderate drinkers.
- Nearly half of all the students surveyed (13,000 youths in 450 schools) said they had been drunk within the past year.

A National Council on Alcoholism bulletin reported on a survey done by the Social Advocates for Youth - approximately 3500 4th, 5th, 6th graders:

- 45% of the children considered themselves users of alcohol
- 20% reported drinking alcohol once a month
- 9% stated alcohol use imposed personal problems for them which they felt they would like to discuss with someone
- Lastly, the younger students reported much of their alcohol use occurs within the family and they would be willing to seek counsel with their parents.

The ALCOHOLISM AND ALCOHOL EDUCATION REPORT from Washington, D.C. reported that Michigan's Institute for Social Research shows that "Daily drinking among high school seniors in the U.S. jumped 20% between 1978 and 1979, to 6.9 percent of the class of '79 from 5.7 percent of the 1978 seniors, according to a national study which only last year reported a decrease in the daily drinking habits of 12th graders."

And it is believed that, as with all other national studies, the Alaskan usage would be greater and the problems associated with that, more complex.

The Bachman Study found that when asked how often they had taken five or more drinks in a row during the prior two weeks, 52% of all high school senior males and 41% of females in 1979 reported doing so on at least one occasion, 26% of males and 12% of females reported doing so on three or more occasions. Each of these percentages has risen by 3 or 4% since 1976. This suggests that the problem of alcohol abuse among high school seniors may be increasing dramatically.

2) Alcohol and Youth in Anchorage

The conclusion that alcohol abuse among youth may be stabilizing in numbers, but more intense within the abusing group may be supported by the results of a study given to 8th grade Mat-Su students. Only forty percent (40%) of those surveyed felt that alcohol was a dangerous drug. Excluding the perceived risk of tobacco, alcohol was perceived as having the lowest risk of any drug mentioned. ~~Twenty-two (22) percent of the males and 7% of the females surveyed stated they had used alcohol often and by the 8th grade, only 28% of the males and 33% of the females had never used alcohol. These statistics are similar to those found in an 8th grade classroom in an Anchorage suburban school.~~<sup>8</sup>

Of the juvenile drug counseling caseload at the Open Door Clinic for FY-80, 38 admissions or 45% of the total caseload was attributable to drugs and alcohol. None of those included in the statistical profile were above 18 years of age.<sup>9</sup> Currently, the Municipality's Youth Outpatient Program is operating at 160% of estimated capacity.

In 1979, data derived from the Anchorage area indicated a serious and worsening situation. In the last year, the situation appears to be improving slightly. Listed below are eight arrest categories and one request for service category that have a high degree of relationship with youth and alcohol use. Between 1977 and 1979, these incidents increased by 39.9% while the total increase in police activity increased only 24%. In 1980, these incidents decreased by 10%

<sup>8</sup> Response to Self-Evaluating Questionnaire, Akeela House, Inc., May, 1980.

<sup>9</sup> Open Door Clinic Juvenile Drug Counseling, Demographic Characteristics, FY-80.

while the total increase in police activity increased only 24%. In 1980, these incidents decreased by 10% while the total increase in police activity was 5.9%. This slight turn around could be the result of both the increasing sophistication of the Anchorage programs designed to assist youth under the age of 18 and the growing conservative philosophy in Anchorage and the Nation.

Table 4  
 Juvenile Offenses Involving Alcohol  
 1977-1980, Anchorage

	1977	1979	1980	Percent
Liquor Minors Involved	89	120	104	-13.3%
A & B (Juvenile Arrests)	33	41	43	+ 4.9%
Disorderly Conduct	54	70	48	-31.4%
Drinking in Public	3	5	11	+54.5%
Driving While Intoxicated	6	18	14	-22.2%
Drunk on Roadway	3	5	5	- 0 -
Minor in Possession	29	59	64	+ 7.8%
Minor on Premises	13	11	6	-45.5%
Miscellaneous Liquor Violations	8	4	5	+25.0%
Total	238	333	300	-10.0%
Total Cases-Requests and Arrests	63,096	78,380	83,532	5.9%

Source: 1977, 1979, and 1980 Anchorage Police Department Yearly Report.

The philosophy of the local programs are consistent with the conclusions of a recent article regarding alcohol abuse by adolescents and its prevention. The article stated that problem drinking among teenagers is frequently correlated with involvement in anti-social activities, poor school performance, drug use, problem drinking among family and/or peers, and lack of supervision. Alcohol education has tended to increase knowledge, but not change behavior patterns, and in some cases, has led to increased alcohol use. The author suggests that future prevention strategies be targeted at specifically defined groups of adolescents and that they be concerned with the prevention of problem drinking rather than the prevention of alcohol use. <sup>10</sup>

<sup>10</sup> Hankoff and Schmidt, "Reviews of Studies of Adolescent Drinking Patterns and the Effectiveness of Prevention Measures Used with This Age Group," Public Health Review, Hankoff and Schmidt, 1979.

*Youth - Muni*

Table 27. Arrest Data, by Offense Category and Adult/Juvenile Status, Alaska, 1976-1978.

YEAR	AGE GROUP	OFFENSE CATEGORY					
		DRIVING UNDER THE INFLUENCE		DRUNKENNESS		LIQUOR LAW VIOLATIONS	
		NO.	%	NO.	%	NO.	%
1978	Adult	3195	97.9	567	92.0	1205	57.3
	Juvenile	70	2.1	49	3.0	897	42.7
	TOTAL	3265	100.0	616	100.0	2102	100.0
1977	Adult	3430	97.9	184	98.4	903	49.7
	Juvenile	74	2.1	3	1.6	915	50.3
	TOTAL	3504	100.0	187	100.0	1818	100.0
1976	Adult	2928	98.3	10	71.4	592	48.4
	Juvenile	52	1.7	4	28.6	632	51.6
	TOTAL	2980	100.0	14	100.0	1224	100.0

For adult arrestees, the major alcohol-related offense class was driving under the influence, accounting for roughly 21%-24% of all adult arrests. For juvenile arrestees, the liquor law violation class was the major arrest category, accounting for approximately 12%-15% of all juvenile arrests during this period. See Table 28.

Table 28. Total Arrests, and Alcohol-Related Offenses, by Adult/Juvenile Status, Number and Percent of Total, Alaska, 1976-1978.

ADULTS/ARRESTS BY OFFENSE	1978		1977		1976	
	NO.	%	NO.	%	NO.	%
Total Arrests	14862	100.0	14764	100.0	12435	100.0
Total Alcohol-Related Arrests	4967	33.4	4517	30.6	3530	28.4
Alcohol-Related Arrests:						
DUI	3195	21.5	3430	23.2	2928	23.5
Drunkness	567	3.8	184	1.2	10	0.1
Liquor Law Viol.	1205	8.1	903	6.1	592	4.8
JUVENILES/ARRESTS BY OFFENSE						
Total Arrests	5947	100.0	6031	100.0	5368	100.0
Total Alcohol-Related Arrests	1016	17.1	992	16.4	688	12.8
Alcohol-Related Arrests:						
DUI	70	1.2	74	1.2	52	1.0
Drunkness	49	0.8	3	0.04	4	0.1
Liquor Law Viol.	897	15.1	915	15.2	632	11.8

## alcohol abuse

- the Alaska Council on the Prevention of Alcohol and Drug Abuse estimates there are over 45,000 alcoholics in the State of Alaska
- in a study done in 1979, it was found that almost 30% of all juveniles between 12-17 years old were alcohol and other drug abusers - with alcohol being the drug of choice by far
- "problems with alcohol" is the third leading reason people seek help at local community mental health centers in Alaska
- in a study done in 1979, 12% of Anchorage residents reported they drank "almost all the time."
- Alaskans spent \$280,600,000 on retail alcohol in 1980
- 58% of pedestrian-motor vehicle accidents were alcohol-related
- ~~62-77% of people in the under 25 age group use alcohol to face problems~~
- fetal alcohol syndrome is the third leading cause of birth defects nationally, and is totally preventable

## alcohol-related mortality

- 52% of all fire deaths in Alaska are alcohol-related
  - Alaska's fire fatality rate is twice as high as the national average
- 68% of all drownings are alcohol-related
- in 1976-1979 in Anchorage, the leading causes of death in the age group of 15-44 were:

motor vehicle accidents	- 70% alcohol related
suicide	- 80% alcohol related
homicide	- 64% criminal homicides 40% domestic murders

### SOURCES

State Office of Alcohol and Drug Abuse - Annual Report to the Legislature 1981  
The Alaska State Alcoholism and Drug Abuse Plan - 1981-1983  
Anchorage Health Systems Plan 1981-82

ALCOHOL AND  
PUBLIC POLICY  
Beyond the Shadow  
of Prohibition

c. 1981



training given to employees and the host's concern for patrons' transportation arrangements. Such a reorientation may serve to enhance the preventive effectiveness of dramshop laws. At this time, in the absence of research data, the effectiveness of such laws or variations therein is entirely a matter of anecdote, *a priori* speculation, and common sense argument.

Accidents and violent crime that may result from acute episodes of intoxication in public drinking places are a central concern of on-premise control of alcohol. There is also the question of whether widespread availability of public drinking places increases the total quantity of consumption. It seems reasonable to suppose that increased availability of alcoholic beverages in restaurants, cafeterias in workplaces, sports arenas, theaters, and so forth would have an effect on per-capita consumption; generally speaking, if the practice of drinking is integrated into a wider range of day-to-day customary activities, the quantity of consumption will increase. The question of how many and what types of public places should be permitted to accommodate drinking then becomes in part an issue of public health, albeit one that can neither be readily quantified nor simply resolved. The current trend toward increases in the number and variety of drinking premises deserves attention and thoughtful analysis, for the cumulative effect on drinking practices may be substantial.

#### MINIMUM AGE RESTRICTIONS

While only a small fraction of the United States continues to prohibit the sale of alcoholic beverages, the prohibition of sales to one large segment of the population—youths—is currently mandated by every state. The age thresholds all lie between 18 and 21. As of 1979, 23 states set the minimum age at 18 or 19 years, 3 set the limit at 20, and 24 set the limit at 21 (12 of these, however, allowed beer sales to 18- or 19-year-olds). There was considerable flux in these legal thresholds during the 1970s: between 1970 and 1973, 24 states reduced their minimum drinking ages (Williams et al. 1975), while a number of states have raised the minimum in the last few years. These changes have provided the basis for quasi-experimental analyses of the consequences of varying minimum age restrictions.

Williams et al. (1975) performed a short-term follow-up of minimum age reductions legislated in the early 1970s in Michigan, Wisconsin, and Ontario. Douglass (1979-1980) and his colleagues performed short-term follow-up studies of minimum age reductions in Michigan, Maine, and

R  
V  
st  
(  
ro  
y  
ro  
I  
g  
le  
it  
ig  
e  
s  
t.  
a  
i  
s  
s  
l  
o  
f  
i  
y  
s  
i  
t  
t

REPORT OF THE PANEL

s concern for patrons' transition may serve to enhance the . At this time, in the absence i laws or variations therein is culation, and common sense

result from acute episodes of central concern of on-premise tion of whether widespread uses the total quantity of con- that increased availability of as in workplaces, sports are- in effect on per-capita con- ce of drinking is integrated ry activities, the quantity of of how many and what types accommodate drinking then . albeit one that can neither . The current trend toward nking premises deserves at- imulative effect on drinking

States continues to prohibit bition of sales to one large rrently mandated by every and 21. As of 1979, 23 states et the limit at 20, and 24 set ed beer sales to 18- or 19- hese legal thresholds during tes reduced their minimum number of states have raised changes have provided the he consequences of varying

term follow-up or minimum n Michigan, Wisconsin, and agues performed short-term ns in Michigan, Maine, and

*Regulating the Supply of Alcoholic Beverages*

Vermont and a longer term follow-up for Michigan. These and other studies have focused on a single dimension of concern—drunken driving (Haddon 1979). They found consistent evidence that the age reductions resulted in an increase in the rate of auto crashes and fatalities involving youthful drivers. Williams et al. estimate that during the first year of reduced age in the three jurisdictions they studied, the number of drivers 15-20 years old who were involved in fatal crashes was about 5 percent greater than would be expected in the absence of the change.

Smart (1977a) found that in 25 states in which the drinking age was lowered, beer was the only beverage type showing a discernible increase in consumption. Douglass refined this result in his analysis of the Michigan experience, concluding that only draught beer consumption increased significantly as a result of the minimum age reduction in that state. However, Williams et al. found an increase in youthful auto fatalities in Wisconsin following a reduction in the drinking age for spirits and wine, while beer had remained constant at 18—suggesting that beer is not uniquely responsible for teenage drinking problems.

While the minimum drinking age does have an effect on alcohol consumption by youths, underage youths still drink a great deal. National surveys in the 1970s have consistently shown that over 80 percent of high school seniors have had a first drink before age 18; over one-third of high school students, including half of all students 16-17 years old, reported drinking within the past 30 days (Abelson et al. 1977, Blane and Hewitt 1977a, Johnston et al. 1979). The prohibition on sales to youths thus may reduce availability to them somewhat, but it falls far short of imposing total abstinence on this group.

Minimum age restrictions in this country reflect widely accepted beliefs that drinking tends to be more harmful for youths than for adults and that we cannot trust youths to make good decisions about when, where, and how much they should drink. While the legitimacy of this type of restriction is widely accepted, the question of precisely where the age line should be drawn remains alive in many areas. State and federal laws currently gives 18-year-olds most of the rights and responsibilities associated with adulthood, the right to purchase alcohol being the only major exception. If 18-year-olds are mature enough to vote, seek many elective offices, enter into contractual arrangements, serve in the armed services, and so forth, it would seem logically consistent to also confer the remaining symbol of adulthood, the right to drink, on this group. The response to this argument is that as a group, people aged 16-20 are extraordinarily prone to auto accidents, as well as violent crimes and other forms of socially destructive activity, making it impli-

~~foolish to encourage these tendencies by legalizing drinking for this age group.~~

We do not attempt to resolve this debate, but simply to note that there is reasonable evidence that prohibition for youths does have some effect on their drinking and in particular that the choice of a minimum drinking age has a small but consistently exacerbating effect on the auto accident and fatality rates.

#### CONCLUSION

The common belief that alcohol control measures (government action to regulate the supply of alcohol and drinking premises) are ineffective as prevention instruments is unfounded. This belief has been engendered in part by a misunderstanding of the lessons of the Prohibition experience. There is good evidence from econometric studies that alcohol prices, as affected by excise taxation, can affect consumption levels, and probably the consequent rates of alcohol-related problems. Reductions in the minimum drinking age slightly but consistently increase auto accident involvement by younger drivers. The effects of merchandising practices, outlet density, civil liability for servers, and so forth have not been established with reliability, in part because these control mechanisms are intrinsically very difficult to study. It is possible but as yet hypothetical that the cumulative effect of a number of changes in these areas of regulation has been substantial.

<sup>4</sup>If the concern is centered about lowering youthful traffic accidents, one might think of raising the driving age rather than the drinking age. European countries generally have lower drinking ages and higher driving ages than the United States.



5.95

REGINALD G. SMART

# THE NEW DRINKERS

TEENAGE  
USE AND  
ABUSE  
OF ALCOHOL

SECOND EDITION



same reasons as adults and because they are maturing into adult behavior patterns in all areas.

Research into why young people drink has centred around five general areas:

- (1) subjective studies of reasons for drinking—asking students why they drink;
- (2) peer studies—determining how friendship patterns govern drinking;
- (3) personality studies—determining what personality characteristics are associated with drinking;
- (4) studies of permissiveness and availability—determining whether certain attitudes favoring drinking and having alcohol at home make drinking more likely;
- (5) family studies—investigating how parental and other family influences relate to drinking.

The first four areas will be covered in this chapter; the last, because it has been such a large and well-developed area, requires a separate chapter.

### *Subjective Reasons for Drinking*

Much of the research on why young people drink simply constitutes asking them the reasons as they see them. Although obviously they yield important information, such studies rarely have any validity or reliability established for the answers. Those who say, "I drink because I like the taste," may indeed, but there may be a host of equally important social and psychological reasons. The subjective reasons supply information about one level of analysis but are of limited utility in explaining heavy or abnormal drinking. Studies of personality, family, and peer influence offer another level of analysis.

Numerous studies give similar results when students are asked for the reasons they started to drink. The most important reasons seem to be "curiosity" and "in order to celebrate a special occasion" such as a wedding, anniversary, or birthday. A third reason is that families gave them alcohol to drink. Taken together, these reasons account for most of the subjective reports in studies done in Mississippi, Kansas, and Wisconsin (Bacon and Jones, 1968).

One of the few studies of reasons for drinking in Canada (Cutler and Storm, 1973) asked the simple question, "Why did

you first drink?" About 30% of high school students reported "holiday or special celebration," 32% "curiosity," and 21% because they were "served at home." In all, 83% reported one of these three reasons.

Only 7.3% reported first drinking because they did not want to feel "out of place" or because "friends urged me to." Although the number reporting each reason varies somewhat from study to study, the data indicate that young persons are typically not forced into drinking (at first) by peer pressure or friends. There is a suggestion that parents and families have a considerable control over the first drinking experiences and we will return later to the implications that this has for parents teaching safe drinking habits. There are also suggestions that young people experience mostly the low alcohol beverages, e.g., beer and wine, in family circumstances and that the first drinks of liquor are outside the home with friends.

Naturally, the reasons for current drinking tend to be different from those for starting. The most common reason for current drinking\* is that "I like it" and this was mentioned by about 50% of drinkers in the Maddox and McCall study (1964). About 20% drank "to be with the crowd" and about the same proportion to celebrate a special occasion. Only about 8% said they drank "when they were unhappy." Curiosity, being given drinks by parents, and special occasions were far less important for current drinking than for the first drinking experiences.

A more interesting sidelight in the Maddox and McCall study concerned students' perceived reasons for adult and teenage drinking. The most important reasons given by both groups were sociability, self-expression, and anxiety reduction. Sociability meant the desire to be one of the group, to not be considered different, and to participate in celebrations and family events. Self-expression referred to the need to have pleasurable relaxation and to create a self-conception of being "smart and grown-up." Anxiety reduction meant seeking relief from family, financial, and personal problems.

Teenagers perceived other teenagers' drinking as more often concerned with avoiding being left out and different, and enhancing self-conceptions as "smart and grown-up." It was far less often concerned with pleasurable relaxation and with anxiety.

\*Unfortunately, this question was not asked in the Cutler and Storm study.

knowledge about alcohol seemed not to be important. The most important factors in predicting the frequency of drinking were age, paternal drinking, and friends' drinking. Older students and those whose friends' and fathers' drank more often drank themselves. The most important factors in predicting whether students got drunk or high were the frequency of drinking, drinking away from home, drinking in cars, and drinking amounts that were not known to parents.

The findings from this study suggest that social influences, e.g., from parents' and friends' drinking, have most importance in determining whether a student drinks or not but they have little effect on whether students get drunk or not. The place and extent of drinking and drinking without parental knowledge are more important in determining whether students get drunk. This strongly suggests that parents concerned about drunken behavior should try to find out the places where their adolescents are drinking and how much they drink.

#### *Personality and Developmental Variables*

As noted in the review of research, much of youthful drinking seems to be socially and normatively controlled. Most young people appear to start and continue drinking for social reasons. The nature and extent of drinking seems to be most often influenced by peer pressures, reference groups, and the general family and social contexts. For these reasons it might be expected that personality factors would be relatively unimportant in differentiating drinkers and nondrinkers. Most research on personality has been concerned with identifying *problem* drinkers rather than social drinkers. A few studies have been made but their contribution is not extensive so far because drinkers have not appeared very different from nondrinkers. Several studies have shown that students who start to drink at an early age are more likely to engage in other deviant behaviors as well. For example, a study by Globetti and Windham (1967) showed that high school drinkers and especially problem drinkers had higher deviancy scores than did nondrinkers. "Deviancy" included such things as driving a car without a license, damaging property, stealing, and running away from home.

Other studies have found that drinking *problems* but not drinking are related to alienation. Jessor et al. (1970) showed that alienation—i.e., feelings of social isolation and lack of meaning in daily activities—was related to frequency of drun-

kenness and drinking for personal effects. Wechsler and Thum (1973) found students who drank distilled spirits and had become drunk were alienated from families and more engaged in antisocial activities (e.g., cheating, delinquency). Alienation does not appear to differentiate between drinkers and nondrinkers.

A great deal of interest has been expressed in sex-role conflicts and drinking. Male heavy drinkers and alcoholics have been found to have feminine identifications and yet show masculine behaviors such as cursing, aggressiveness, and independence. Zucker (1968) attempted to determine whether adolescent drinkers and nondrinkers differed on a masculinity-femininity index. He predicted that nondrinkers would show more sexual identity confusion than drinkers. In a society where nearly everyone drinks, abstainers may be "not drinking" because they fear the consequences of drinking. However, Zucker found no difference in sex-role identity between nondrinkers and moderate drinkers. Heavy drinkers were more masculine than nondrinkers, but nondrinkers did not display more sex-role identity confusion.

Jessor et al. (1968) presented a social learning theory of personality as applied to drinking. Briefly, this theory, as applied to college students, postulated that there are two important goals in college life: academic achievement or recognition and interpersonal liking or social affection. Failure to achieve either of these, they speculated, would lead to major frustrations and recourse to other activities, including drinking. Students who had low expectations of attaining academic success and peer liking were expected to be heavier drinkers than those who did not have these expectations. Measurements of expectations of satisfaction for several groups of college students were taken. It was found that the prediction held best for females; low expectations of success and affiliation were correlated with amount and frequency of drinking, frequency of drunkenness, and drinking-related complications. Correlations for men were in the expected directions but not statistically significant. However, both males and females lowest in achievement and affiliation expectations had more drinking complications. A second study showed that drinking had a different function among female students low in expectation of achievement and affiliation. They more often reported motivations to drink when lonely, sad, disappointed with themselves, or when they wanted to forget, create confidence, or feel less shy.

A somewhat more interesting and productive approach has been taken by Jessor and Jessor (1975) in studying the onset of drinking as a developmental event. This study is one of a few longitudinal studies of drinking in adolescents. It reports a study of some 218 students in junior high school who were not drinking in 1969. By 1972, the year of the follow-up, 129, or 59% had begun drinking when they were in senior high school. Four annual measurements were made between 1969 and 1972. The study examined a network of social and personality variables in an attempt to provide explanations for why some young persons began to drink and some did not and why, of those who did drink, some began earlier and some later. In brief, the results showed that abstainers exhibited "what may be termed a pattern of conventionality—a greater value on achievement or successful performance in the school setting, less value on independence relative to achievement, greater intolerance of deviant behavior, greater religiosity, greater involvement with parents and with friends whose outlook is similar to that of the parents, fewer friends who drink and friends who approve less of drinking, and greater involvement with church and grades while less involved in general transgression." The impression conveyed by this study is not very different from that derived from many cross-sectional studies comparing drinkers and abstainers. It paints a picture of adolescent abstainers as rather ambitious, family- and church-centred pillars of the community who would have difficulty escaping the designation of "cautious bores" among their drinking peers. Naturally, as drinking becomes more popular and abstention less popular, those few abstainers left will be defined as deviants.

#### *Studies of Permissiveness and Availability*

People used to think that young people drank because of "lax" conditions around them; this supposedly could be over-indulgent parents, "permissive" society, or anyone in authority who failed to exercise it. Many people think that sterner discipline by parents and teachers might lead to less drinking among young people. People also argue that alcohol is too available to young people because of the permissiveness of society. For the most part, the evidence does not suggest that a majority of young people are undisciplined or careless in their use of alcohol.

There are a few studies about general permissiveness. For

example, Straus's and Bacon's study of college students suggested that there were more drinking problems in colleges that were not tolerant of drinking. Some studies of children from families where parents were abstainers indicated that if they drank, they more likely had drinking problems (Globetti and Chamblin, 1966; Sholtz, 1958).

There are also studies from various countries that show that where restrictions on drinking are severe, drinking problems of a different nature arose. For example, Bruun and Hauge (1963) showed that in Scandinavian countries where there were strict controls on young people's drinking, they tended to drink out of doors and that there was more illicit drinking by underage drinkers than where restrictions were more lax. Other studies in the United States showed that where communities were permissive about alcohol, young people obtained their alcohol illegally from legal merchants. However, in strict communities young people tended to buy their alcoholic beverages from illegal sources such as bootleggers or older persons.

These findings have suggested to people that restrictive systems of control merely force youthful drinking underground or into places where it cannot be seen. However, it seems likely that both drinking and drinking problems are more common in situations of high availability and low restrictions. Smart (1977) studied the relation of students' perceptions of availability and their alcohol and drug use. The study was done among 4,678 students in grades 7 to 13 in Ontario schools. It was found that the ease with which students could get alcoholic beverages was a good predictor of drinking frequency. Where availability was high, students drank more often than when it was not. Perhaps firm conclusions about whether or not regulation should be strict depend on the result we want to achieve. Likely, strict controls reduce the overall amount of young peoples' drinking while leading to other types of problems, i.e., outdoor drinking and purchases from illegal sources.

There are also a few studies in situations where attitudes toward youthful drinking are highly permissive. For example, Globetti et al. (1977) studied high school students who were living on American military bases. Historically, heavy drinking among the military has been tolerated and even encouraged by both low army base prices for drinks and the general norms that associate heavy drinking with manliness. Unfortunately, comparison groups of nonmilitary students were not included.

would appear to be greatly under-represented in treatment facilities. Considering that there were about 145,000 alcoholics in Ontario in 1974 and about 4% are 21 or under, there should have been approximately 5,800 in treatment. So far, no survey has been made of how many young alcoholics are actually in treatment for their alcoholism either in Ontario or elsewhere.

From the studies made to date it seems that youthful alcoholics would rarely fit Jellinek's *beta* type, which is characterized by polyneuropathy, gastritis, and liver cirrhosis. The most common type seems to be *alpha*—continual dependence on alcohol with undisciplined drinking—or the *gamma* type, with physical dependence and loss of control. Cases of liver cirrhosis and polyneuropathy are apparently rare or nonexistent among young alcoholics seen in clinics or hospitals.

### Summary

Drinking problems among young people include drunkenness, alcohol-related accidents, antisocial behavior, and alcoholism. Of these, the first two are the most common and least important. Drunkenness is increasing in some youthful populations as drinking frequencies have increased. Drinking and driving accidents are also increasing in Ontario. However, the majority of serious accidents among young people do not involve alcohol. Whether alcohol contributes directly to such antisocial behavior as delinquency is uncertain. These are some signs that it does not and that the heaviest drinkers among delinquents commit fewer crimes than light drinkers.

The extent of alcoholism or problem drinking among young people is difficult to determine. Most studies have been made of drinking symptoms and complications among college students. The complications include failure to meet obligations, loss of friends, accident or injury, and formal punishment. Signs of problem drinking include blackouts, amnesia, heavy frequent drinking, morning drinking, surreptitious drinking, seeking advice about drinking, etc. Several scales and a variety of methods for counting "problem drinkers" have been used. Estimates of the proportions of problem drinkers in youthful populations vary from 6% to more than 40%. Problem drinking is more common among males, heavy drinkers, Protestants, those who drank before age 12, and those who have a variety of personality problems, e.g., low self-esteem, dependency conflicts, etc. It

should be remembered however, that about half of the males defined as "problem" drinkers in college were not so defined in follow-up studies during adulthood. Females more often keep this designation.

Young alcoholics in treatment facilities have never been very common. They represent only about 4% of all alcoholics. Only a few isolated cases have been described in the literature up until the last few years, although data from several countries suggest that alcoholics coming to treatment facilities are now more often 21 or under than formerly. At present in Ontario, about 4% are 21 or under, whereas in 1964 there was none. Alcoholism in young people is most often the *alpha* or *gamma* type, e.g., continual dependence on alcohol with or without loss of control but few physical symptoms, such as liver cirrhosis.

**TABLE 7** *Number of Times in Past Four Weeks Drinking Made Students High, Drunk, Pass Out, or Ill: Data from Two Orillia High Schools*

	High		Drunk		Pass Out		Ill	
	N	%	N	%	N	%	N	%
None	568	48.0	687	58.1	1,104	93.1	1,311	87.2
Once	186	15.7	198	16.7	60	5.1	124	10.5
Twice	156	13.2	123	10.4	10	.9	18	1.5
3 times	89	7.5	60	5.1	5	.4	3	.2
4 times	77	6.5	46	3.9	0	0	0	0
5 or more times	107	9.1	69	5.8	4	.3	7	.6
Totals	1,183		1,183		1,183		1,183	

reaching epidemic proportions. In fact, no figures are quoted to show that teenage alcoholism is increasing, although figures are given for drinking and drunkenness (Saltman, 1973). These reports are certainly alarmist and intemperate in their overstatement. It is worth examining the evidence for the existence of drinking problems among young people and the trends in these problems.

Naturally, how many "problems" one finds depends greatly upon how a "problem" is defined. We could define alcohol problems as alcoholism of the type usually seen in alcoholism clinics and marked by loss of control over drinking, liver disease, physical dependence, and withdrawal symptoms. From that definition we would arrive at an estimate that few drinking problems exist among young people. On the other hand, a problem could include alcohol-related car crashes, public intoxication, or drinking leading to social complications such as delinquency, school failure, and disturbed family and social relationships. If we accept the latter definition, then the numbers of problem-drinking young people is much greater. Some people would, of course, argue that any drinking among young people constitutes a problem, particularly if they are underage, or drinking without parental consent. Rather than trying to define the frequency and reasons for every conceivable problem, let us concentrate on the most important. From the point of view of their frequency and possible dire consequences these would seem to be: (1) drunkenness; (2) alcohol-related traffic accidents; (3) delinquency or antisocial behavior; and (4) alcoholism. None is unique to young people but they represent a developing concern, and are the reasons why treatment or social controls are required.

#### *Drunkenness*

It is difficult to decide how frequent drunkenness is among high school students. Much seems to depend upon the school, the area chosen for study, and how recently the data have been gathered. An important problem is that many of the earlier studies were done when the legal drinking age was 21 rather than the present 18 or 19. For example, seven American studies of adolescent drinking reviewed by Bacon and Jones (1968) indicate that only 11% to 17% of students had ever been drunk. Only 4% had been drunk in the past six months. However, the