



Assessing the Costs of Excessive Alcohol Consumption in Minnesota: Informing Policy

Kari Gloppen PhD, MPH, Dana Farley MS

Alcohol Policy 10, September 2022

**As required by the Alcohol Policy 19 Conference,
I/we have signed a disclosure statement and note the
following conflict(s) of interest:**

None

Acknowledgements

This presentation is partially supported by the Centers for Disease Control and Prevention of the U.S. Department of Health and Human Services (HHS) as part of a financial assistance award totaling \$166,667. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by CDC/HHS, or the U.S. Government.

Overview

- Why conduct a cost study?
- Methodology & results
- Using the results to inform policy
- Discussion

Why a cost study?



- Acute causes of morbidity and mortality (e.g., alcohol poisoning, traffic crashes)
- Chronic causes (e.g., liver disease, cancer)

Additional costs include injury, violence, disease, crime, property damage, lost productivity

Why a cost study?

- Informs local decision-making with relevant, timely data
 - The impact of excessive drinking
 - The cost-effectiveness of prevention strategies
 - Inform rationale for effective population-level strategies
- National estimates exist, but outdated
 - Sacks & colleagues (2015) national estimate for 2010, and apportioned costs to states

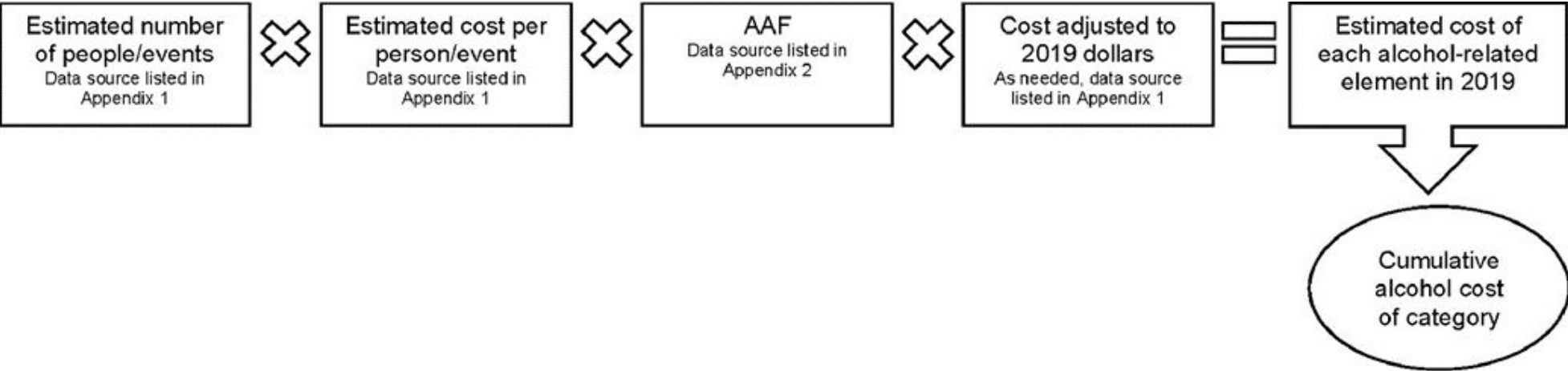
Study Purpose

- Update the estimated human and economic costs of excessive drinking in Minnesota
- Understand whether using state-specific data provided benefits for estimating the economic burden vs. using the national apportionment strategy

Methodology I

- Follows methodology of the Lewin Group report for the 2010 study of 2006 national costs of excessive alcohol
 - Does not include costs for pain or suffering
 - Assesses direct and indirect costs associated with excessive drinking
- Some methodological changes to reflect best available science, and the data available in Minnesota
- Assessed costs for 2019

Methodology II



Methodology III – Costs Assessed by

- Estimated 3 categories of costs: productivity losses, health care, and other effects (e.g., crime, traffic crashes)
- Costs also assessed by:

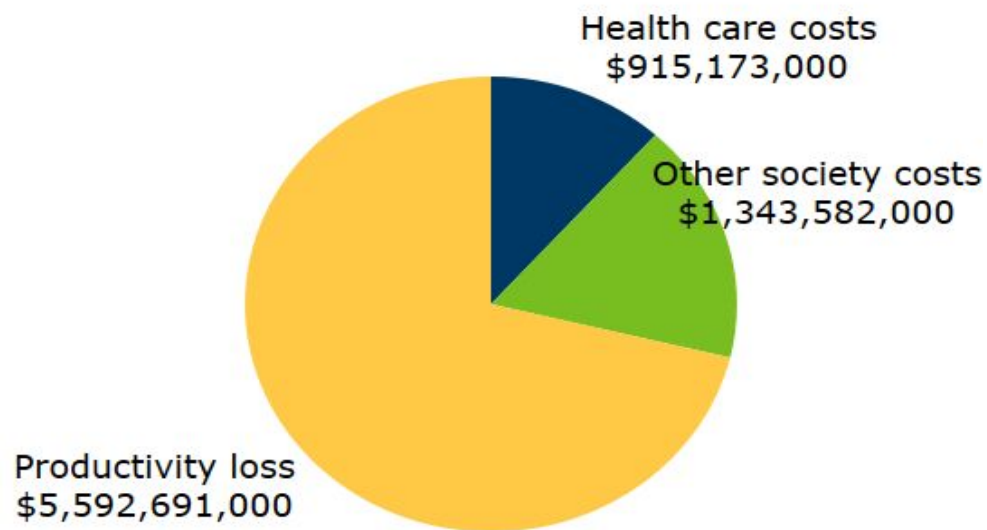
Type of excessive drinking

- binge drinking
- underage drinking
- drinking while pregnant

Who paid for the costs

- Government
- Excessive drinker & family
- Health insurance companies
- Other society)

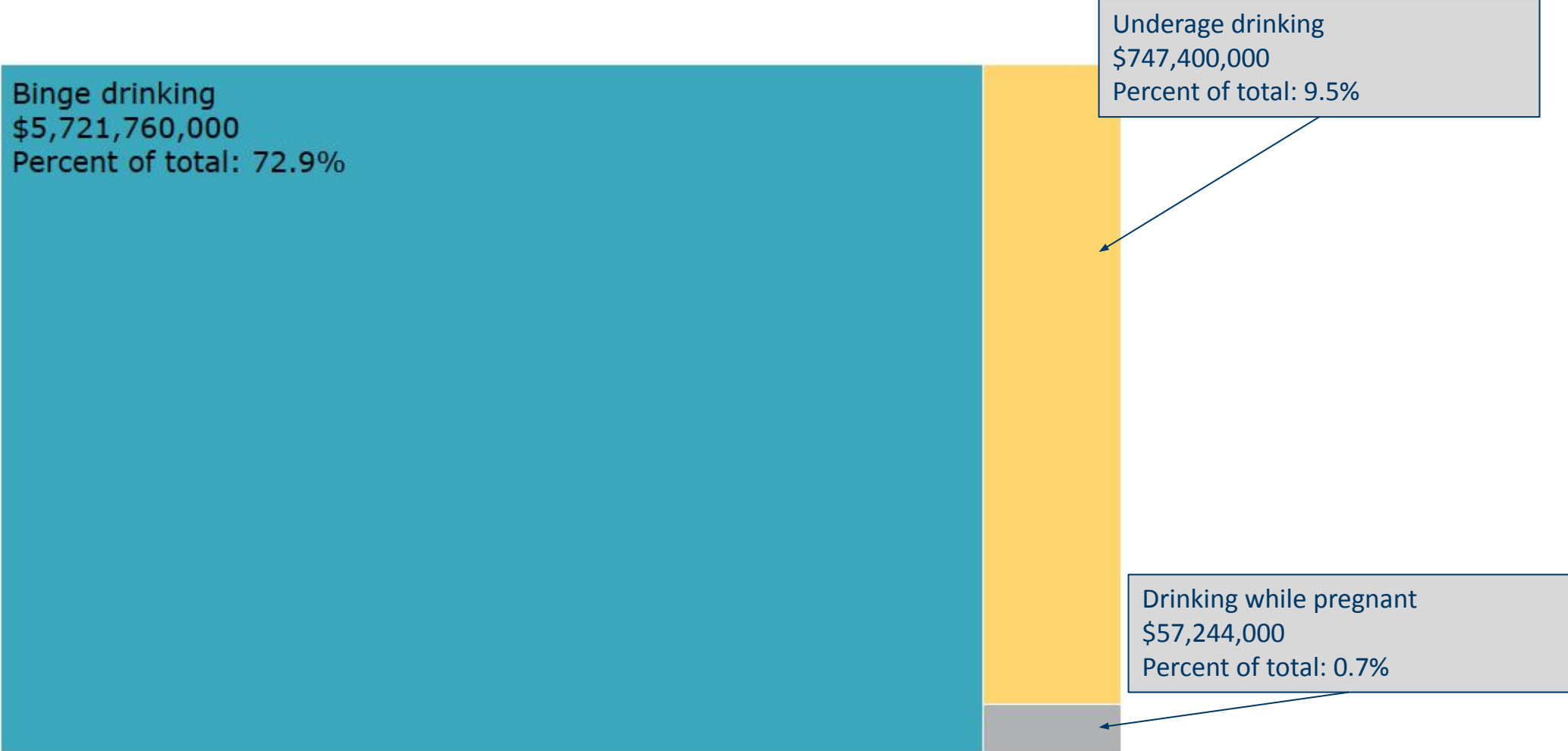
Excessive drinking cost Minnesota \$7.85 billion in 2019



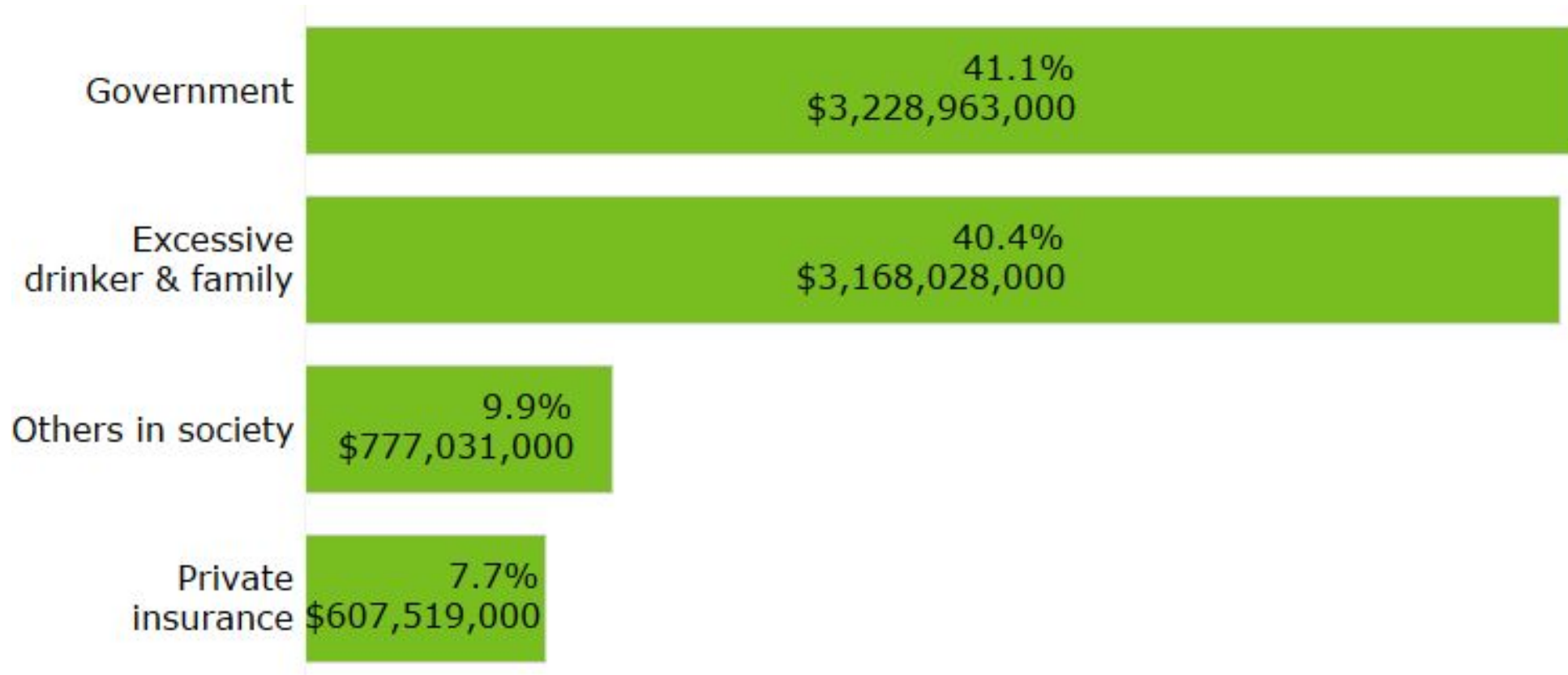
Cost of excessive drinking broken out by category of cost. Color shows details about the cost category. Size shows the cost.

- About 71% due to lost productivity
 - Increased absenteeism, reduced productivity at work and home, hospitalization & incarceration
- 17% of costs due to other effects, primarily crime and motor vehicle crashes

Most of the costs are attributed to binge drinking



All parts of society pay for the costs of excessive drinking.



How does this compare?

	Sacks study (2019\$)	Current study
Cost per drink	\$1.74	\$2.86
Cost per capita	\$908	\$1,383
% paid by government	40.8%	41.1%
% attributed to binge drinking	74.4%	72.9%

Benefits & Challenges



- Ability to get more detail on local areas
- Some data sources available in-state but not nationally (e.g., EMS data)



- Difficulties accessing data
- Complexity of analyses

Key messages

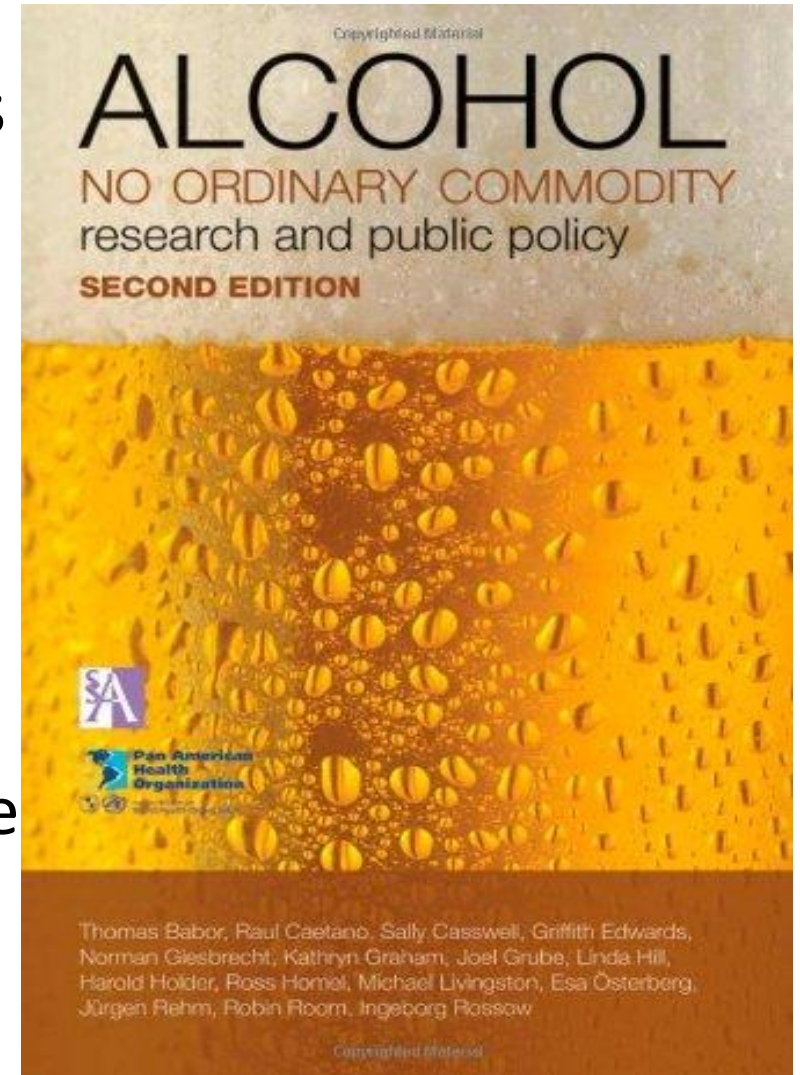
- Excessive drinking is costly to our state
- All Minnesotans are paying these costs (regardless of their drinking status)
- All of us have a role in preventing excessive drinking and the related harms

Alcohol is a community issue

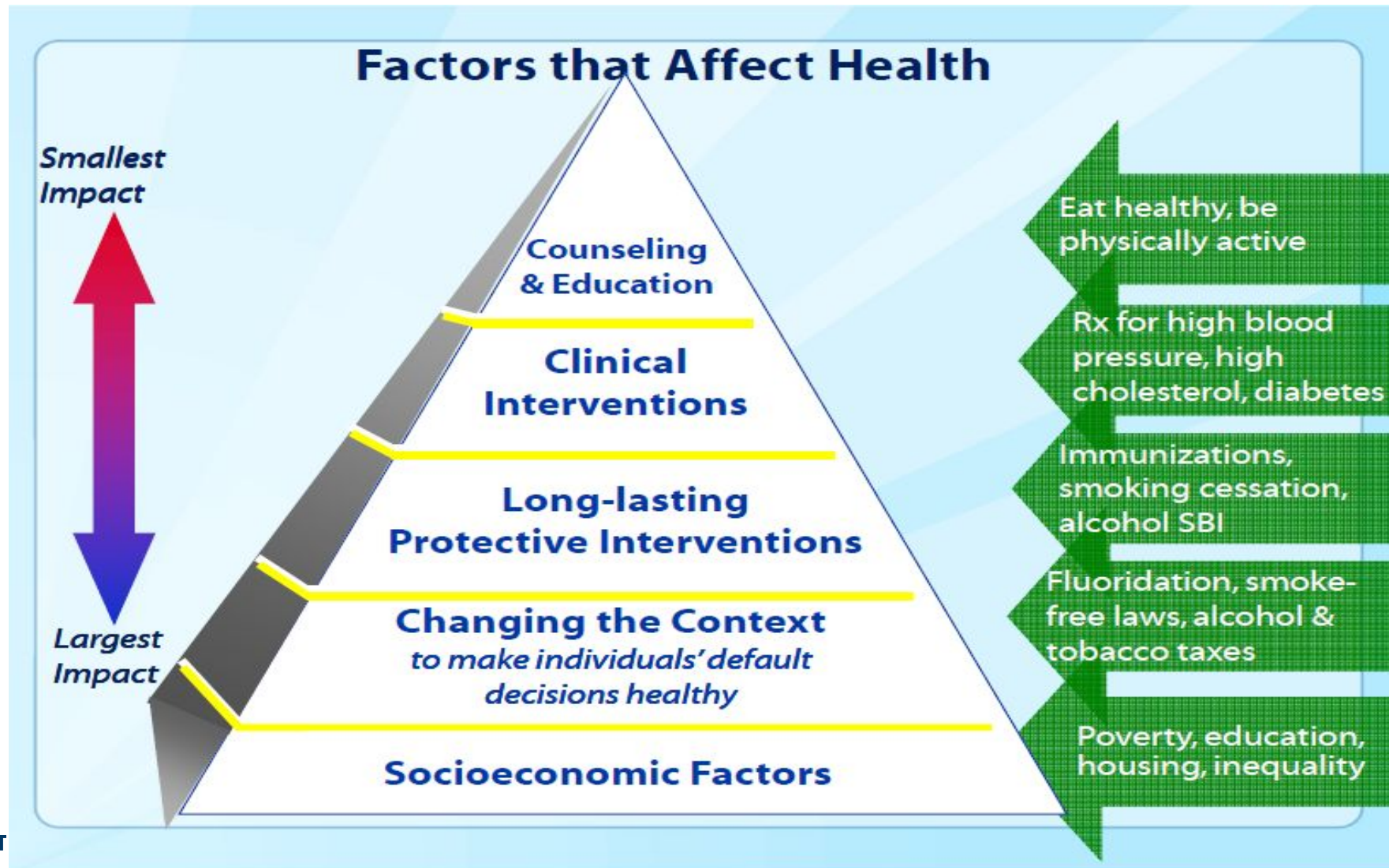
The production and sale of alcoholic beverages generates

- Income and employment for farmers, manufacturers, distributors, advertisers, investors, on-premises establishments (e.g., bars, restaurants).
- Tax revenue for government

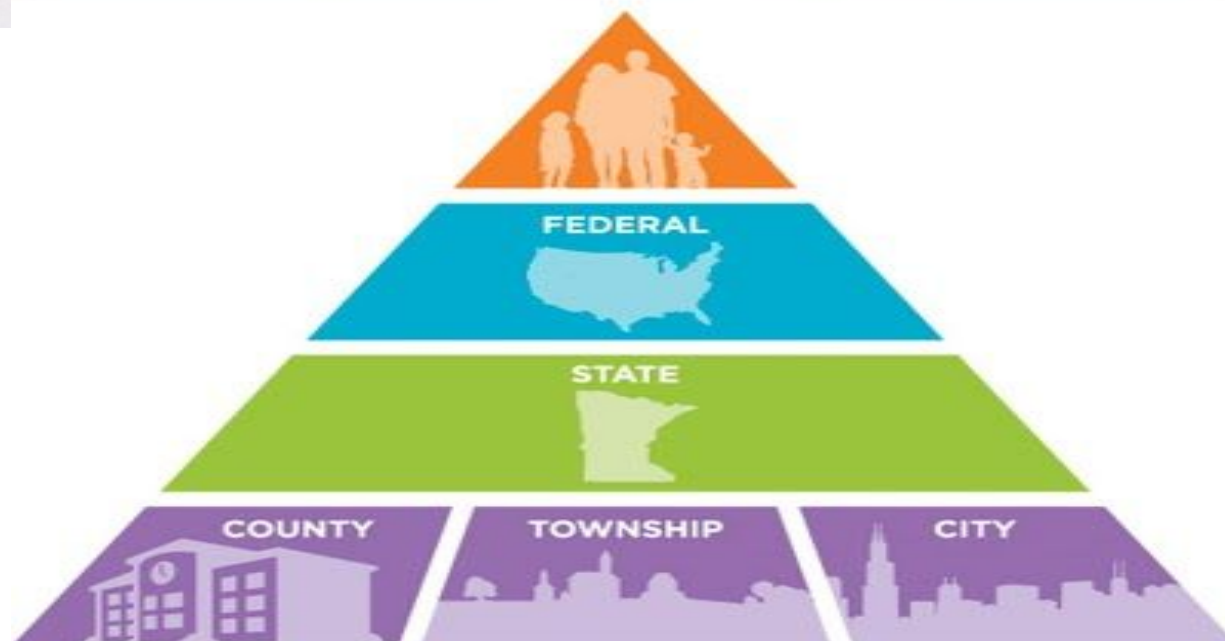
However, the benefits connected with the production, sale, and use of this commodity come at an enormous cost to society.



Diving deeper: Levels of impact



Policy, Systems, and Environmental Change



The Community Guide Recommendations for Preventing Excessive Drinking

- Increase alcohol taxes
- Regulate alcohol outlet density
- Dram shop (commercial host) liability
- Avoid further privatization of alcohol sales
- Maintain limits on days of sale
- Maintain limits on hours of sale
- Enhance enforcement of laws prohibiting alcohol sales to minors
- Electronic screening and brief intervention (e-SBI)


Challenges to mobilizing support for prevention of excessive drinking

- Misperceptions about alcohol and health impacts
 - Most excessive drinkers are alcohol dependent
 - Excessive drinking is primarily a problem among youth
 - Alcohol-impaired driving is the primary issue of concern
- Misperception of policy and environmental factors that significantly influence drinking behavior
- Community Norms (e.g., intoxication is funny, media, jokes, alcohol is part of being a good host, etc.)
- Other?

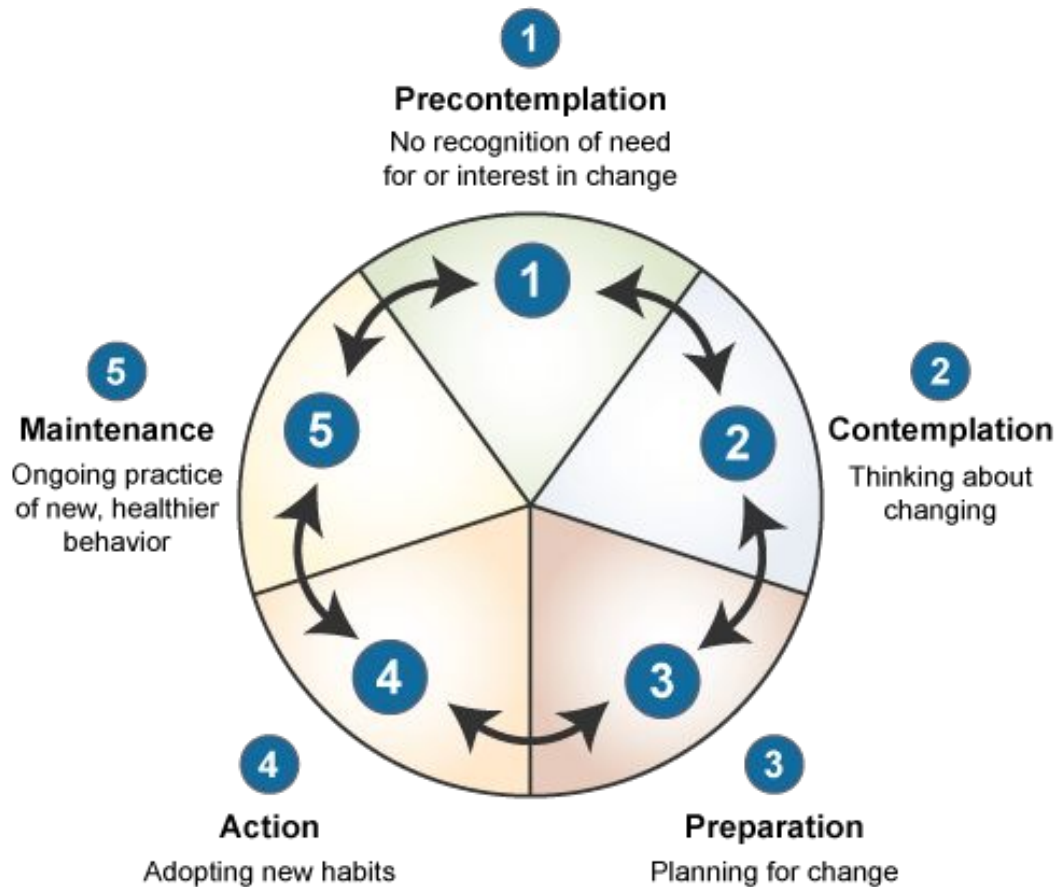
Considerations for leveraging partnerships and data

- What is the specific policy/issue your community wants to address?
- Who will be impacted by this policy issue?
- Who else is working on this policy issue?
- Who could influence this policy issue?

Develop the discourse

- Public health focus on reducing “excessive drinking” and “harmful drinking”  Framing sometimes used by corporations about “responsible drinking” or “drinking in moderation”
- Focus on individual-level framing about personal decision-making vs population-level issue
- Public health model is about changing the social, legal, and physical context through public policy. ***As such, public health policy response resembles that for tobacco, fast food, or sugary beverages:***
 - Price increases, such as through increasing taxes or setting minimum prices
 - Marketing restrictions, especially to prevent youth exposure - total ban or partial bans on content, audiences, time, place, etc.
 - Reasonable controls on availability - limit retail outlets, hours and days of sale, age of access, drinking in public

Applying Stages of Change to communication



What Processes of Change are needed?

1. Consciousness-raising
 - a. Awareness that alcohol is costly to health and economy
 - b. Awareness of how much an individual is drinking
2. Emotional arousal
 - a. Emotions about an individual's alcohol use, and about available solutions or treatments
3. Self-reevaluation
 - a. Re-assessing thoughts and feelings about an individual's drinking behaviors
4. Environmental reevaluation
 - a. Re-assessing the impact an individual's alcohol use has on themselves and their environment

Thank you!

Kari Gloppen, PhD, MPH

Alcohol Epidemiologist

Kari.Gloppen@state.mn.us

Dana Farley, MS

Drug Overdose Prevention Unit Supervisor

Dana.Farley@state.mn.us