

Excessive drinkers, high income households pay majority of state alcohol tax increases

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People who drink too much and those with higher household incomes would pay more following an increase in state alcohol taxes than those who drink less and have lower household incomes, according to a new study led by researchers at Boston Medical Center (BMC) and published today in the journal *Preventing Chronic Disease*, a publication of the CDC.

Across all states, excessive drinkers would pay more than 5 times as much as nonexcessive drinkers on a per-person basis, and would pay nearly \$3 in \$4 of the increased cost of [alcohol](#) following the state [alcohol tax](#) increases examined in the study. Even the largest hypothetical tax increase (\$0.25 per drink) would cost those who don't drink excessively an average of less than \$10 per year. Additionally, the study found that drinkers who were non-Hispanic whites and those with higher [household incomes](#) would pay higher per capita costs than people with lower incomes and racial minorities, reflecting the fact that those with financial means tend to drink more than their counterparts.

"This study shows that, contrary to popular opinion, alcohol tax increases don't unfairly burden those who drink less or are financially disadvantaged," said Tim Naimi, MD, MPH, physician and alcohol epidemiologist at BMC who is the lead author of the study. "This is important because many studies have found that raising the cost of alcohol through taxation greatly reduces excessive drinking and alcohol-related harms."

Excessive alcohol consumption is responsible for approximately 88,000 deaths in the U.S. each year, including 1 in 10 total deaths among working-age adults, and cost the U.S. about \$249 billion, or \$2.05/drink in 2010, according to the CDC. For the purposes of this study, excessive drinking included binge drinking (four or more drinks on an occasion for women, five or more drinks on an occasion for men); consuming eight or more drinks a week for women or 15 or more drinks a week for men; or any alcohol use by those under the minimum legal drinking age of 21. Non-excessive drinkers may have consumed alcohol, but did so at levels below those used to define excessive drinking. Overall, about 1 in 5 U.S. adults were classified as excessive drinkers, and about 1 in 3 were classified as non-[excessive drinkers](#). About 45% of U.S. adults were non-drinkers, who would not be affected by an alcohol [tax increase](#).

Researchers determined the change in the net cost of alcohol in all 50 states by studying a series of hypothetical alcohol tax increases (\$0.05, \$0.10, \$0.25 per drink) to people based on [drinking](#) pattern and other characteristics using data from the 2011 Behavioral Risk Factor Surveillance System, IMPACT Databank and the Alcohol Policy Information System.

"It is our hope that we can use this valuable information to educate policymakers and inform evidence-based public health practice to reduce excessive alcohol use and related harms," Naimi said. "It could also reduce the gap between the amount we pay in alcohol-related costs compared to the amount of revenue generated from alcohol taxes."

More information: Timothy S. Naimi et al. Who Would Pay for State Alcohol Tax Increases in the United States?, *Preventing Chronic Disease* (2016). [DOI: 10.5888/pcd13.150450](https://doi.org/10.5888/pcd13.150450)

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