

**Testimony before the Joint Committee on Judiciary  
In re: HB 5211 (Raised) AAC Underage Drinking**

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Public Hearing  
Friday, February 24, 2006  
1:30 p.m. in Room 2C, Legislative Office Building  
Hartford, Connecticut

I am testifying today in support of House Bill No. 5211, An Act Concerning Underage Drinking. As a public health researcher with a focus on substance abuse prevention, I have examined the problem of substance use within our State for the past eight years and have concluded that underage drinking is a sobering problem that is in need of immediate attention.

Alcohol is the drug most frequently used by young people. Nearly half of 9<sup>th</sup>-10<sup>th</sup> graders (Ungemack, Cook, & Damon, 2001) and 69% of underage college students (CORE Institute, 2005) report consuming alcohol during the past month. In Connecticut, my colleagues and I have found that a higher proportion of youth are drinking here than are nationally (Ungemack, et al., 2001). National surveys conducted in Connecticut have estimated that 124,585 persons aged 12-20 statewide drank during the past month (SAMHSA, 2003). To help visualize the magnitude of the underage drinking problem in our state, suppose we were to gather all of the underage drinkers in one location, at one time. We would be able to fill Rentschler Field to full seating capacity more than three times over.

Many people including parents dismiss underage drinking as a benign "rite of passage" in adolescence. It is neither a rite of passage nor a harmless activity. Alcohol is one of the most common contributors to injury, death, and criminal behavior among youth (U. S. Department of Health and Human Services, 1992). Drinking is associated with the leading causes of death among young people, including car crashes, unintentional injuries, murder, and suicide. A 16-year-old is more likely to die from a drinking-related problem than any other cause. Binge drinking, as indicated by consumption of five drinks or more within a short time span, is strongly associated with injuries, motor vehicle crashes, violence, fetal alcohol spectrum disorder, chronic liver disease, high risk sexual activity, date rape, alcoholism and a number of other acute and chronic conditions (National Research Council and Institute of Medicine, 2004).

In 2004, the Pacific Institute for Research and Evaluation estimated that underage drinking cost the citizens of Connecticut \$600 million in 2001. These costs include medical care, work loss, and pain and suffering associated with the multiple problems resulting from the use of alcohol by youth. It translates to a cost of \$1,998 per year for each youth in the State. Connecticut ranks 35<sup>th</sup> highest among the 50 states for the underage drinking cost per youth. Excluding pain and suffering from these costs, the direct costs of underage drinking incurred through medical care and loss of work costs Connecticut taxpayers \$189 million annually.

House Bill 5211 helps limit the availability of alcohol to our young people by addressing the problem of underage drinking where it most often occurs — at house parties. It encourages consistent enforcement of underage drinking by extending the prohibition from public areas to include private property. It sends a clear and consistent message to youth and adults that underage drinking is not ok. There are immediate, acute, and chronic consequences.

I strongly encourage you to pass this legislation aimed at addressing the problem of underage drinking in our state. We need to take action. The stakes, specifically the health and safety of our young people, are far too high.

References:

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SAMHSA (2003). *NHSDA Report: Alcohol Use by Persons Under the Legal Drinking Age of 21*. Washington, DC: Department of Health and Human Services, Office of Applied Studies.

Ungemack, J.A., Cook, M.J., and Damon, D. (2001). *The Governor's Prevention Initiative for Youth 2000 Student Survey: State of Connecticut*. Hartford, CT: Department of Mental Health and Addiction Services.

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