

2018

Nebraska Young Adult Alcohol Opinion Survey

2010-2018 State Summary Report

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**Nebraska Young Adult Alcohol Opinion Survey
2010-2018 State Summary Report**

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Executive Summary

Alcohol is the most commonly used substance in Nebraska. The rates of underage drinking, binge drinking, and alcohol-impaired driving continue to be higher in Nebraska than the U.S average. Alcohol misuse within Nebraska places a significant strain on the health care system, the criminal justice system, and the substance abuse treatment system. While alcohol misuse is a cause for concern among people of all ages in Nebraska, it is particularly an issue among young adults, who tend to be the age group most likely to use alcohol and suffer from the negative consequences associated with alcohol misuse.

While some data on alcohol use and alcohol-impaired driving among young adults in Nebraska are available, they are limited, largely unavailable at a sub-state level (e.g., county or multi-county level), and virtually no data are available on the attitudes and perceptions related to alcohol among young adults. As a result, the Nebraska Young Adult Alcohol Opinion Survey was created to capture a reliable sample of alcohol-related behaviors and attitudes and perceptions. The NYAAOS is a paper survey that is mailed to a random stratified sample of 19 to 25-year-olds across the state.

A total of 3,466 young adults completed the survey at the first administration (referred to as 2010) 2,725 at the second administration (referred to as 2012), 2,816 young adults completed the survey at the third administration (referred to as 2013), 2,812 young adults completed the survey at the fourth administration (referred to as 2016), and a total of 1,967 completed the survey at this fifth administration (referred to as 2018). Demographics of the participants are located in the "Sampling and Methodology" Section. Results were weighted to represent young adults statewide. The following are highlights from the survey across all five administrations.

Alcohol Use and Binge Drinking among 19-25-Year-Olds in Nebraska

- About two-thirds of respondents in 2018 (65.1%) reported using alcohol in the past month which is similar previous years (67.9% in 2010, 69.1% in 2012, 68.1% in 2013, 67.2% in 2016).
- Among past month alcohol users in 2018, slightly over half (51.9%) reported binge drinking in the past 30 days which is significantly less than previous years (64.8% in 2010, 68.3% in 2012, 66.3% in 2013, 56.3% in 2016).
- Among all respondents in 2018 about one in three (33.4%) reported binge drinking in the past month which than previous years (43.8% in 2010, 47.1% in 2012, 44.9% in 2013, 37.4% in 2016).

Impaired Driving among 19-25-Year-Olds in Nebraska

- There have been incremental decreases in past year alcohol-impaired driving in each survey administration. Reported past year driving under the influence of alcohol has decreased from 30.3% in 2010 to 19.8% in 2018.
- Past month driving after binge drinking has also decreased from 8.4% in 2010 to 4.0% in 2018.
- A little less than one in ten (9.4%) of young adults reported driving while they were under the influence of marijuana in the past year.

Attitudes and Perceptions Related to Alcohol among 19-25-Year-Olds in Nebraska

- The rate of Nebraska young adults who perceive a moderate or great risk of harm (physically or in other ways) from binge drinking has increased from 71.1% in 2010 to 78.3% in 2018.
- The amount of risk an individual believes binge drinking has significantly impacts their behaviors. In 2018, those who reported no risk from binge drinking had a significantly higher past month binge drinking rate of

56.0%, compared to 21.3% for their peers who reported great risk.

- Alcohol consumption by those under the age of 18 was viewed unfavorably by the majority of Nebraska young adults, with 77.8% perceiving it as wrong or very wrong for an individual under 18 years old to have 1 or 2 drinks in 2018.
- Less than half of the respondents (44.3%) perceived it was wrong or very wrong for individuals 18 to 20 years old to have 1 or 2 drinks in 2018.
- Underage binge drinking of all forms, whether for those under 18 or those ages 18 to 20, was viewed as wrong or very wrong. Nearly all (92.8%) of Nebraska young adults perceived it is wrong or very wrong for individuals under the age of 18 to get drunk and 76.6% perceived it is wrong or very wrong for individuals ages 18 to 20 to get drunk in 2018.
- Social norms attitudes were more favorable towards legal-age binge drinking, with 28.0% of 2018 survey respondents reported that it is wrong or very wrong for individuals 21 and over to binge drink.
- As there was a strong disapproval of underage binge drinking, there was also a strong disapproval of providing alcohol to minors, with 77.9% of young adults perceiving it as wrong or very wrong to provide alcohol to individuals under 21 years old in 2018.
- Half (51.6%) of Nebraska young adults perceived it is somewhat likely or very likely that police will arrest an adult who is believed to have provided alcohol to persons under 21, and 64.0% perceived it is likely or somewhat likely that police will break up parties where persons under 21 years old are drinking in 2018.
- A majority of young adults believed that someone will be stopped by the police and arrested for driving under the influence of alcohol, with 71.5% reporting it as “very likely” or “somewhat likely” in 2018. Additionally, 74.1% of young adults agreed or strongly agreed that more police officers should patrol for driving under the influence of alcohol in 2018.
- Nearly two in five (42.0%) of young adults indicated their parents or caregivers allowed them to drink alcoholic beverages in their home while they were underage.
- Young adults believed that half (48.5%) of their peers binge drank alcohol in the past 30 days, which is higher than the percent that actually binge drink (33.4%). In addition, young adults believed that nearly one in three (30.1%) of their peers drove after binge drinking in the past 30 days which is much higher than the percent who reported driving after binge drinking (4.0%).

Gender Differences

- Binge drinking has decreased among both genders from 2013 (64.0% males, 61.3% females) to 2018 (33.7% males, 30.0% females).
- There is no significant difference between males and females in terms of past month driving after binge drinking in 2018 (4.6% males, 3.4% females). Males are equally likely to report alcohol-impaired driving in the past year compared to females for 2018 (males 19.8%, females 19.9%).
- Males were significantly more likely (11.1%) than females (7.7%) to report marijuana-impaired driving for the past year.
- Females (43.50%) were slightly more likely to be allowed by their parents or caregivers to drink alcoholic beverages at home when they were underage than males (40.4%).

Age Differences

- Binge drinking has decreased among all ages.
- There were significant decreases in the rate of past year alcohol-impaired driving for 19-20-year-olds and 23-25-year-olds from 2013 to 2016. For 19-20-year-olds, the rate decreased from 16.0% in 2013 to 10.9% in

2016. For 21-22-year-olds, past-year alcohol-impaired driving decreased slightly from 21.5% in 2013 to 20.0% in 2016, which is not significant, but there has been a substantial decline in the rate since 2010 (34.9%). For 23-25-year-olds, it decreased significantly, from 26.4% in 2013 to 19.6% in 2016. In 2018, the rate of 21-22-year-olds continued to decline (17.9%) from 2016 (20.0%), whereas the other two age groups had an increasing rates compared to those of 2016. Young adults age 23-25 reported significantly higher rate of driving under the influence of alcohol (25.8%) than the age mates in 2016 (19.6%) ($p < .05$).

- Rates for past month driving after binge drinking remained fairly stable for all age groups, with rates remaining at a low percentage since 2013 albeit minor fluctuations.
- Young adults age 19 were the most likely (15.0%) to report driving under the influence of marijuana in the past year. Those age 20 and older report significantly lower rates of marijuana-impaired driving.

Urban/Rural Differences

- In 2018, there is no statistical difference in past month alcohol use or binge drinking between young adults living in urban areas, large rural areas or small rural areas.
- Urban and small rural young adults had similar rates for past month driving after binge drinking and driving under the influence of alcohol in 2018. Small rural young adults saw a considerable drop (8.0% in 2013 to 4.0% in 2016) of young adults who said they drove in the past month after binge drinking. The drop is even larger when only including young adults who stated they binge drank in the last month (19.5% in 2013 to 9.4% in 2016).
- Urban respondents were significantly more likely (11.2%) than small rural (5.1%) respondents to report marijuana-impaired driving in the past year.

List of Acronyms

BAC – Blood Alcohol Concentration

BRFSS – Behavioral Risk Factor Surveillance System

DBH – Division of Behavioral Health

NDHHS – Nebraska Department of Health and Human Services

NHTSA – Nebraska Highway Traffic Safety Administration

NRPFSS – Nebraska Risk and Protective Factor Student Survey

NSDUH – National Survey on Drug Use and Health

NYAAOS – Nebraska Young Adult Alcohol Opinion Survey

SAMHSA – Substance Abuse and Mental Health Services Administration

SEOW – Statewide Epidemiology Outcomes Workgroup

SPF SIG – Strategic Prevention Framework State Incentive Grant

SPF PFS – Strategic Prevention Framework Partnerships For Success

YRBS – Youth Risk Behavior Survey

Introduction

Overview

Alcohol is the largest contributor to the leading cause of death (unintentional injuries) among young people in America.¹ Alcohol misuse, including underage drinking and binge drinking, places the individual at risk as well as creates a burden on society. Alcohol misuse strains the health care, the criminal justice, and the substance abuse treatment systems and impacts the education system and workplace productivity. According to the Centers for Disease Control and Prevention, the misuse of alcohol can lead to, among other things, alcohol poisoning, injuries (e.g., motor vehicle crashes, falls, drowning, and suicide), sexually transmitted diseases and unintended pregnancies, and chronic health problems (e.g., cirrhosis of the liver and high blood pressure).²

While alcohol misuse is cause for concern among people of all ages in Nebraska, it is particularly an issue of concern for young adults. Young adults tend to be the age group most likely to use alcohol and suffer from the negative consequences associated with alcohol misuse. According to the report entitled *Substance Abuse, Mental Illness and Associated Consequences in Nebraska, December 2015*, Nebraskans in their late teens through their twenties are the most likely to binge drink, to drive after drinking, to die or be injured in an alcohol-involved crash, to be arrested for DUI or other alcohol offenses, and to receive treatment for substance abuse³.

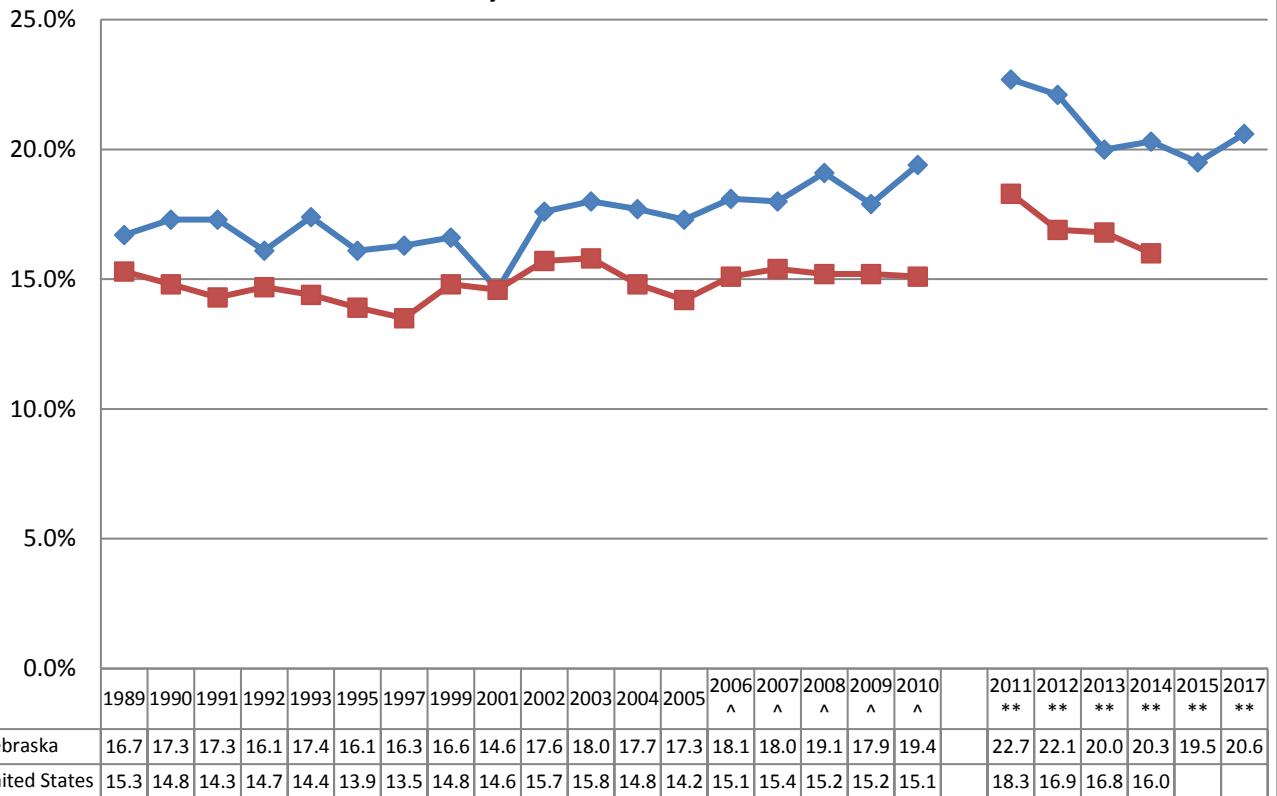
The NYAAOS was administered by mail to a random sample of 19 to 25-year-olds in Nebraska. The primary purposes of the survey were (1) to enhance understanding of alcohol use, alcohol-impaired driving, and attitudes and perceptions related to alcohol among 19 to 25 year old young adults in Nebraska and (2) to provide data to community coalitions in Nebraska working to reduce binge drinking among young adults. This report focuses on state level findings from the survey, including differences by gender, age, urbanicity, student status and ethnicity.

The most recent administration of Nebraska Young Adult Alcohol Opinion Survey (NYAAOS) was conducted between April 2018 and July 2018 by the Bureau of Sociological Research (BOSR) at the University of Nebraska-Lincoln, who served as the contractor for the data collection portion of the project. The NYAAOS was sponsored by the Nebraska State Epidemiological Outcome Workgroup Grant (SEOW).

Alcohol Use among Nebraska Young Adults

Contributing to the burden of alcohol misuse in Nebraska is the fact that Nebraska has traditionally had higher levels of underage drinking, binge drinking, and alcohol-impaired driving compared to the rest of the nation (based on multiple sources).^{4,5,6} According to the Behavioral Risk Factor Surveillance System (BRFSS), binge drinking among Nebraska adults, 18 and older, has remained relatively stable over the past 20 plus years, and consistently higher than national estimates (Figure 1)⁶.

Figure 1: Binge Drinking Among Adults*: Nebraska and U.S., 1989-2017*



*Percentage of adults 18 and older who reported having five or more drinks for men and women (four or more drinks for women starting in 2006) on at least one occasion during the 30 days preceding the survey.

^Binge drinking definition changed for women in 2006 to include four or more drinks during one occasion. Source: Behavioral Risk Factor Surveillance System (BRFSS).

**Beginning in 2011 BRFSS data were adjusted using raking which prevents comparisons with 2010 and earlier data.

Source: BRFSS 2017

Availability of Alcohol-Related Data for Young Adults in Nebraska

While some data on alcohol use and alcohol-impaired driving among young adults in Nebraska are available at the state level (as previously noted), they are limited, especially for attitudes and perceptions related to alcohol use and impaired driving. Furthermore, the available data are limited at the sub-state level in Nebraska (e.g., community, county, and multi-county areas), and, in most cases, do not provide sufficient data for community coalitions to plan for and evaluate their alcohol prevention efforts.

In many areas, the state has a wealth of data available from which the SEOW draws assessment information. The Nebraska Young Adult Alcohol Opinion Survey, Nebraska Risk and Protective Factor Survey and Youth Risk Behavioral Survey provide excellent data for monitoring underage drinking and other youth substance abuse issues. However, in other areas, such as surveillance systems for monitoring Fetal Alcohol Spectrum Disorders, prescription drug abuse, or substance use among older adults, information is inadequate. It is recognized that data drives decisions about resources, and an absence of data impacts the attention directed to problems that may be major public health issues. Therefore, ensuring sustainability and ongoing operation of the SEOW is vital in order to coordinate a public health surveillance system that is capable of providing a comprehensive and focused assessment and analysis.

State Epidemiological Outcome Workgroup

The Nebraska SEOW seeks to produce sustained outcomes in preventing the onset and reducing the progression of substance abuse, mental illness and related consequences. This is accomplished through continuation of the Strategic Prevention Framework (SPF) planning process, working across disciplines and implementing strategies that are specifically designed to create environments that support behavioral health.

Sampling Methodology of the NYAOS

According to the 2010 Census (U.S. Census Bureau, 2010), Nebraska has a total of population of 1,826,341. Nearly 80,131 are 19-20-year-olds and there are approximately 102,396 Nebraskans between the ages of 21-25 years.

2018

The sample for the 2018 survey was generated from a list provided by the Nebraska Department of Motor Vehicles (DMV). The sampling frame included young adults, ages 19 to 25, with Nebraska driver's licenses. A total of 12,524 young adults were included in the sample initially. The sample was stratified in two ways. First, each of the 11 PFS counties was designated as its own stratum. Then, in each region, the remaining counties for the behavioral health region made up an addition stratum. In doing so, there were 17 strata; 11 for the PFS counties and six for the remaining counties in each behavioral health region. Strata were sampled at differing rates to take into account the number of returns needed for each PFS county, and the population size of each stratum. Due to the small population, Boyd County and Thurston County were censused.

Though the sampling design had intended for each stratum to be sampled based on current address, the DMV drew addresses based on where the individual obtained his or her driver's license. As a result, many of the sampled young adults had current addresses not within the designated stratum. Due to time constraints, the decision was made to move forward with the sample list provided, and adjust for analysis based on the zip code response on the questionnaire.

2016

The sample for the 2016 survey was generated from a list provided by the Nebraska Department of Motor Vehicles (DMV). The sampling frame included young adults, ages 19 to 25, with Nebraska driver's licenses. A total of 12,000 young adults were included in the sample.

The sample was stratified in two ways. First, each of the 11 counties that are part of the Strategic Prevention Framework-Partnerships for Success (SPF-PFS) grant was designated as its own stratum (see shaded counties on the map on next page.) Then within each behavioral health region, the remaining counties for the behavioral health region made up an addition stratum. In doing so, there were 17 strata; 11 for the PFS counties and six for the remaining counties in each behavioral health region. Strata were sampled at differing rates to take into account

the number of returns needed for each PFS county, and the population size of each stratum. Due to the small population, a census was taken of young adults for Boyd County and Thurston County.

Before the first mailing, respondent mailing addresses were run through the National Change of Address Registry. This process revealed that 276 respondents were no longer living in Nebraska, so they were removed from the sample. The second full mailing went through the same process and revealed an additional 83 respondents who were no longer living in the state.

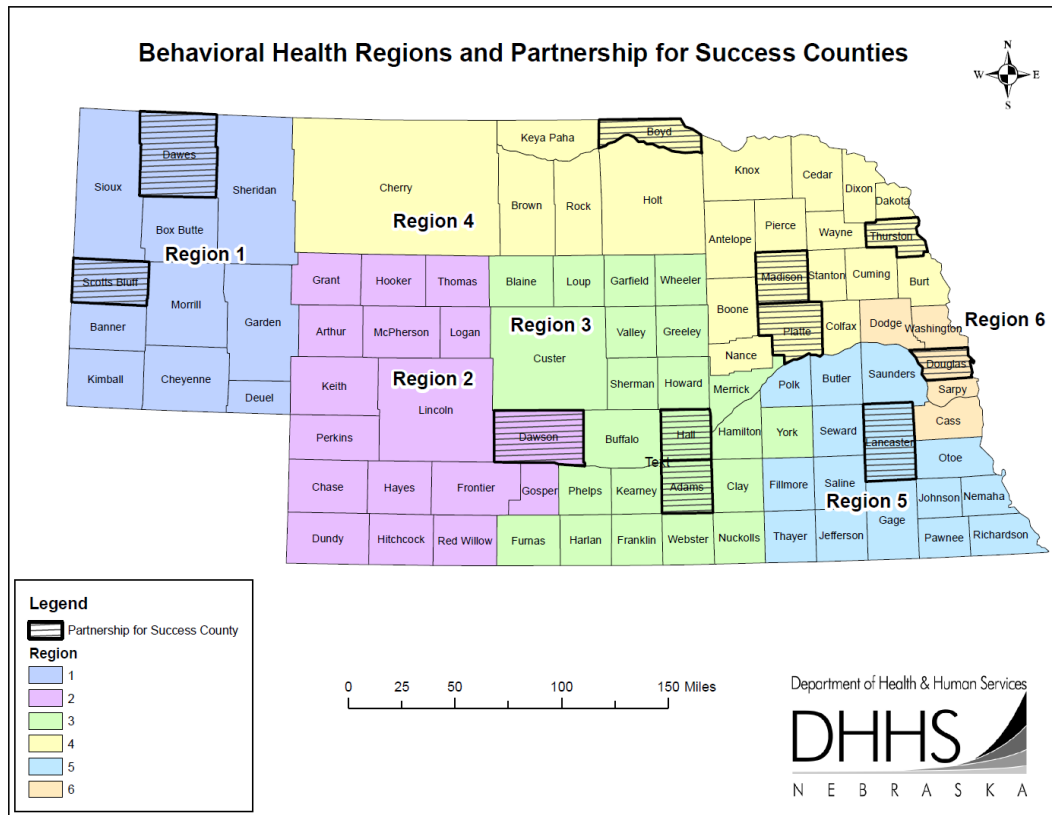
2013

Similar to 2016 the sample for the 2013 survey was generated from a list provided by the Nebraska Department of Motor Vehicles (DMV). A total of 10,003 young adults' ages 19 to 25 were included in the sample. The sample was stratified by the six Nebraska behavioral health regions (see map on next page) with an approximately equal number of respondents sampled in each region (regional N varied from 1667 to 1668). The sample was not stratified by the 11 PFS counties in 2016. Before the first mailing, respondent mailing addresses were run through the National Change of Address Registry. This process revealed 162 respondents who were no longer living in Nebraska, so they were removed from the sample. The second full mailing went through the same process and revealed an additional 52 respondents who were no longer living in the state.

2010-2012

Prior to sample selection, the state was divided into nine strata corresponding to the eight SPF SIG regions and additional strata for the remainder of the state. Using the Driver Records Database from the Nebraska Department of Motor Vehicles, a stratified random sample of 10,000 19-25 year old young adults was drawn. A total of 3,466 19-25-year-olds completed the survey in 2010 and 2,725 in 2012.

See the Sampling and Methodology section of this report for further details on the demographics of the participants, and methods used to collect, analyze, and report the data.



A Note on Statistical Significance (p values)

Data that are statistically significant are indicated with the notation " $p < .05$ ". Unless it is noted, it should be

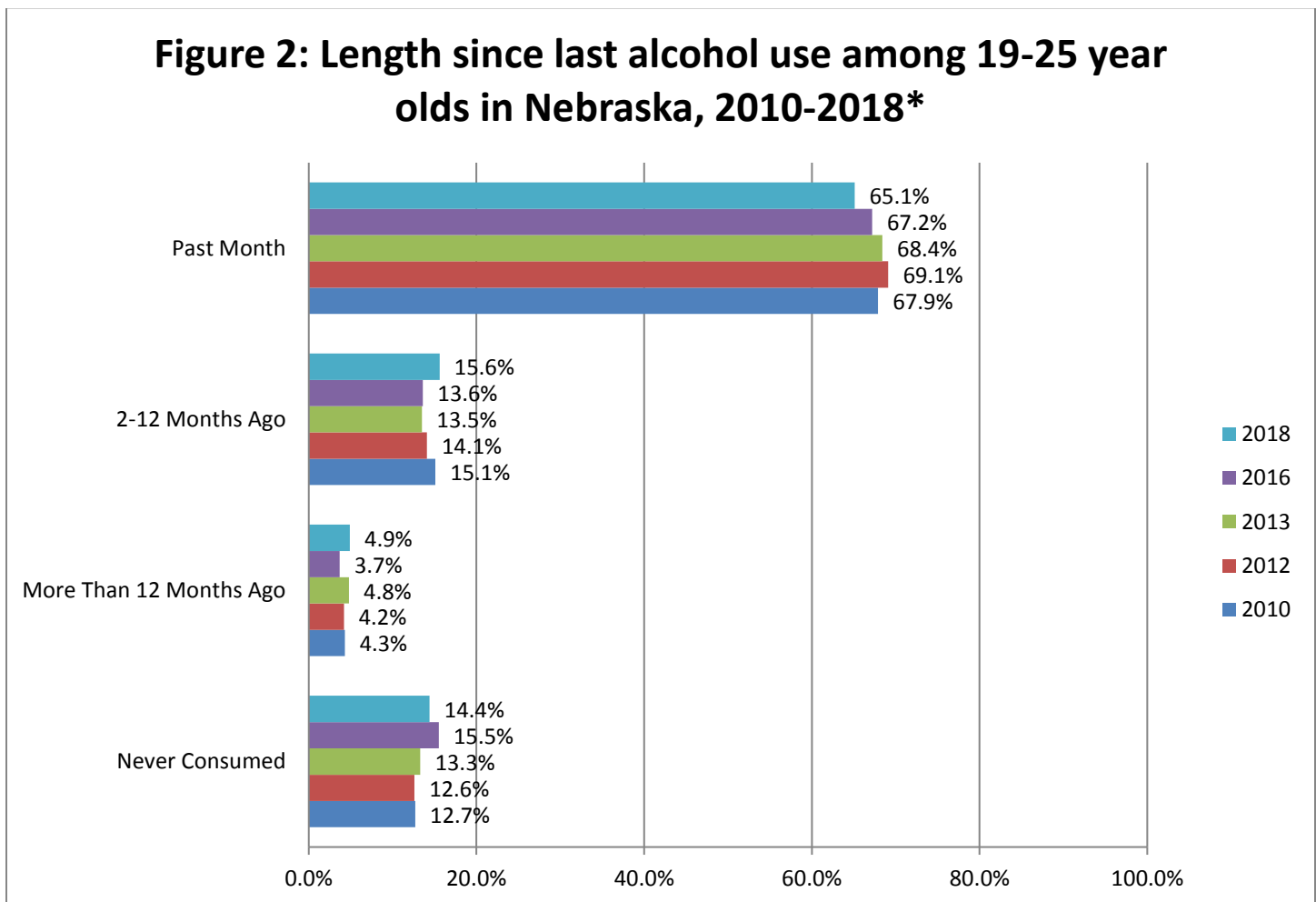
assumed that the data discussed in the narrative portion of the report are not statistically significant.

Results

Alcohol Use

Lifetime Alcohol Use

The vast majority of 19-25 year old young adults in Nebraska (87.4% in 2010, 86.8% in 2012, 86.5% in 2013, 84.5% in 2016, 85.6% in 2018) reported drinking alcohol (more than a few sips) during their lifetime (Figure 2).



*Length since consuming their last alcoholic beverage (including beer, wine, wine coolers, malt beverages, and liquor).

Past Month Alcohol Use

Past month alcohol use is defined as having at least one alcoholic beverage during the 30 days preceding the survey. About two-thirds of respondents (65.1%) in the 2018 survey administration reported past month alcohol use (67.9% in 2010, 69.1% in 2012, 68.4% in 2013, and 67.2% in 2016). The rate of past month alcohol use has declined since 2012, with the 2018 rate being significantly lower than that of the 2012 administration ($p < .05$).

Past Month Binge Drinking

Binge drinking is defined as four or more drinks for females and five or more drinks for males in a period of about two hours. According to the National Institute on Alcohol Abuse and Alcoholism (NIAAA), such drinking habits will bring the blood alcohol concentration (BAC) to 0.08 gram percent or above for the typical adult⁷.

In 2018, approximately one in three (33.4%) young adults reported binge drinking in the past 30 days. The rate of past month binge drinking has remained stable from 2010 to 2013 (43.8% in 2010, 47.3% in 2012 and 44.9% in 2013) but in 2016 there was a significant decrease from 2013 ($p < .05$), followed by another significant decrease from 2016 ($p < .05$) in 2018 (Figure 3). In 2018, when just comparing young adults who drank alcohol in the past 30 days instead of all young adults, half (51.9%) reported binge drinking in the past 30 days. From 2010-2013, this rate has remained fairly stable (64.8% in 2010, 68.3% in 2012 and 66.3% in 2013) with a significant drop in 2016 (56.3%) ($p < .05$).

Demographic Differences in Past Month Alcohol Use and Binge Drinking

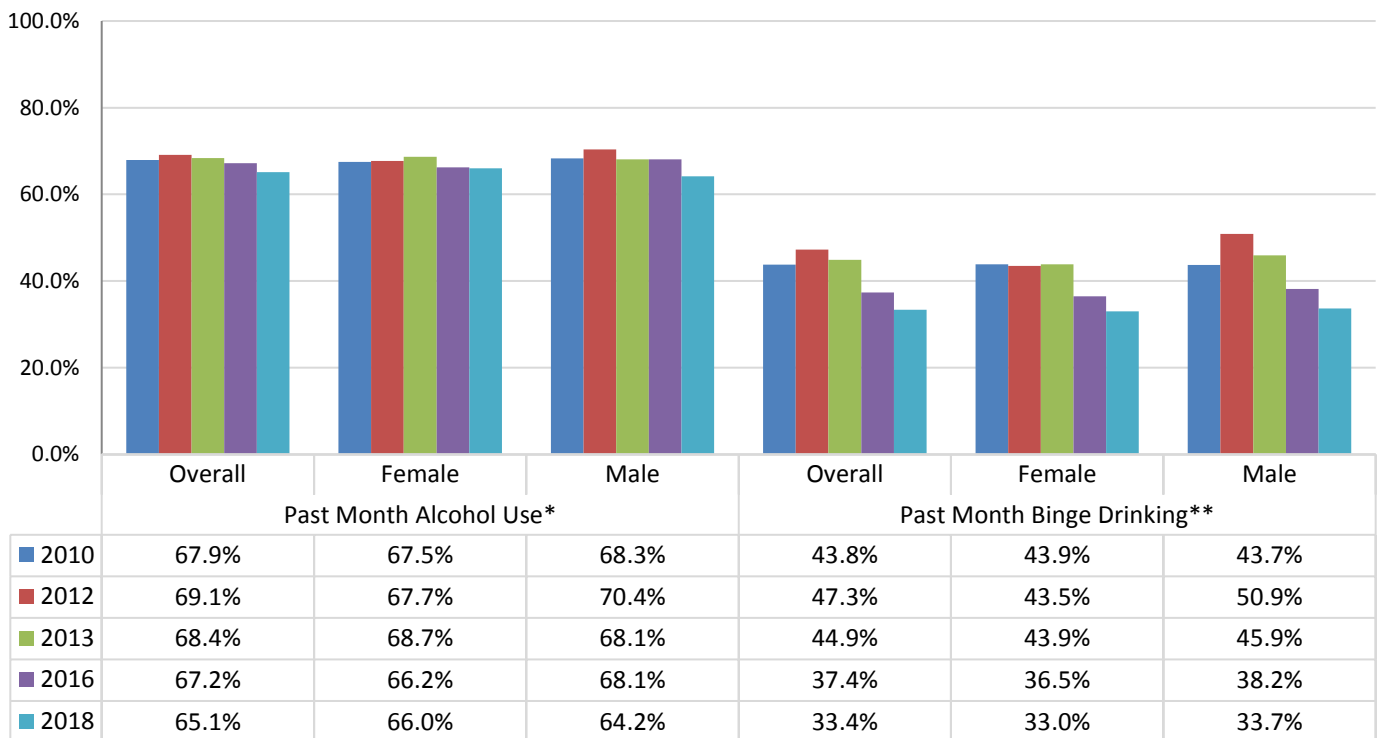
Gender

2018

Past month alcohol use is virtually the same between males and females with no significant difference. Past month binge drinking rates for males and females are very similar in 2018 with no significant difference. Past month binge drinking in each category tends to go down in spite of small fluctuations over the course of five administrations. In 2018, females age 19-20 reported significantly lower rate of binge drinking than those of 2010 to 2013 ($p < .05$) and males age 19-20 also reported significantly less binge drinking than those in 2012 and 2013 ($p < .05$). In 2018, males age 21-22 had a significantly lower rate than all four previous administrations ($p < .05$). Among the 23-25 age group, females in 2018 reported a significantly lower rate than those in 2010 to 2013 ($p < .05$), and males age 23-25 in both 2016 and 2018 reported less binge drinking than all three earlier administrations ($p < .05$).

When looking at just those who consumed alcohol in past 30 days the rates of binge drinking is higher but there is still no significant difference between males (53.3%) and females (50.4%) in 2018 (Figure 3 and Figure 4).

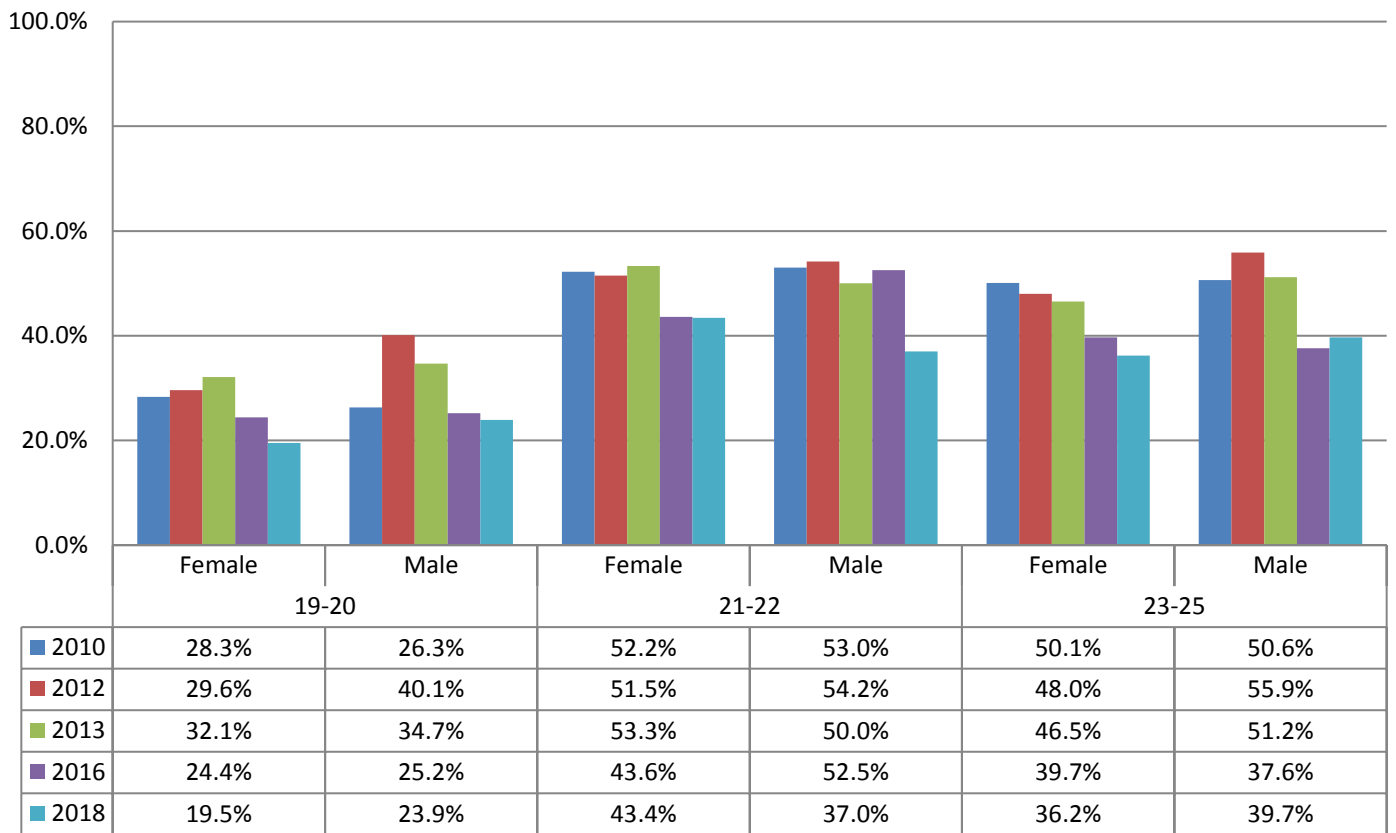
Figure 3: Past month alcohol use and binge drinking among 19-25 year olds in Nebraska, by gender, 2010-2018



*Percentage who reported having at least one alcoholic beverage during the 30 days preceding the survey.

**Percentage who reported having five or more drinks for men/four or more drinks for women within a couple of hours on at least one of the 30 days preceding the survey.

Figure 4: Past month binge drinking among 19-25 year olds in Nebraska, by age and gender, 2010-2018*



*Percentage who reported having five or more drinks for men/four or more drinks for women within a couple of hours on at least one of the 30 days preceding the survey.

Trends

Males and females have seen stable rates for past month alcohol use. Males saw an increase in past month binge drinking from 2010 to 2012 but reported rates significantly decreased in 2016 to levels similar to 2010 ($p < .05$). There was also a marked decline in 2018 but the difference was not significant. Females had similar reported rates of binge drinking from 2010-2013 and then a significant decrease in 2016 ($p < .05$), followed by another decline in 2018. However, the most recent decrease was not significant.

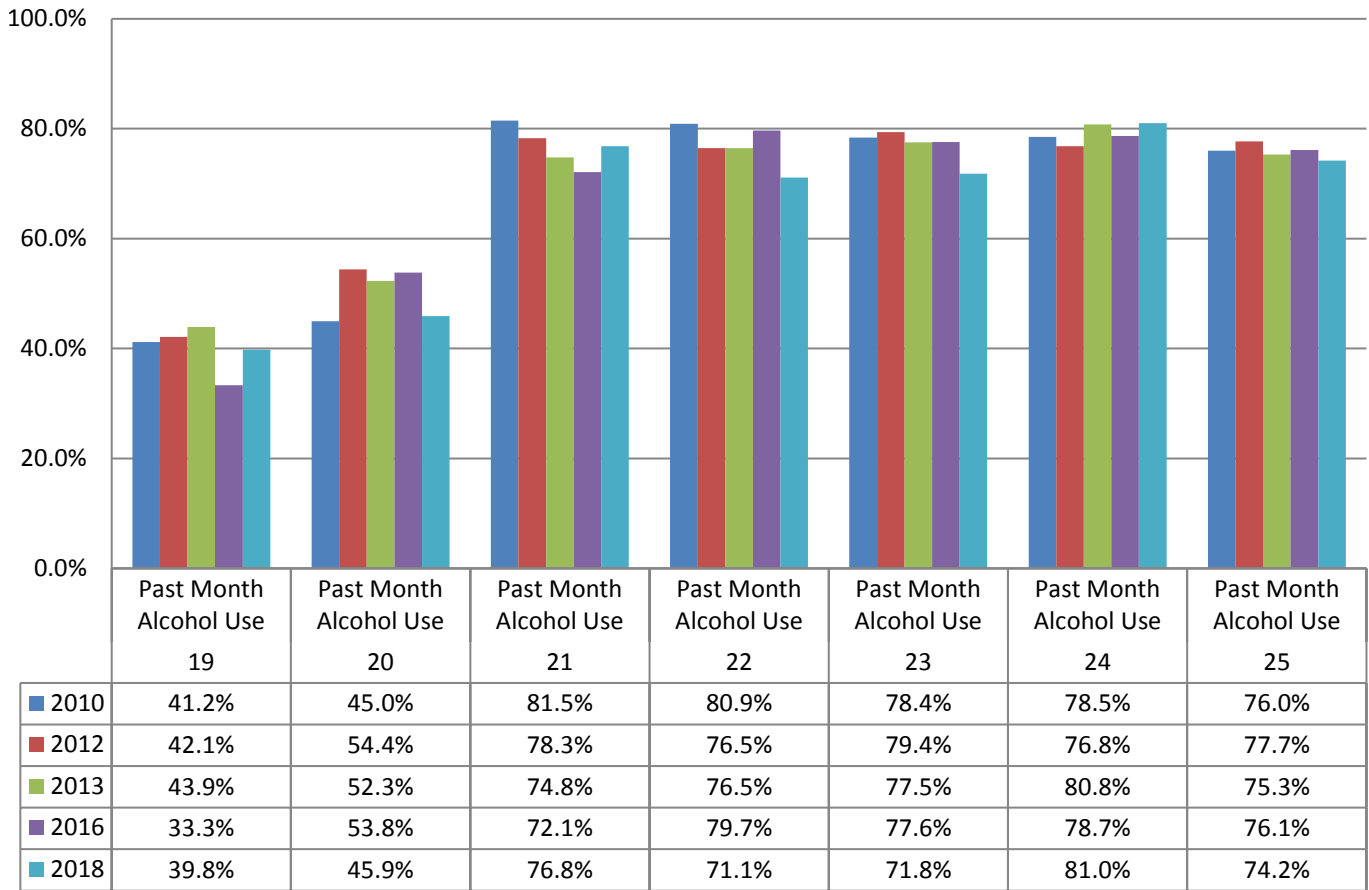
Males saw an increase in binge drinking among past month alcohol drinkers from 2010 (64.3%) to 2012 (72.0%) and 2013 (68.2%) and then a significant decrease in 2016 (57.1%) ($p < .05$), and another drop in 2018 (53.3%) which is non-significant. Females have a stable rate of binge drinking among past month alcohol drinkers, but saw a significant decrease from 2013 (64.3%) to 2016 (55.5%) ($p < .05$), followed by another drop in 2018 (50.4%).

Age

2018

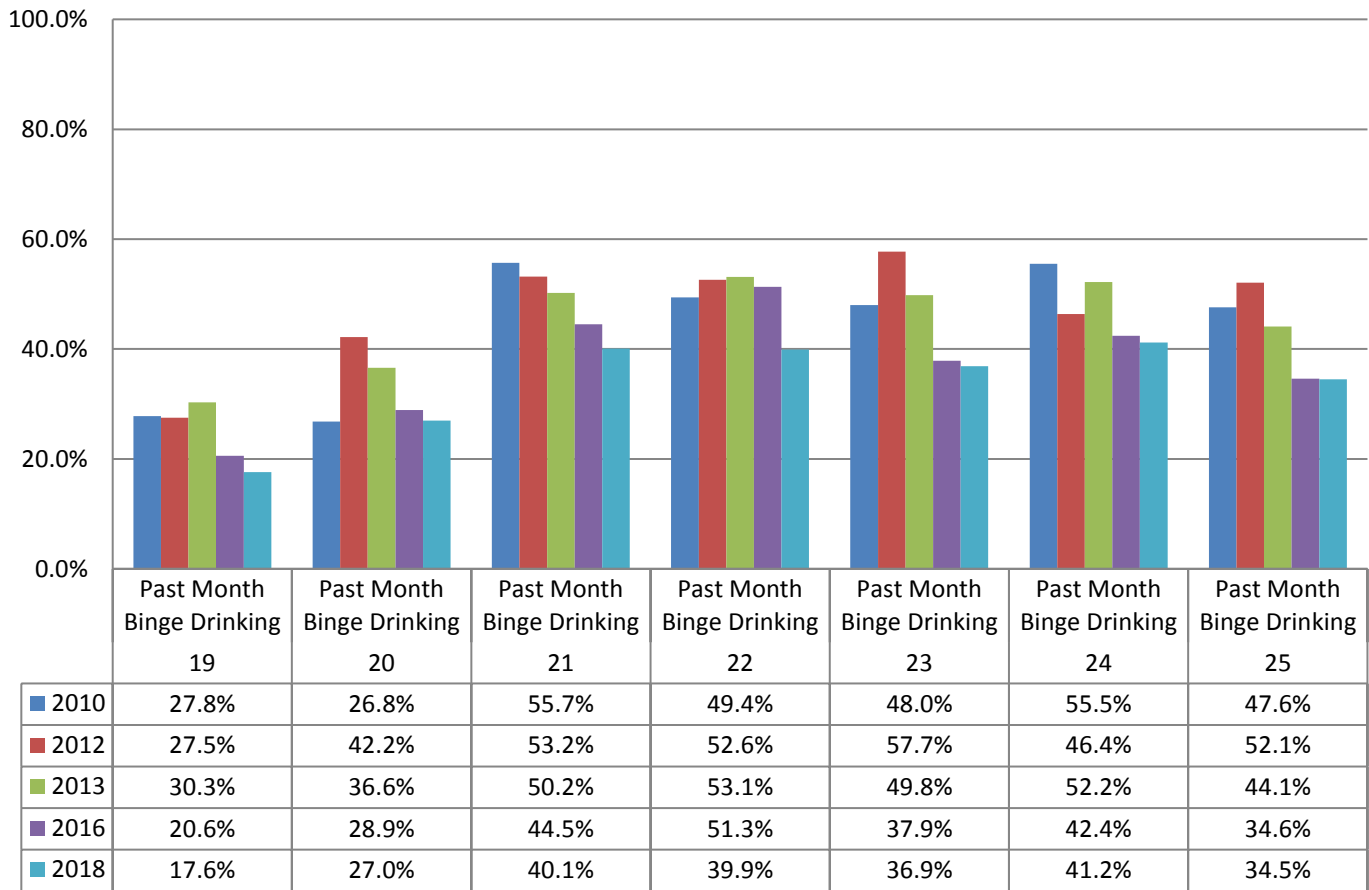
Past month alcohol use is lowest at 19, increases at 20 and then increases again at 21 and remains stable through age 25 except for a decline from the peak at 24 (Figure 5). Past month binge drinking is lowest at 19, increases at 20, increases again at 21. It remains stable from 21 to 24 and has a decline at 25 (Figure 6).

Figure 5: Past month alcohol use among 19-25 year olds in Nebraska by age, 2010-2018*



*Percentage who reported having at least one alcoholic beverage during the 30 days preceding the survey.

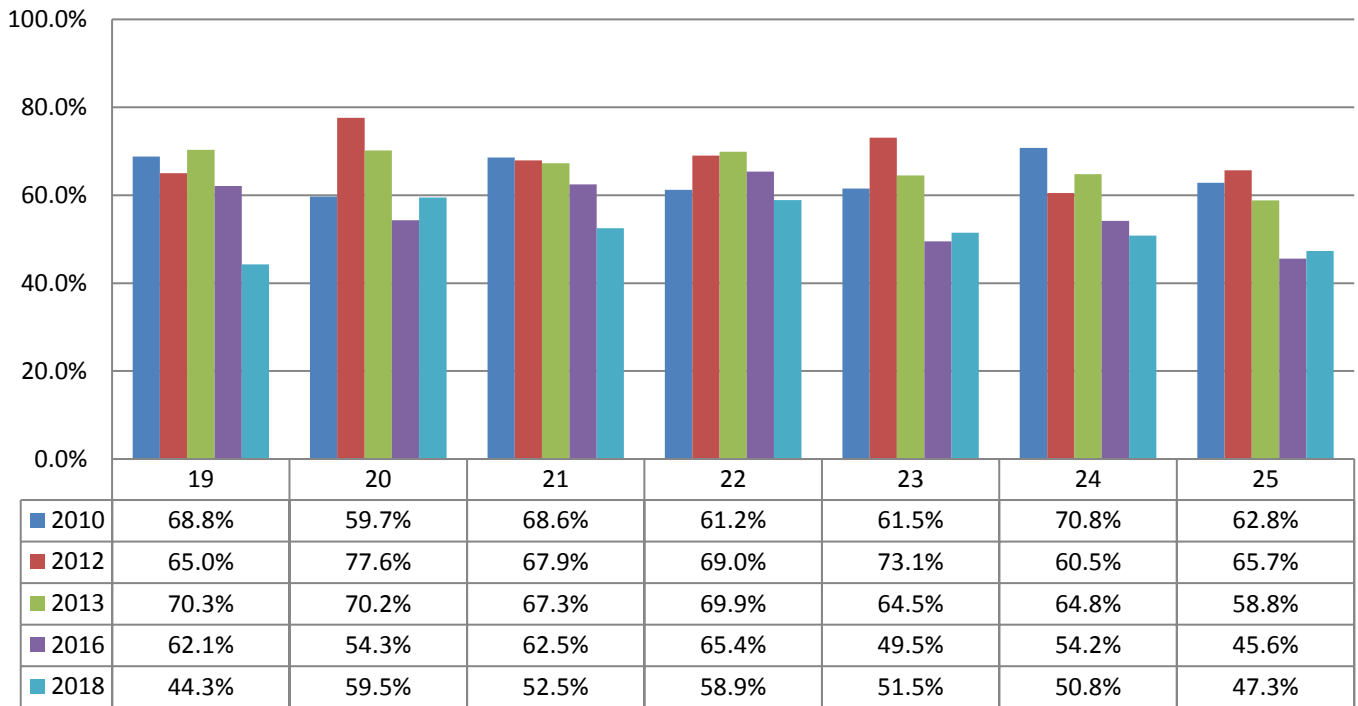
Figure 6: Past month binge drinking among 19-25 year olds in Nebraska by age, 2010-2018*



*Percentage who reported having five or more drinks for men/four or more drinks for women within a couple of hours on at least one of the 30 days preceding the survey

When looking at just those who consumed alcohol in the past 30 days, the rate of binge drinking is higher but there is no significant difference across these age groups: 19-20 (51.6%), 21-22 (55.3%) 23-25 (50.1%) (Figure 7).

Figure 7: Percentage of past-month alcohol users who binge drank during the past-month among 19-25-year-olds in Nebraska by age, 2010-2018*



*Percentage who reported having five or more drinks for men/four or more drinks for women within a couple of hours on at least one of the 30 days preceding the survey, among those who reported having at least one alcoholic beverage during the 30 days preceding the survey

Trends

Past month alcohol use has remained stable overall across all five administrations for all age groups. In 2018, the rate of past month alcohol use for 21-22-year-olds (74.1%) was significantly lower ($p < .05$) than that of 2010 (81.2%).

As for past month binge drinking, for young adults 19-20, there was a significant increase from 2010 (27.3%) to 2012 (34.8%), and 2013 (62.1%) and then a significant decrease in 2016 (24.8%) ($p < .05$). In 2018, the rate of 19-20-year-olds was significantly lower ($p < .05$) than those of 2012 (34.8%) and 2013 (33.3%).

In 2018, this rate of the 21-22 group (40.0%) was also significantly lower ($p < .05$) than that of 2016 (48.0%).

For those 23-25 rates have been fairly stable from 2010 to 2013 but there was a significant decrease from 2013 (49.0%) to 2016 (38.6%) ($p < .05$), followed by a most recent decline to 37.9% in 2018.

Among those 19-20 who drank alcohol in the past 30 days, those who binge drank had consistent rates from 2010 to 2013, but in 2016 (57.2%) there was a significant decrease from 2013 (70.1%) ($p < .05$), followed by another decrease in 2018 (51.6%).

For the 21-22-year-old past month alcohol drinkers, the rates of past month binge drinking fluctuated over the course of four earlier administrations, and there was a sharp decline (55.3%) in 2018 from 2016 (64.0%).

For 23-25-year-olds who had a stable rate from 2010 to 2013 there was a significant drop in 2016 (50.2%) from 2013 (63.0%) ($p < .05$), and the 2018 rate (50.1%) was similar to that of 2016.

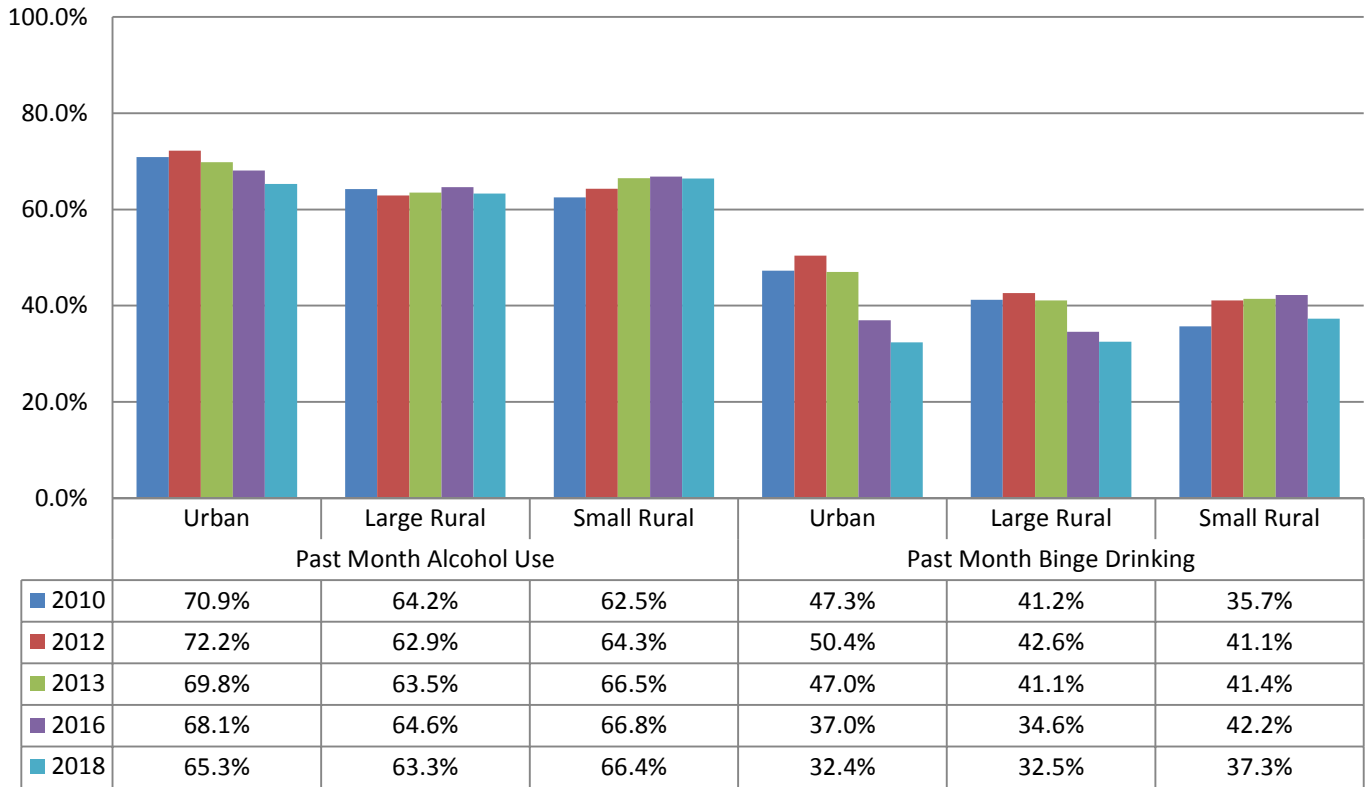
Urbanicity

2010-2018

There is virtually no difference between urban and rural areas in terms of past month alcohol use. Urban respondents reported the highest level of past month binge drinking but the difference is not statistically significant. ($p > .05$).

Both urban and large rural residents have seen a decrease in past month binge drinking in 2016 compared to 2013. Small rural residents, however, have seen a consistent rate from 2012 to 2016 (Figure 8).

Figure 8: Past-month alcohol use* and binge drinking among 19-25-year-olds in Nebraska by urbanicity, 2010-2018**



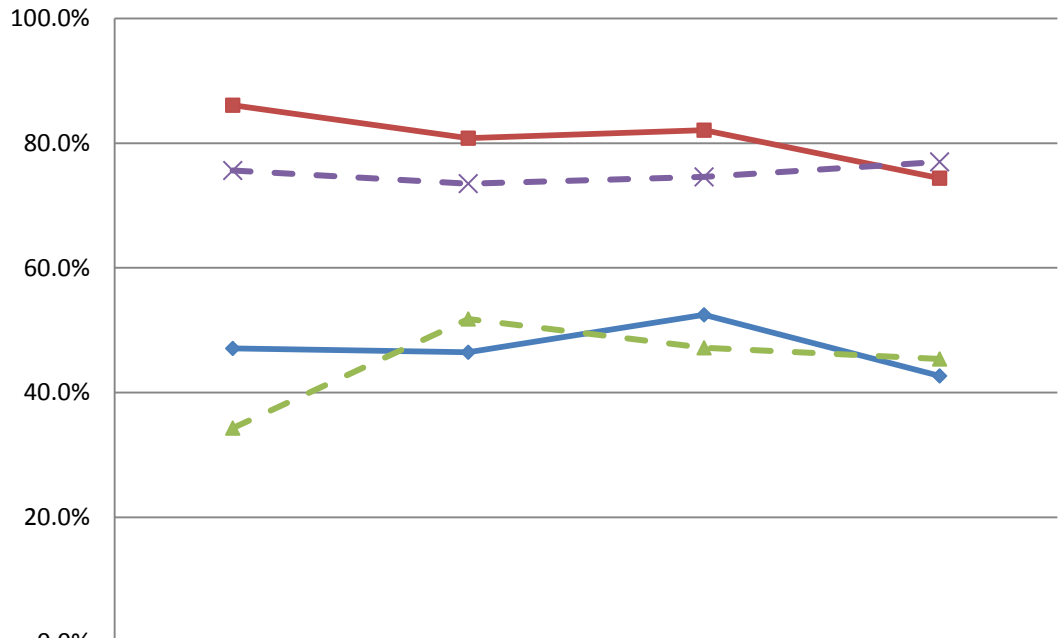
*Percentage who reported having at least one alcoholic beverage during the 30 days preceding the survey.

**Percentage who reported having five or more drinks for men/four or more drinks for women within a couple of hours on at least one of the 30 days preceding the survey.

College Enrollment Status

Except in 2016, in all other four administrations the 21-22-year-old full time college students had the highest rate of past month alcohol use. Overall, those students age 19-20, regardless of their enrollment status, are significantly less likely to use alcohol in the past month than those age 21-22 in 2018 ($p < .05$). Student enrollment status was not collected in 2018 (Figure 9).

Figure 9: Past month alcohol use among 19-22 year olds in Nebraska by student status and age, 2010-2016*

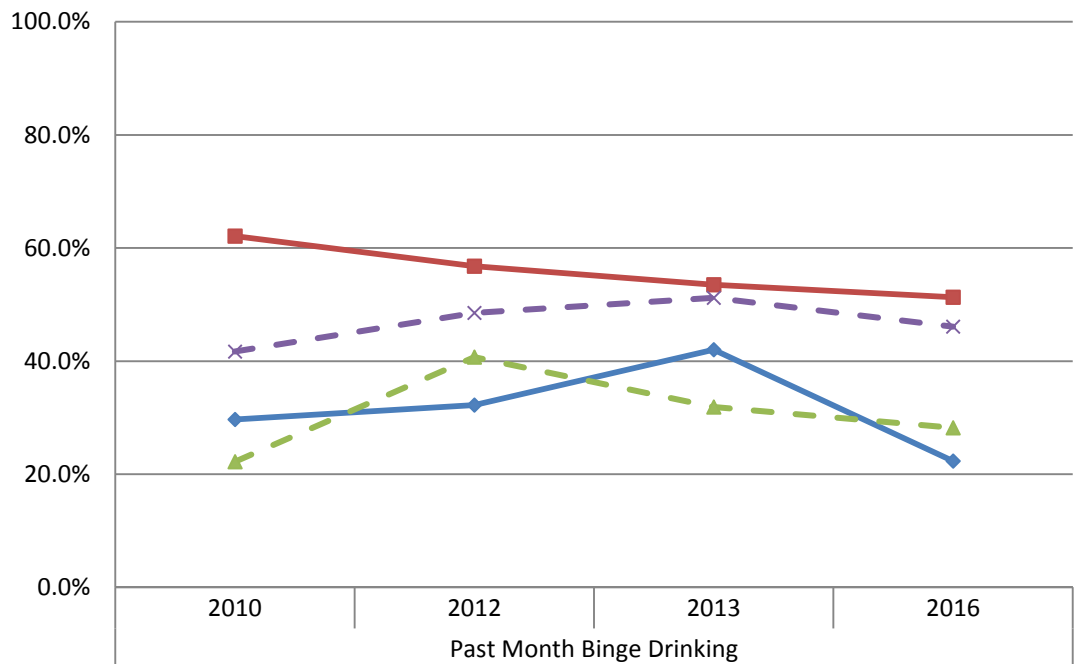


	2010	2012	2013	2016
Past Month Alcohol Use				
19-20 Full Time Student	47.1%	46.5%	52.5%	42.7%
21-22 Full Time Student	86.1%	80.8%	82.1%	74.4%
19-20 Non-Full Time Student	34.3%	51.8%	47.2%	45.4%
21-22 Non-Full Time Student	75.6%	73.5%	74.6%	77.0%

*Percentage who reported having at least one alcoholic beverage during the 30 days preceding the survey.

As for past month binge drinking, from 2010-2016, 21-22-year-old full-time college students reported the highest rate, but have also reported a decrease each year. Full-time students ages 19-20 and 21-22-year-olds reported lower rates of past month binge drinking in 2016 compared to 2013. This is particularly true of 19-20-year-old full time college students which saw a drop in binge drinking from 42.0% in 2013 to 22.3% in 2016. Non-full-time students also reported a lower rate in 2016 compared to 2013 but the difference was smaller than for full-time college students. Overall, non-full time students ages 19-22 are significantly more likely to binge drink in the past than full-time students ages 19-22 in 2016 ($p < .05$) Student status information was not available on the 2018 survey (Figure 10).

Figure 10: Past-month binge drinking among 19-22-year-olds in Nebraska by student status and age, 2010-2016*



	2010	2012	2013	2016
Past Month Binge Drinking				
19-20 Full Time Student	29.7%	32.2%	42.0%	22.3%
21-22 Full Time Student	62.1%	56.8%	53.5%	51.3%
19-20 Non-Full Time Student	22.2%	40.7%	31.9%	28.2%
21-22 Non-Full Time Student	41.7%	48.5%	51.2%	46.1%

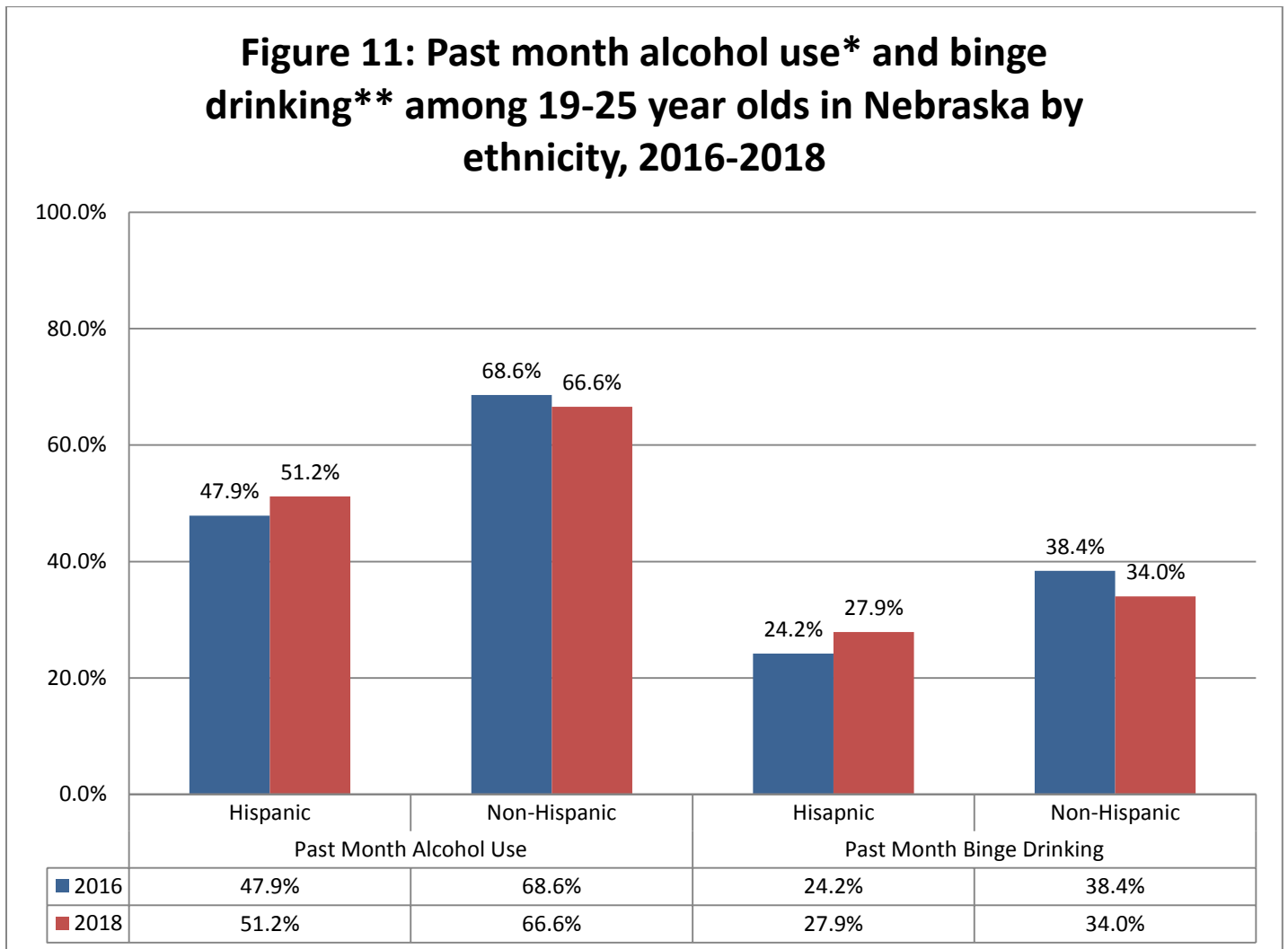
*Percentage who reported having five or more drinks for men/four or more drinks for women within a couple of hours on at least one of the 30 days preceding the survey.

Ethnicity

2016-2018

In 2016, young adults who are Hispanic reported significantly lower past month alcohol use than non-Hispanics (47.9% Hispanics vs 68.6% non-Hispanics). Similarly, Hispanics reported significantly lower rates of binge drinking (24.2% Hispanics vs 38.4% Non-Hispanics) ($p < .05$).

In 2018, while no significant difference was found in past month binge drinking, non-Hispanics reported significantly higher rate of past month alcohol use than Hispanics (51.2% Hispanics vs 66.6% non-Hispanics) (Figure 11).



*Percentage who reported having at least one alcoholic beverage during the 30 days preceding the survey.

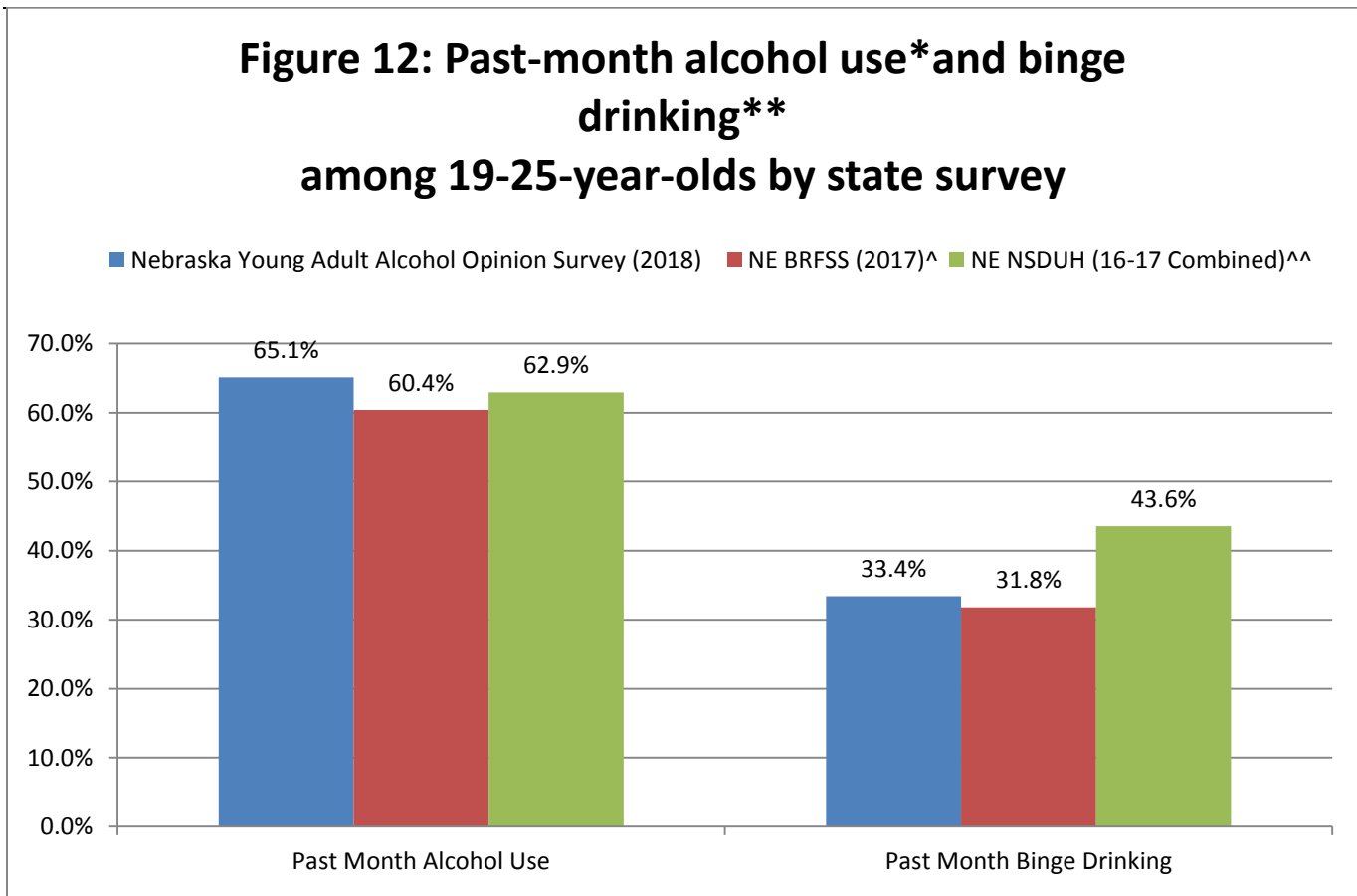
**Percentage who reported having five or more drinks for men/four or more drinks for women within a couple of hours on at least one of the 30 days preceding the survey.

Results Compared to Other Surveys of Young Adults

Past month alcohol use results from the 2018 Nebraska Young Adult Alcohol Opinion Survey were higher than estimates from the Nebraska Behavioral Risk Factor Surveillance System (NE BRFSS) survey and comparable to the Nebraska results from the National Survey on Drug Use and Health (NE NSDUH). Past month binge drinking results are higher for the 2018 NYAAOS than the BRFSS but lower than the NSDUH results (Figure 12).

It should be noted that the BRFSS results are from 2017, while the NSDUH results are a combination of 2016 and 2017 results.

NSDUH is an annual face-to-face survey of persons 12 and older, and BRFSS is an annual telephone survey of persons 18 and older.



*Percentage who reported having at least one alcoholic beverage during the 30 days preceding the survey.

**Percentage who reported having five or more drinks for men/four or more drinks for women within a couple of hours on at least one of the 30 days preceding the survey (NYAAOS), five or more drinks for men/four or more drinks for women on at least one occasion during the 30 days preceding the survey (NE BRFSS), five or more drinks within a couple of hours on at least one of the 30 days preceding the survey (NE NSDUH).

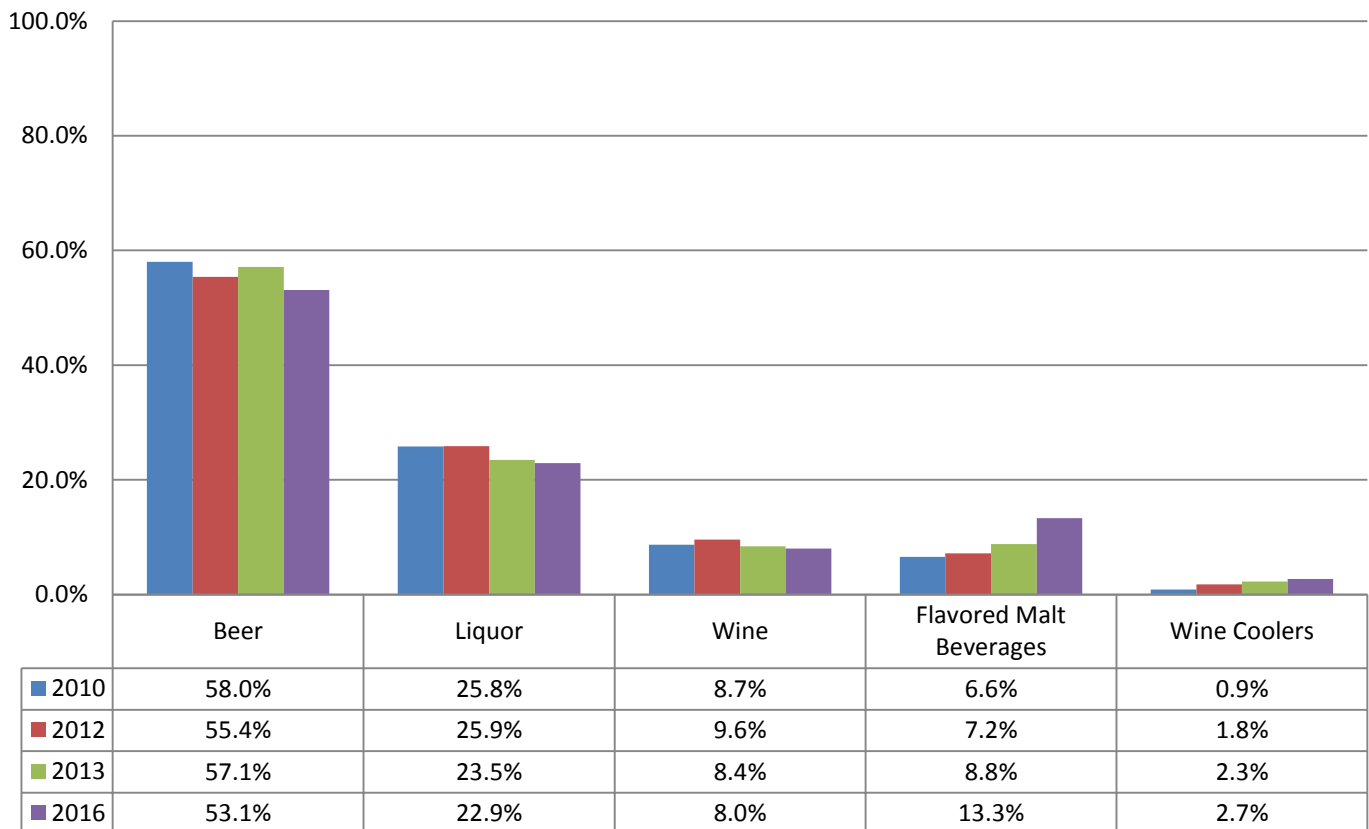
[^]Estimate represents 18-24 -year-olds (not 19-25 -year-olds).

^{^^}Estimate represents 18-25-year-olds (not 19-25-year-olds).

Type of Alcohol Consumed

Except 2018 when the type of alcohol consumed question was not asked, in all four years of the survey, beer was the type of alcohol usually consumed among those who reported drinking alcohol in the past month (58.0% in 2010, 55.4% in 2012, 57.1% in 2013 and 53.1% in 2016), followed by liquor (25.8% in 2010, 25.9% in 2012, 23.5% in 2013 and 22.9% in 2016). Flavored malt beverages have increased in popularity too (13.3% in 2016 from 8.8% in 2013) making it the third most common type of alcohol usually consumed (Figure 13).

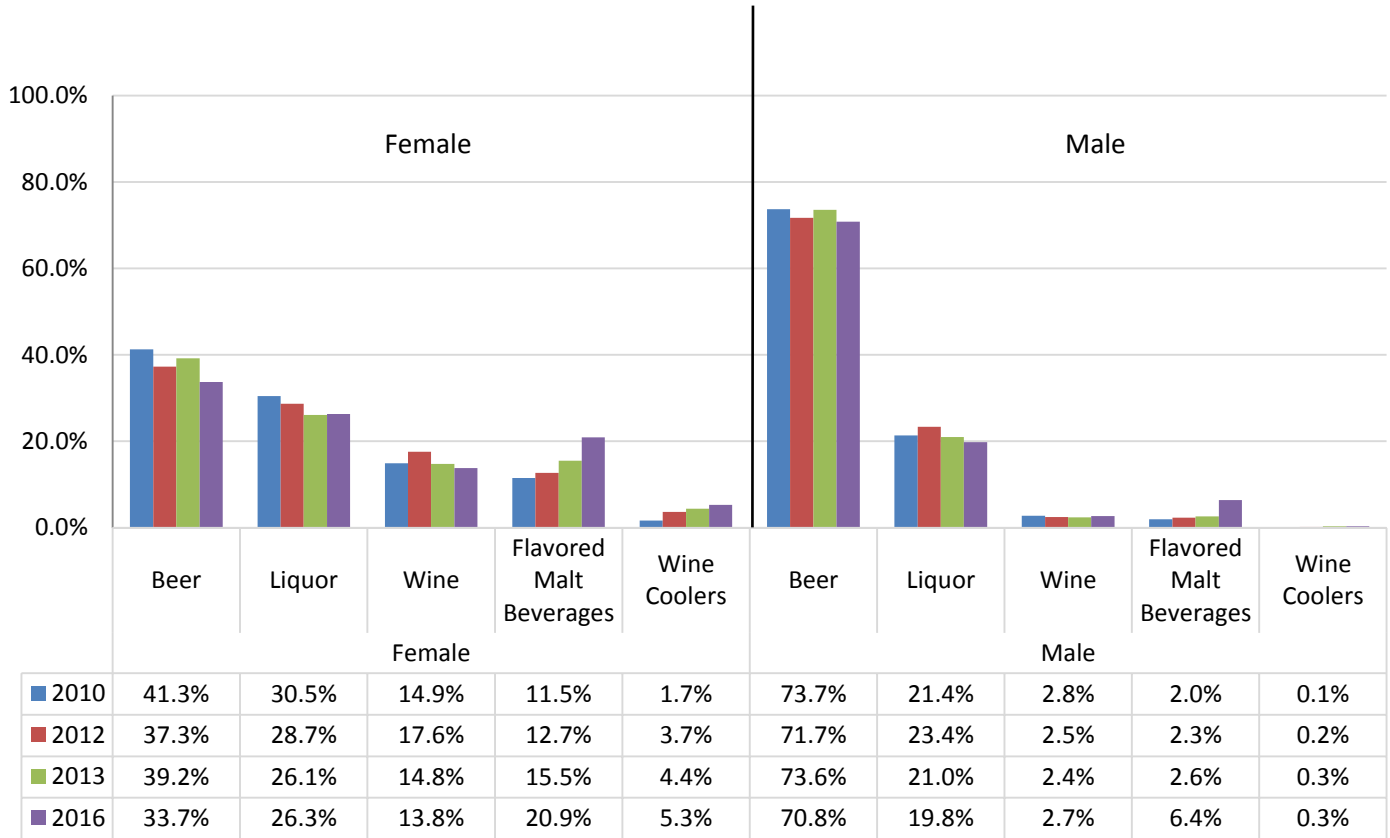
Figure 13: Type of alcohol usually consumed during the past month among 19-25 -year-olds in Nebraska, 2010-2016*



*Among past month alcohol users, the type of alcohol that they usually drank during the 30 days preceding the survey.

In four years of the survey where the type of alcohol question was asked, male past month alcohol users were much more likely than females ($p < .05$) to report beer as the alcoholic beverage that they usually drank (73.7% in 2010, 71.7% in 2012, 73.6% in 2013, 70.8% in 2016). Beer was also the most popular drink for females. However, females were much more likely than males to report wine, flavored malt beverages, and wine coolers as the type of alcohol they usually drank ($p < .05$) (Figure 14).

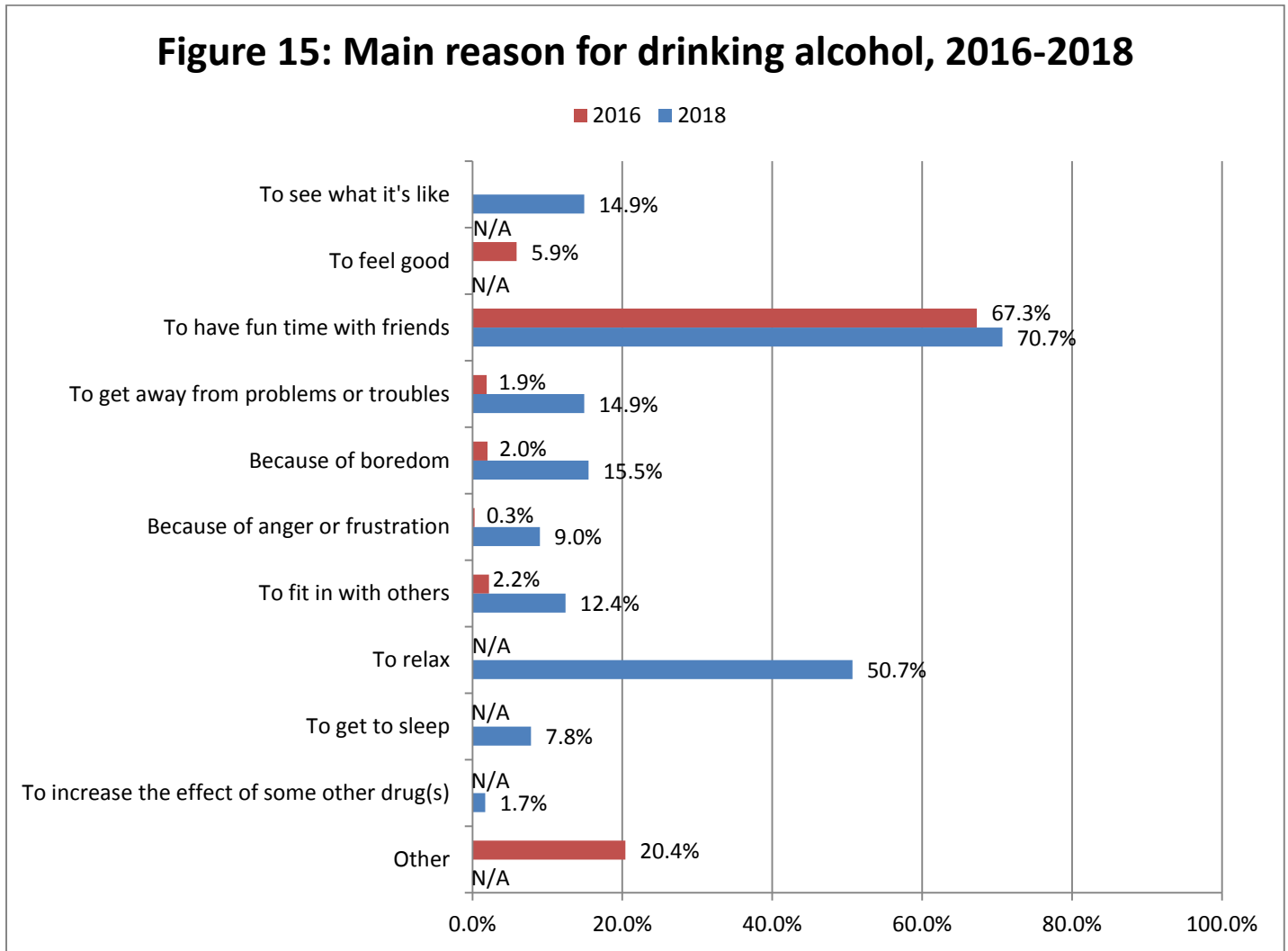
Figure 14: Type of alcohol usually consumed during the past month among 19-25-year-olds in Nebraska by gender, 2010-2016*



*Among past month alcohol users, the type of alcohol that they usually drank during the 30 days preceding the survey.

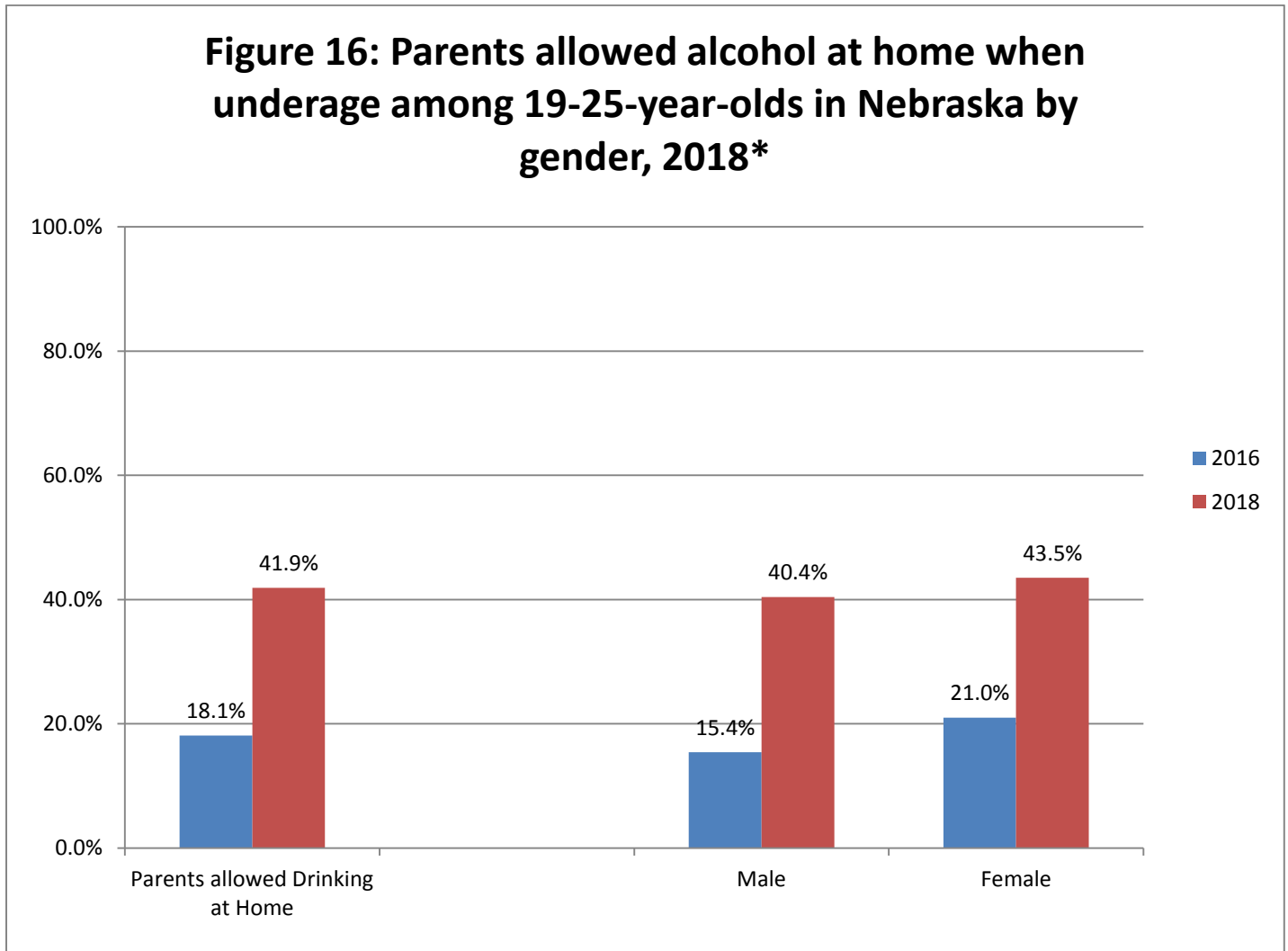
Main Reason for Drinking Alcohol

The 2016 and 2018 administrations both asked respondents what the main reason was that they drank alcohol beverages. In both years, the most common reason was “to have a fun time with friends” (2016 67.3% vs 70.7% 2018) (Figure 15). Young adults in 2018 reported significantly higher rates of “to get away from problems or troubles” (2016 1.9 vs 2018 14.9%), “because of boredom” (2016 2.0% vs 2018 15.5%), “because of anger or frustration” (2016 0.3% vs 2018 9.0%), as well as “to fit in with others” (2016 2.2% vs 2018 12.4%) ($p < .05$).



Parents Allowed Underage Drinking at Home

The 2016 NYAAOS asked respondents if while growing up their parents or caregivers allowed them to drink alcohol beverages in their home when they were underage. Overall 18.1% indicated their parents allowed them to drink alcohol at home. Females (21.0%) were significantly more likely to be allowed to drink alcohol at home when underage than males (15.4%) ($p < .05$) (Figure 16). In 2018, this question and its answer options were worded differently so responses cannot be directly comparable between the years. No significant difference was found between males (40.4%) and females (43.5%) in 2018.



*Those who reported that while growing up their parents or caregivers allowed them to drink alcohol beverages in their home when they were underage

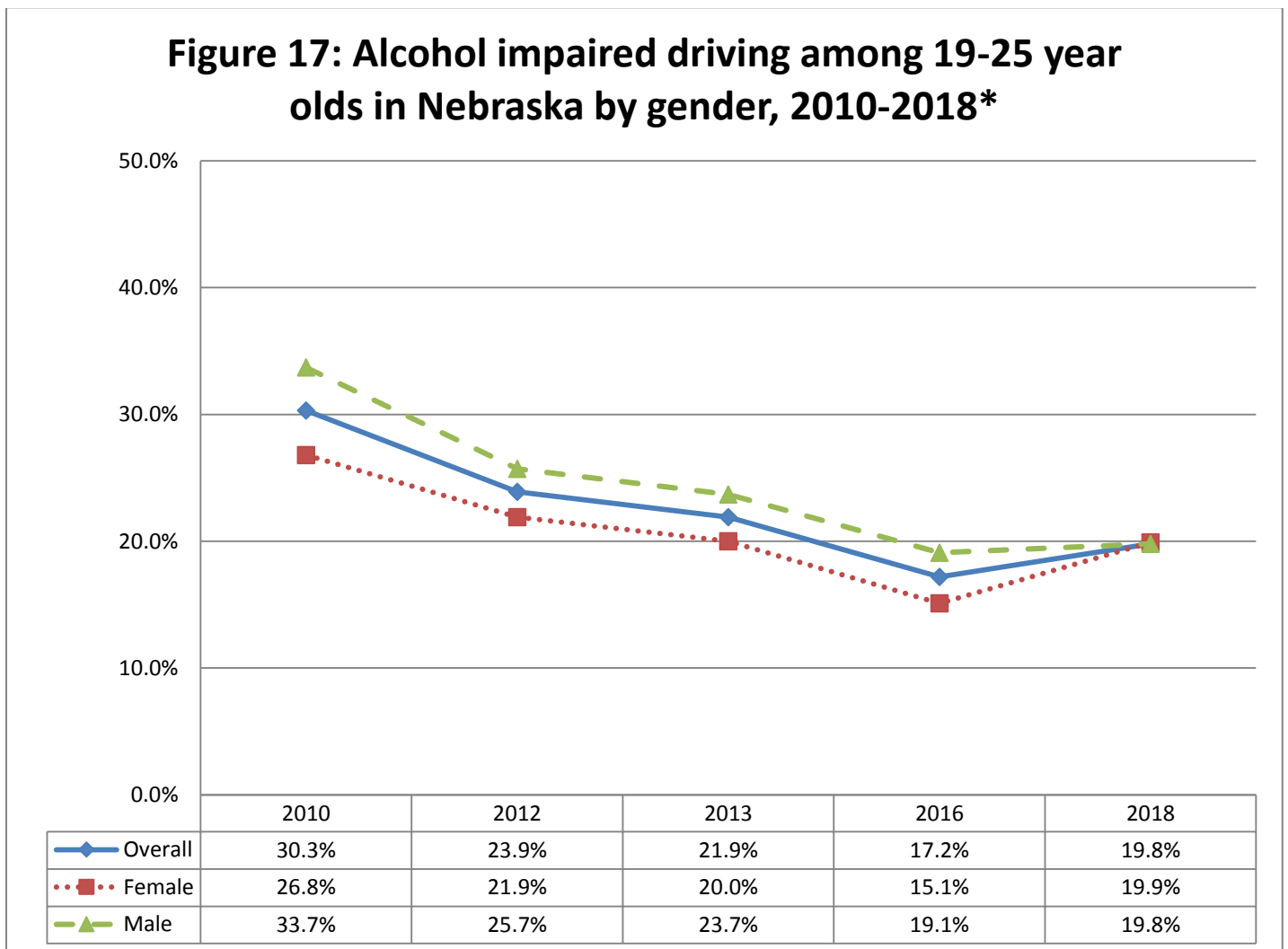
Impaired Driving

Alcohol-impaired Driving

The percentage of young adults who reported past year driving under the influence of alcohol decreased slightly from a rate of 21.9% in 2013 to 17.2% in 2016, and increased in 2018 (19.8%). The percentage reporting past month driving after binge drinking decreased slightly from 6.4% in 2013 to 4.3% in 2016 ($p < .05$), and decreased slightly again to 4.0% in 2018. These decreases have been consistent in each year of the survey.

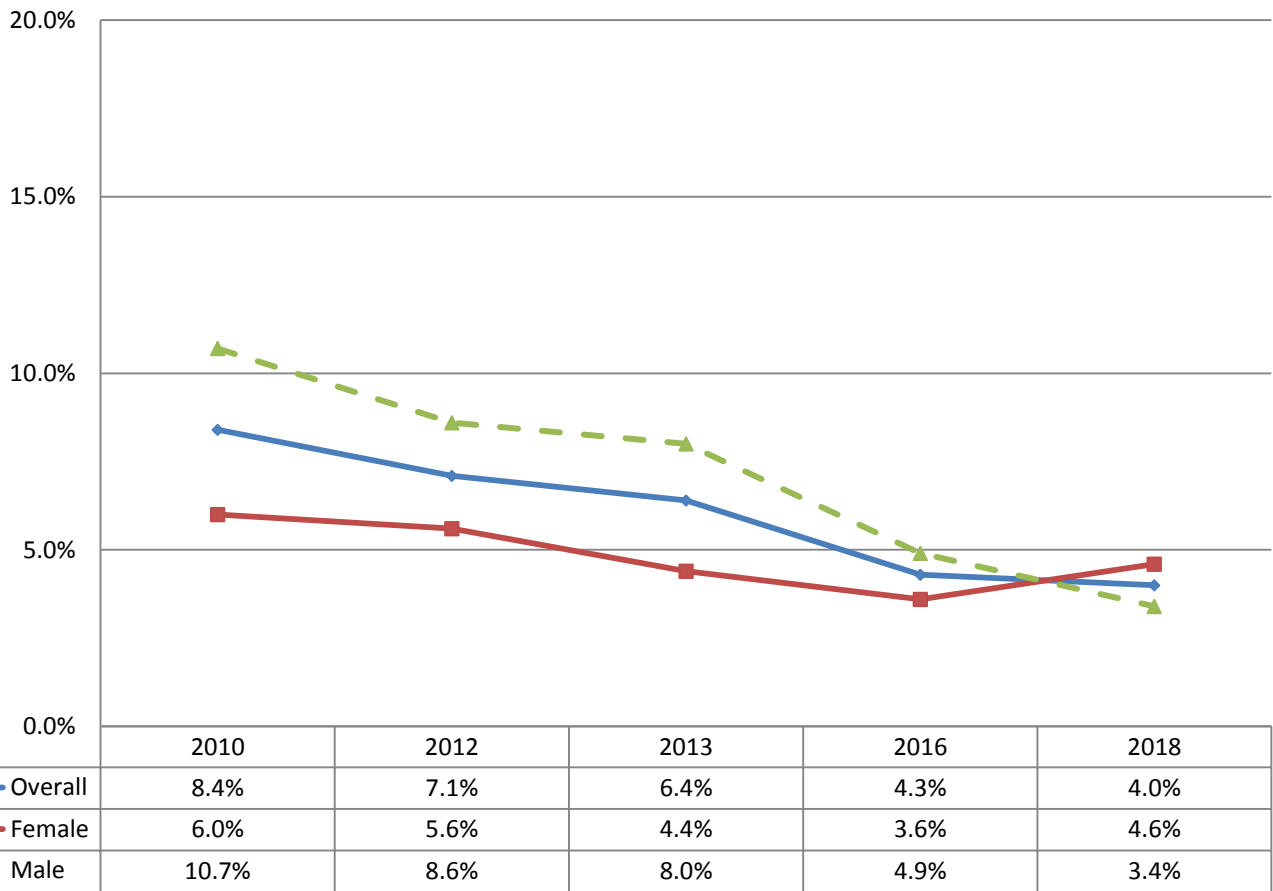
In nearly all five years of the survey, males were more likely than females to report driving under the influence of alcohol in the past year; with the exception of 2018 where females reported a slightly higher rate of past year, alcohol impaired driving. Males reported a significantly higher rate of alcohol-impaired driving in the past year than females in 2010 ($p < .05$).

In three administrations from 2010 to 2013, males reported significantly higher rates of driving after binge drinking than females ($p < .05$). From 2016 to 2018, males still reported higher rates than females, but these differences were not significant (Figure 17 & Figure 18).



*Percentage who reported that they drove a vehicle while under the influence of alcohol during the 12 months preceding the survey.

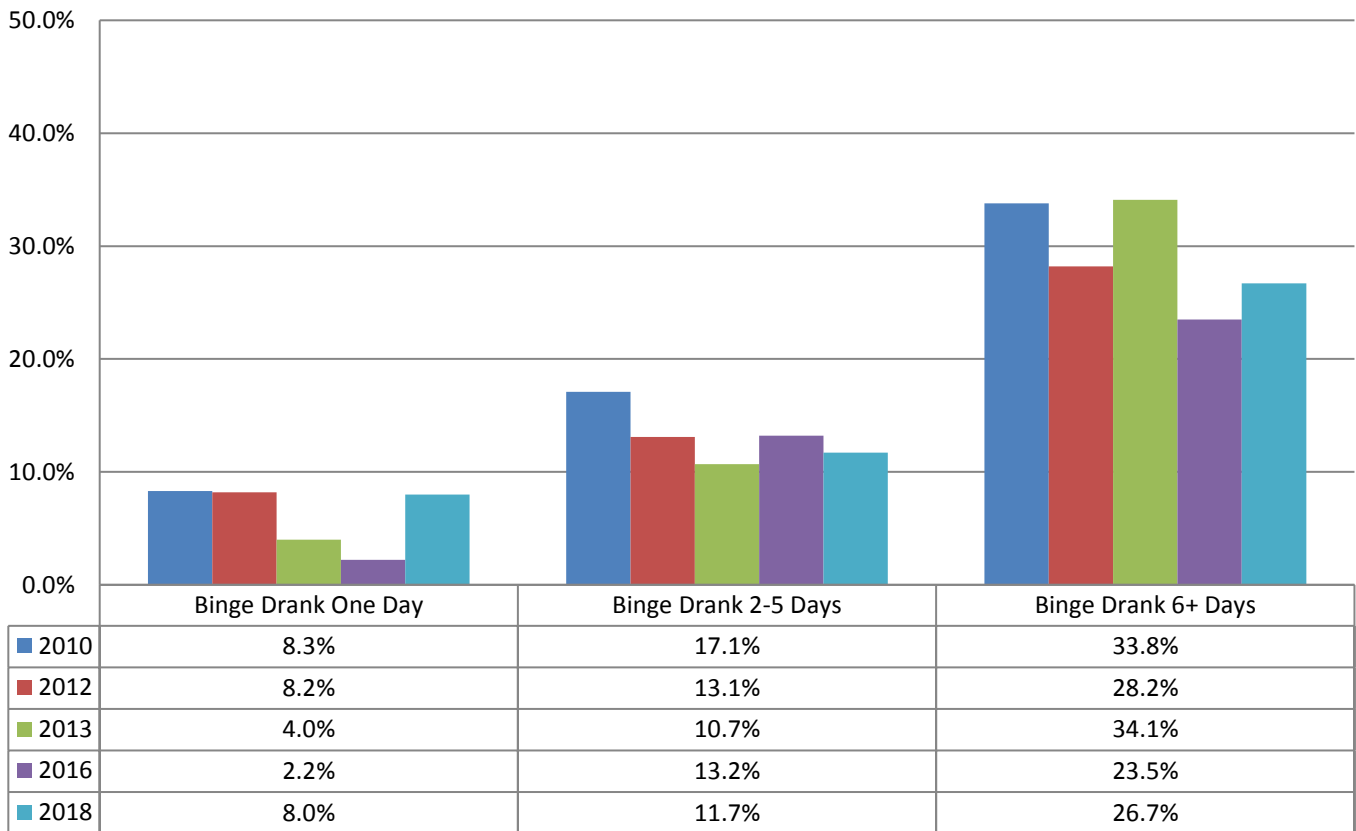
Figure 18: Driving after binge drinking among 19-25-year-olds in Nebraska by gender, 2010-2018*



*Percentage who reported that they drove after consuming five drinks of alcohol for males/four drinks for females within a couple of hours during the 30 days preceding the survey.

The rate of past month driving after binge drinking among respondents increases dramatically with the number of reported days of binge drinking ($p < .05$). In 2018, approximately one-fourth (26.7%) of young adults who reported binge drinking 6 or more days in the past month, also reported driving after binge drinking in the past month. Only 8.0% of young adults who reported binge drinking 1 day in the past month, also reported driving after binge drinking in the past month, which is an increase compared to the rate of 2.2% in 2016 (Figure 19).

Figure 19: Past month driving after binge drinking by frequency of binge drinking during the past month among 19-25 year olds in Nebraska, 2010-2018*



*Percentage who reported that they drove after consuming five drinks of alcohol for males/four drinks for females within a couple of hours during the 30 days preceding the survey.

Demographic Differences in Alcohol-Impaired Driving

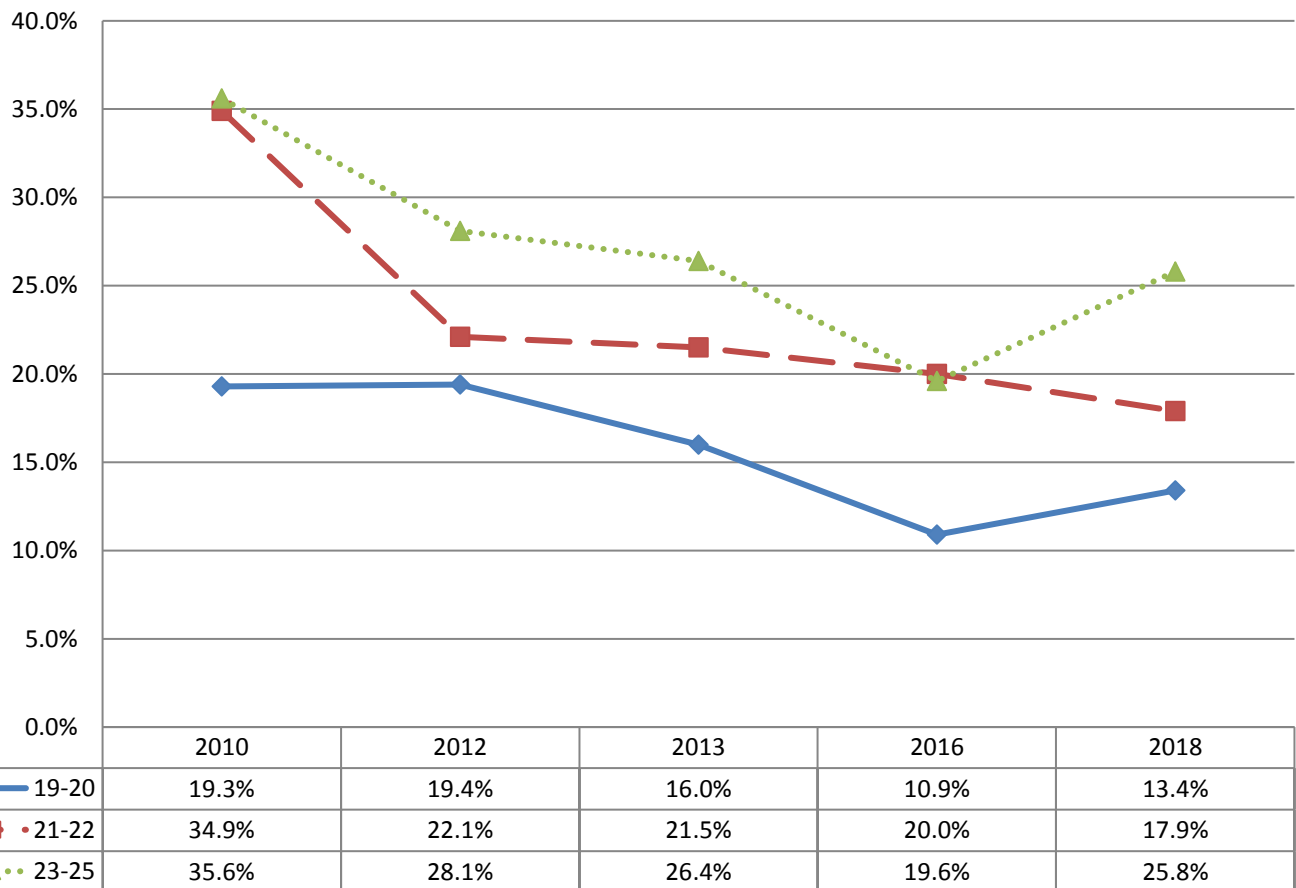
Gender

As previously mentioned, in all five years of the survey except 2018, males are more likely to report past year driving under the influence of alcohol and past month driving after binge drinking. In 2018, there is no significant difference between males and females in terms of past month alcohol impaired driving.

Age

For 19-20-year-olds and 23-25-year-olds, the rates of driving after alcohol use increased in 2018 after an overall decline from 2010 to 2016. For 19-20-year-olds, a significant drop took place in 2016 (10.9%), compared to that of 2013 (16.0%) ($p < .05$). For 23-25-year-olds, one significant decrease happened in 2012 (28.1%), compared to 35.6% in 2010 ($p < .05$), and another decrease in 2016 (19.6%) from 2013 (26.4%) was also significant ($p < .05$). For 21-22-year-olds, the rates of driving after alcohol use follow a continued declining trend over the course of five administrations, with one significant drop in 2012 (22.1%) compared to 34.9% in 2010 ($p < .05$) (Figure 20).

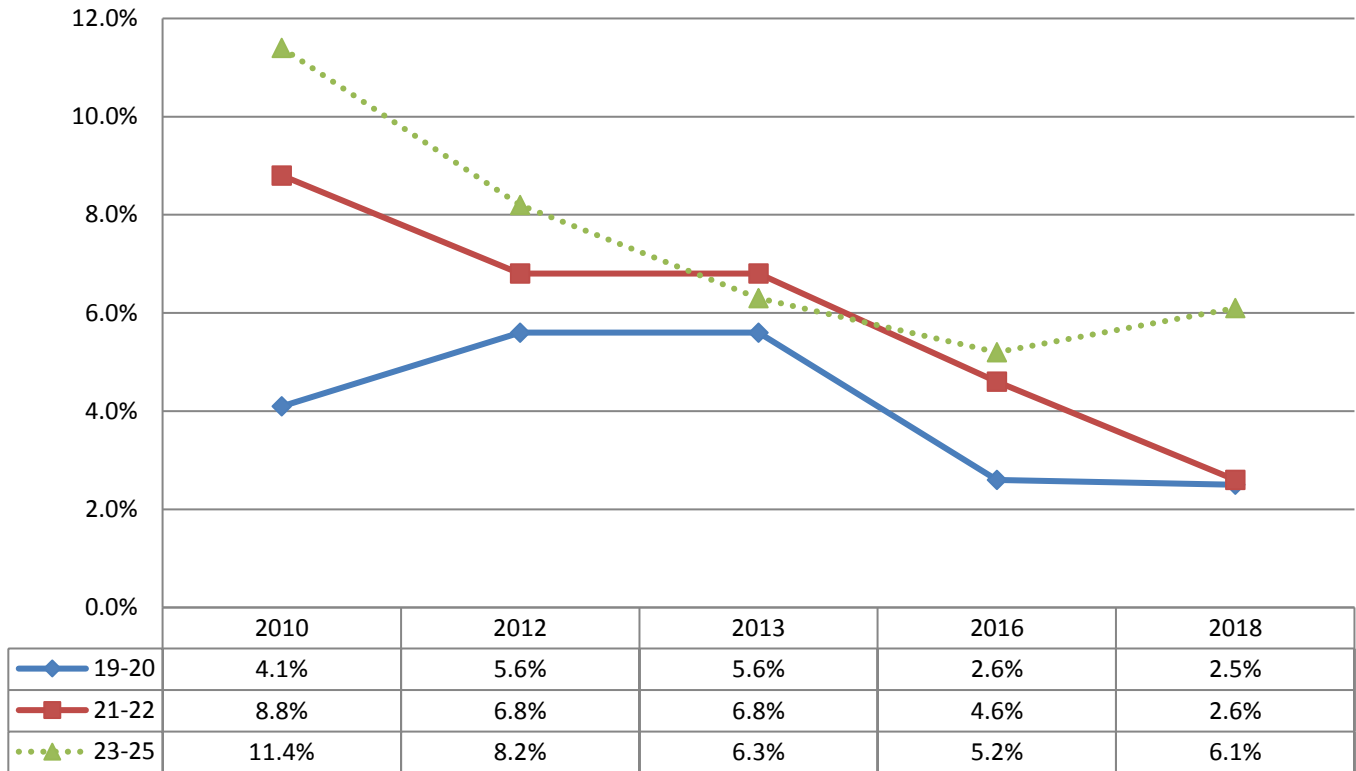
Figure 20: Alcohol impaired driving in past year among 19-25 year olds in Nebraska by age, 2010-2018*



*Percentage who reported that they drove a vehicle while under the influence of alcohol during the 12 months preceding the survey.

The rates of driving after binge drinking have minor fluctuations over time. For 19-20-year-olds, the rate in 2016 (2.6%) decreased significantly from that in 2013 (5.6%) ($p < .05$). For 21-22-year-olds, the rates in 2016 (4.6%) was significantly lower than that of 2010 (8.8%) ($p < .05$), and the rate in 2018 (2.6%) was significantly lower than the rates of 2010 to 2013 ($p < .05$). For 23-25-year-olds, the rates from 2013 to 2018 were all significantly lower than that of 2010 (11.4%) ($p < .05$) (Figure 21).

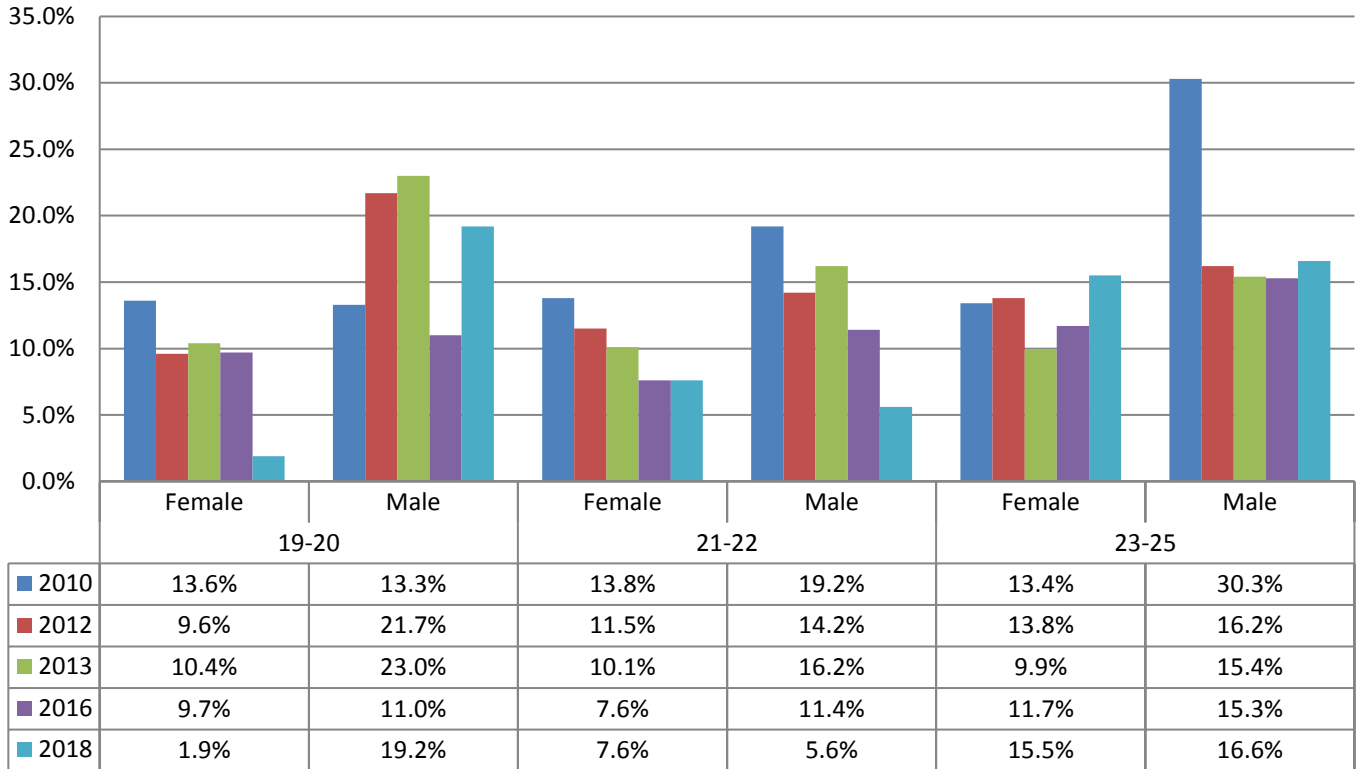
Figure 21: Alcohol-impaired driving after binge drinking in past-month among 19-25 -year-olds in Nebraska by age, 2010-2018*



*Percentage who reported that they drove after consuming five drinks of alcohol for males/four drinks for females within a couple of hours during the 30 days preceding the survey.

When looking at just those who reported binge drinking in the past month, females age 19-20 in 2018 had a significantly lower rate of driving after binge drinking (1.9%) compared to the prior administrations ($p < .05$). Males age 21-22 also had a significantly lower rate than the earlier administrations (5.6%) ($p < .05$). However, in 2018, males age 19-20, females age 23-25, and males age 23-25 all have an increased rate compared to 2016 (Figure 22).

Figure 22: Percentage of past-month binge drinkers who drove after binge drinking during the past-month among 19-25-year-olds in Nebraska by age and gender, 2010-2018*



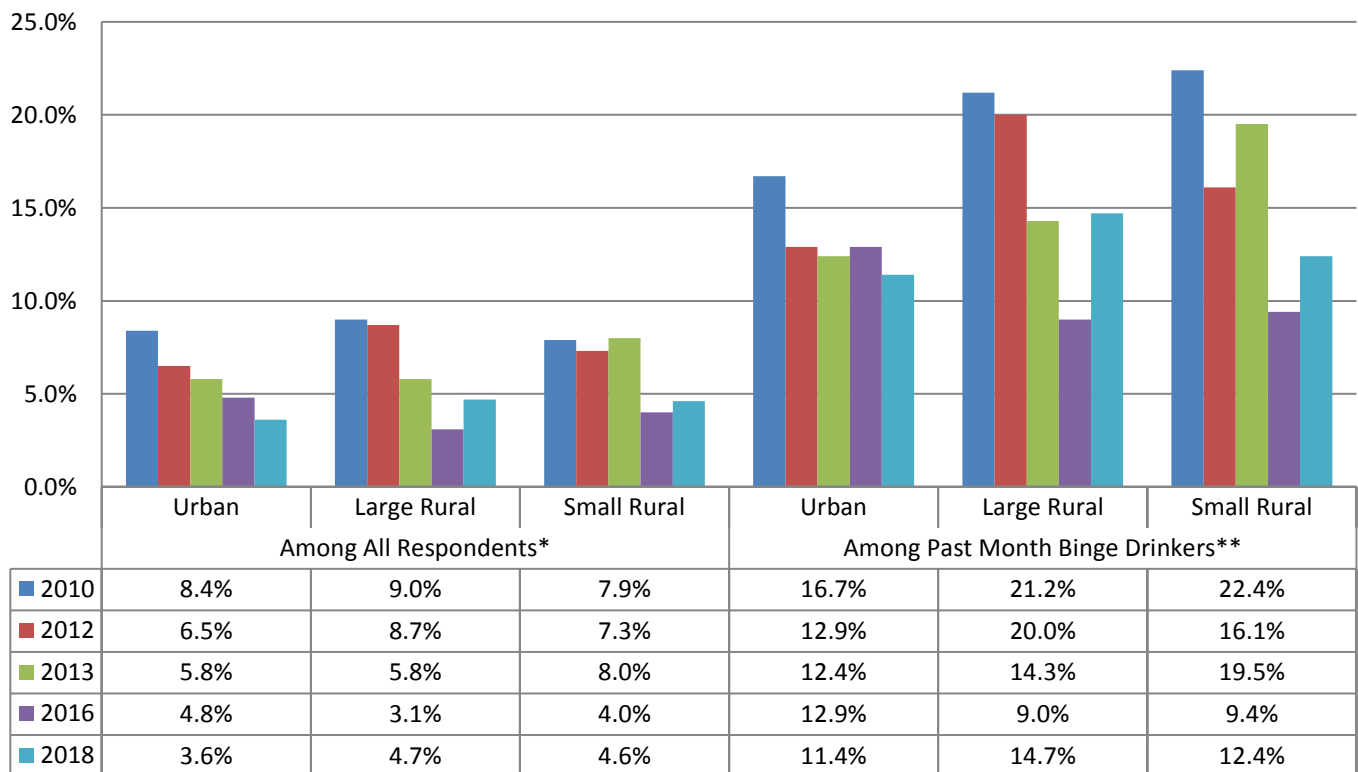
*Percentage who reported that they drove shortly after consuming five drinks of alcohol for males/four drinks for females during the 30 days preceding the survey, among those who reported binge drinking during the 30 days preceding the survey.

Urbanicity

In all four administrations of the survey, there was no significant difference among urban, large rural, and small rural for past month driving after binge drinking. However, among past month binge drinkers, large rural respondents were less likely than urban or small rural respondents to report past month driving after binge drinking but the difference was not significant.

Among respondents from small rural areas there has been little difference between 2010 and 2016 in past month driving after binge drinking however, when just looking at those who reported past month binge drinking there has been a reduction from 22.4% in 2010 to 9.4% to 2016. Large rural respondents reported a reduction of past month driving after binge drinking from 9.0% in 2010 to 3.1% in 2016. When just looking at those that reported binge drinking, the same pattern emerges with a rate of 21.2% in 2010 to 9.0% in 2016. Urban residents have seen a slight reduction in driving after binge drinking from 8.4% in 2010 to 4.8% in 2016 and a similar reduction among just those who reported binge drinking from 16.7% in 2010 to 12.9% in 2016, but the reduction has not been as much as rural residents (Figure 23).

Figure 23: Past-month driving after binge drinking among 19-25-year-olds in Nebraska by urbanicity, 2010-2018*



*Percentage who reported that they drove shortly after consuming five drinks of alcohol for males/four drinks for females during the 30 days preceding the survey.

**Percentage who reported that they drove shortly after consuming five drinks of alcohol for males/four drinks for females during the 30 days preceding the survey, among those who reported binge drinking during the 30 days preceding the survey.

College Enrollment Status

In 2018, student enrollment status information was not collected.

Non-full-time students, ages 21-22, had the highest rate of past year driving under the influence of alcohol (21.1%) in 2016. They also had the highest rate of past month driving after binge drinking (4.9%) in 2016.

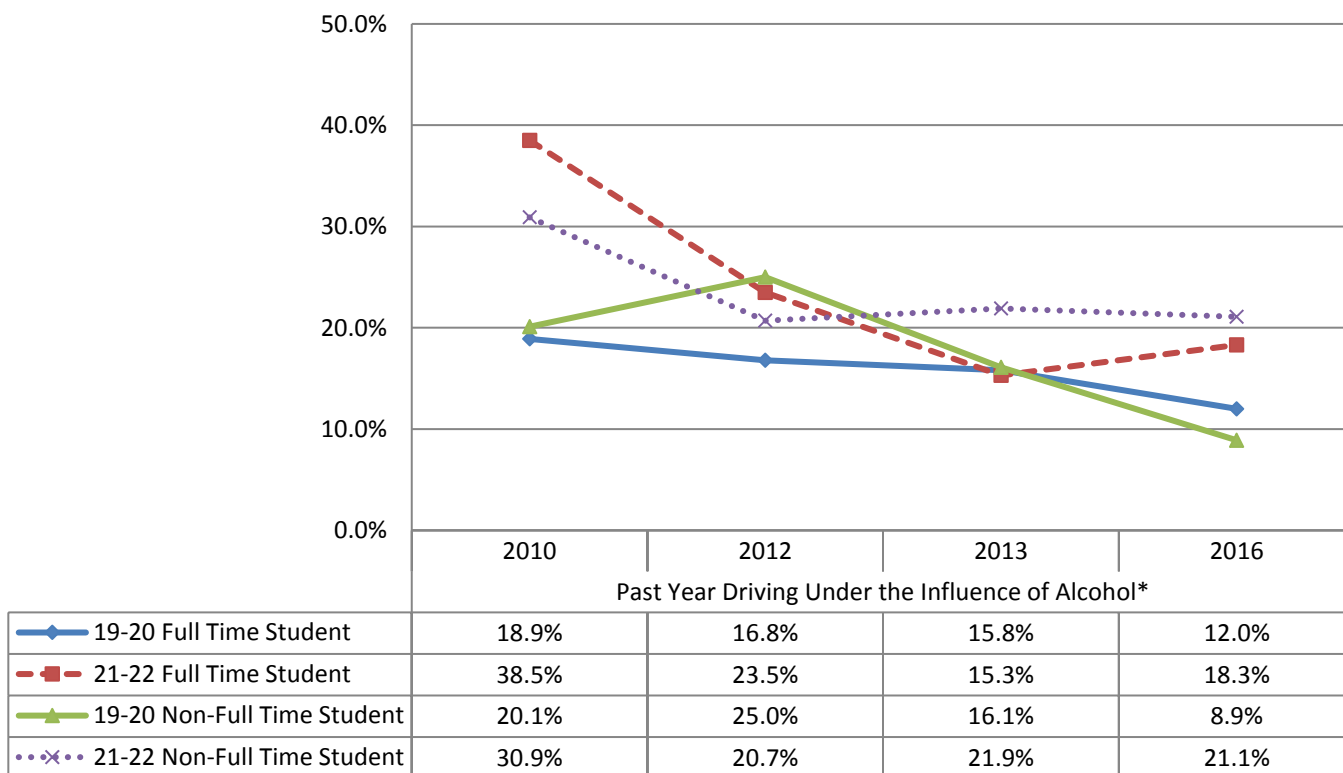
Among full-time students, both age groups have seen a decrease in past year driving under the influence of alcohol. 19 to 20-year-olds saw a decrease from 18.9% in 2010 to 12.0% in 2016, while those 21-22 have seen a substantial drop from 38.5% in 2010 to 18.3% in 2016.

A different trend emerges regarding past month driving after binge drinking. Full-time students 21-22 years old have seen a decrease from 10.3% in 2010 to 4.2% in 2016, while those 19-20 have seen a very slight increase from 3.2% in 2010 to 3.6% in 2016.

Among non-full-time students, both age groups have seen a decrease in past year driving under the influence of alcohol. Those 19-20 saw a decrease from 20.1% in 2010 to 8.9% in 2016 while those 21-22 have seen a decrease from 30.9% in 2010 to 21.1% in 2016.

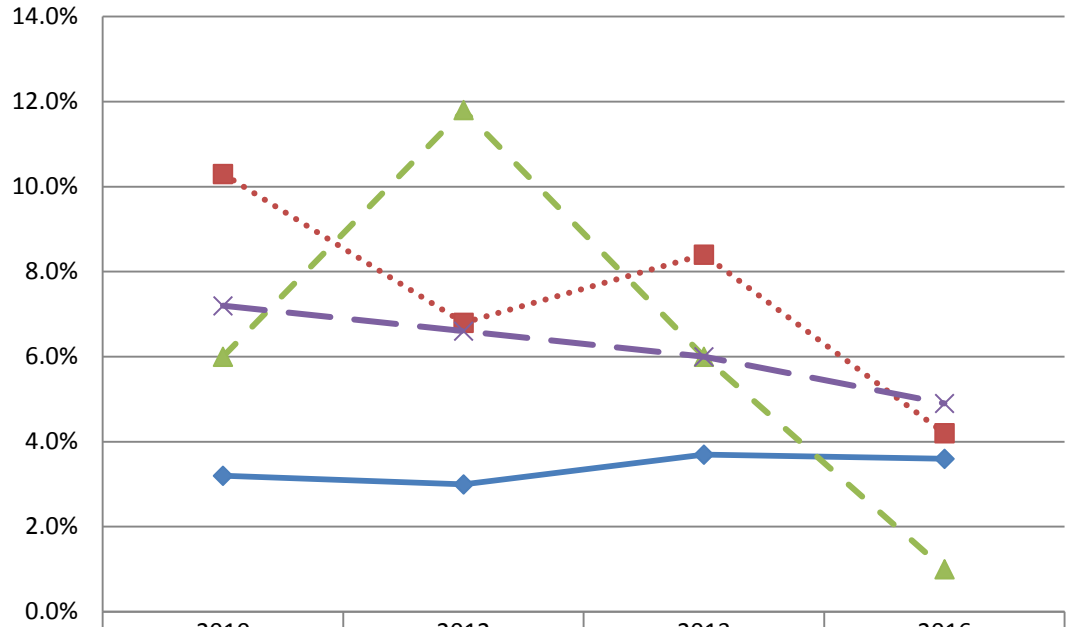
Unlike full-time students, both age groups of non-full-time students have seen a decrease in past month driving after binge drinking. Those 19-20 saw a decrease from 6.0% in 2010 to 1.0% while those 21-22 saw a decrease from 7.2% in 2010 to 4.9% in 2016 (Figures 24 and Figure 25).

Figure 24: Past-year driving under the influence of alcohol among 19-22-year-olds in Nebraska by student status and age, 2010-2016*



*Percentage who reported that they drove a vehicle while under the influence of alcohol during the 12 months preceding the survey. *

Figure 25: Past-month driving after binge drinking among 19-22-year-olds in Nebraska by student status and age, 2010-2016*



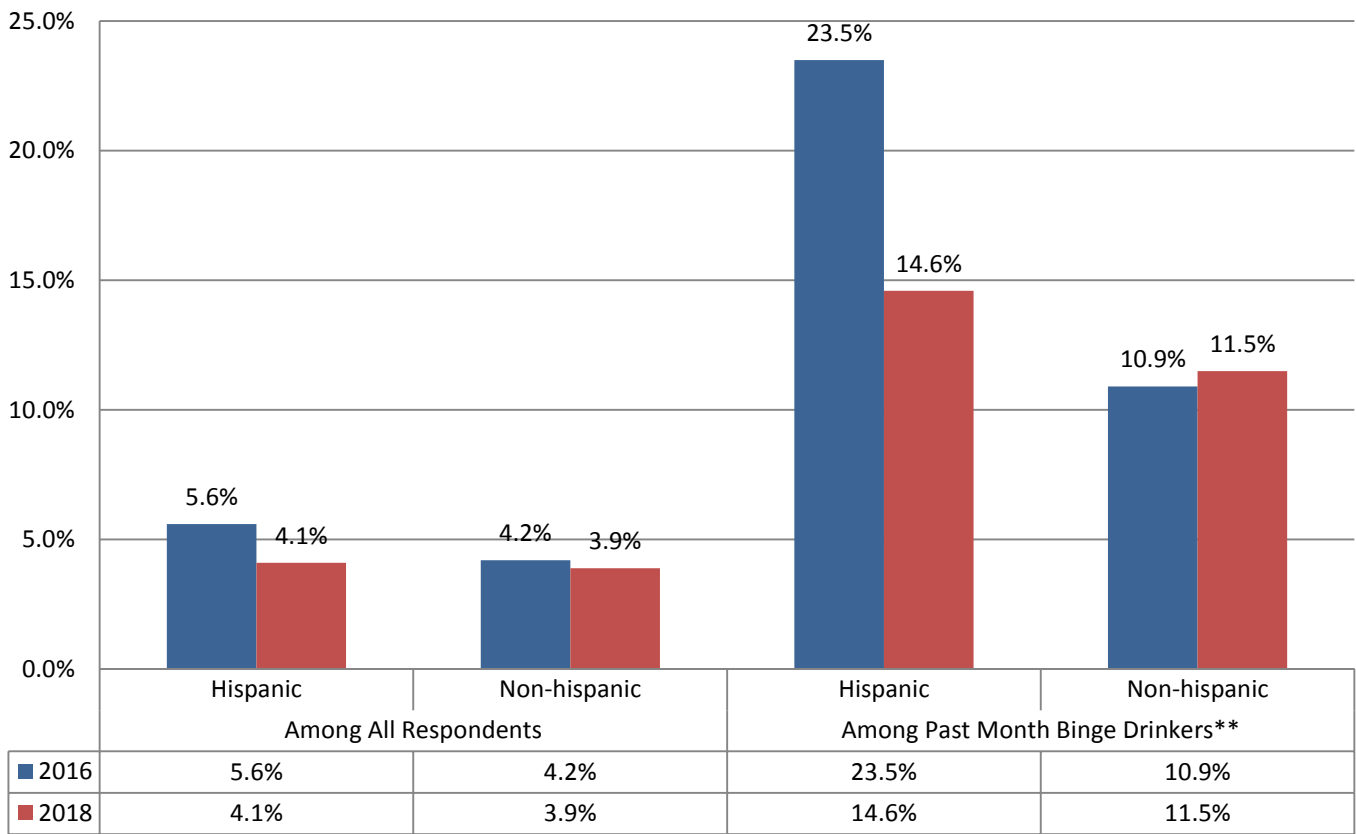
	2010	2012	2013	2016
19-20 Full Time Student	3.2%	3.0%	3.7%	3.6%
21-22 Full Time Student	10.3%	6.8%	8.4%	4.2%
19-20 Non-Full Time Student	6.0%	11.8%	6.0%	1.0%
21-22 Non-Full Time Student	7.2%	6.6%	6.0%	4.9%

*Percentage who reported that they drove after consuming five drinks of alcohol for males/four drinks for females within a couple of hours during the 30 days preceding the survey.

Ethnicity

From 2016 to 2018, no statistically significant differences were found in the percentages of past month driving after binge drinking in any of these categories. In 2016, overall, young adults in the past 30 days preceding the survey reported significantly lower rate of driving after binge drinking than the past month binge drinkers regardless of their ethnicity ($p < .05$). In 2018, young adults in the state as a whole also reported significantly lower rate of driving after binge drinking than those past month binge drinkers regardless of ethnicity ($p < .05$) (Figure 26).

Figure 26: Past month driving after binge drinking among 19-25 year olds in Nebraska by ethnicity, 2016-2018*



*Percentage who reported that they drove shortly after consuming five drinks of alcohol for males/four drinks for females during the 30 days preceding the survey.

**Percentage who reported that they drove shortly after consuming five drinks of alcohol for males/four drinks for females during the 30 days preceding the survey, among those who reported binge drinking during the 30 days preceding the survey.

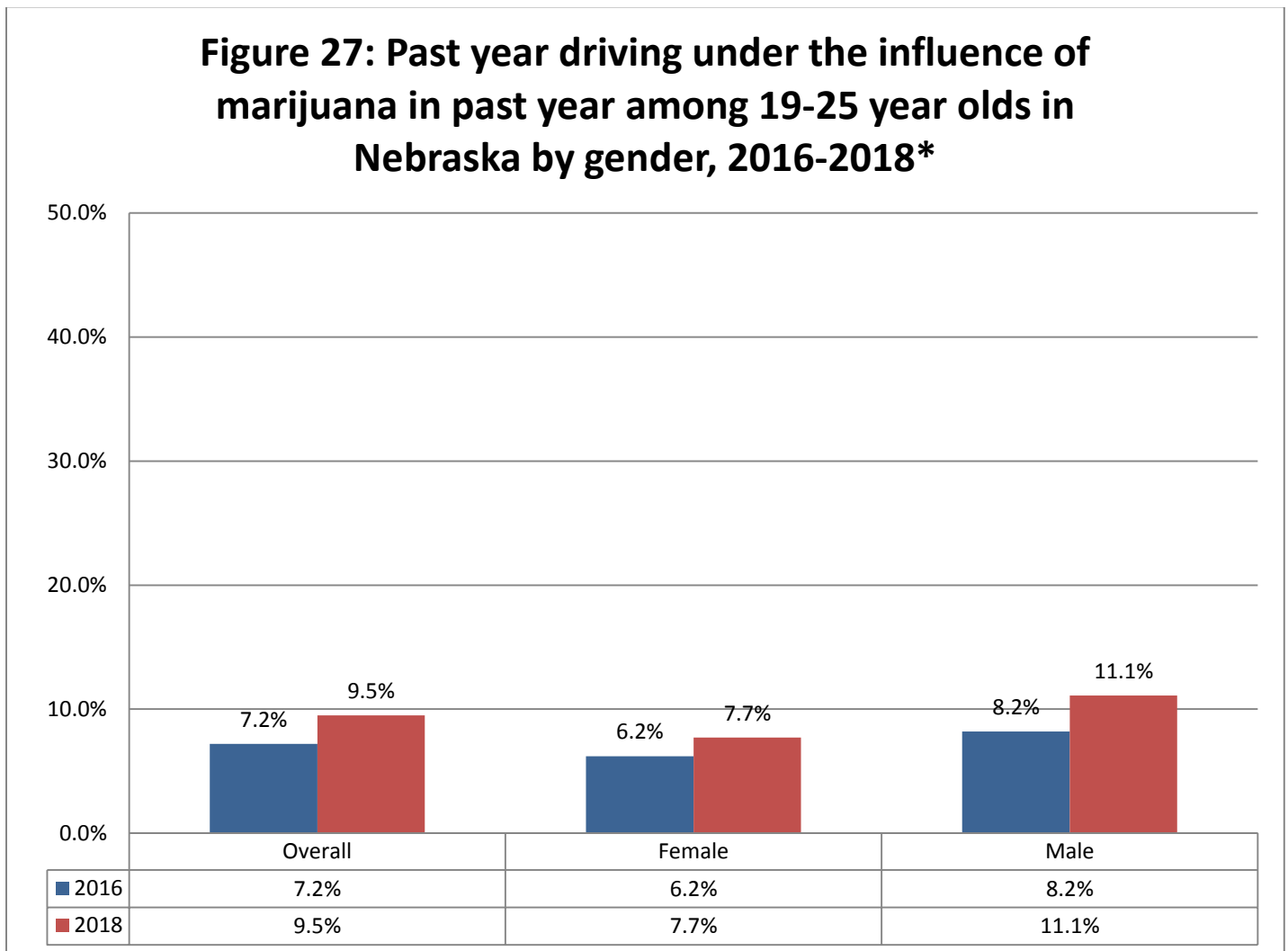
Marijuana-Impaired Driving

Since 2016, NYAAOS asked respondents if they have driven a vehicle under the influence of marijuana in the past 12 months. In 2016, approximately one in thirteen (7.2%) said they drove under the influence of marijuana, and this rate increased a little in 2018 (9.5%) (Figure 27).

Demographic Differences in Marijuana-Impaired Driving

Gender

In both years, males were significantly more likely than females to report marijuana-impaired driving for the past year ($p < .05$). In addition, males in 2018 reported significantly higher rate of past year driving under the influence of marijuana than males in 2016 ($p < .05$) and the overall rate in 2018 is also significantly higher than that of 2016 ($p < .05$) (Figure 27).

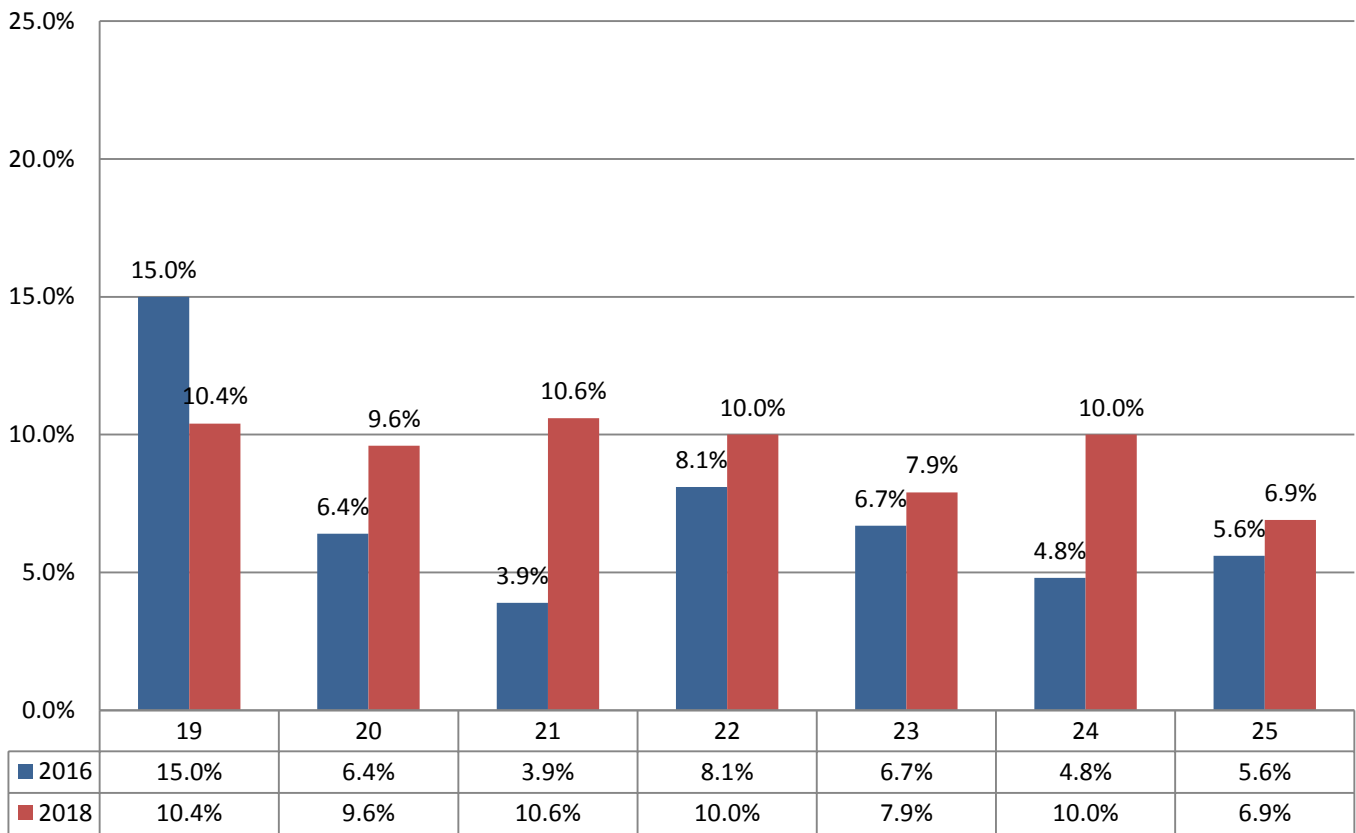


*Percentage who reported that they drove a vehicle while under the influence of marijuana during the 12 months preceding the survey

2016-2018

In 2016, young adults age 19 were the most likely (15.0%) to report driving under the influence of marijuana in the past year while those age 20 and older report significantly lower rates of marijuana-impaired driving ($p < .05$). In 2018, no statistically significant difference was found in the rate of past year driving under the influence of marijuana across the age groups. In 2018, young adults age 21 and young adults age 24 reported significantly higher rate of past year driving under the influence of alcohol compared to their age mates in 2016 ($p < .05$) (Figure 28).

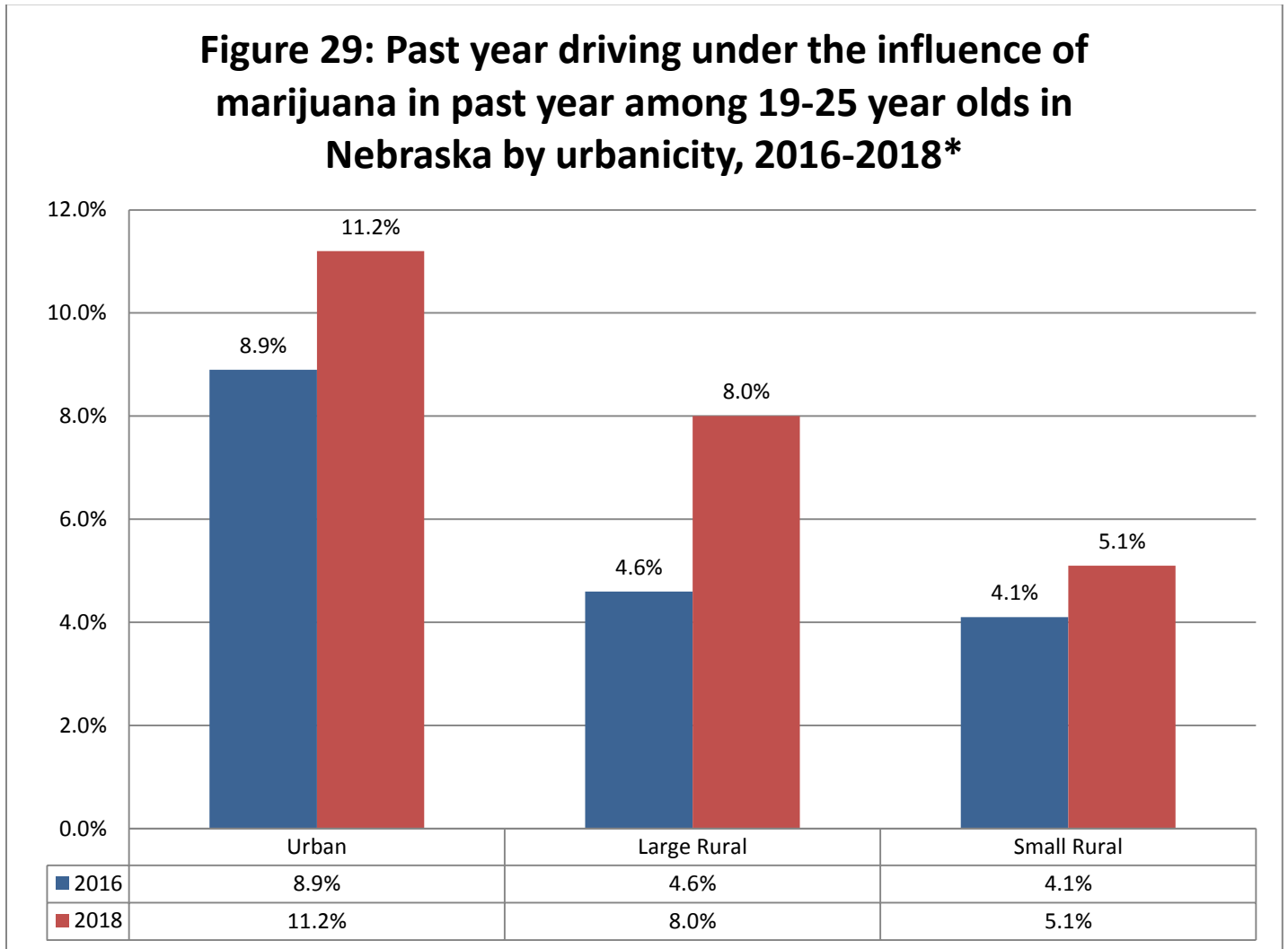
Figure 28: Past year driving under the influence of marijuana in past year among 19-25 year olds in Nebraska by age, 2016-2018*



*Percentage who reported that they drove a vehicle while under the influence of marijuana during the 12 months preceding the survey.

Urbanicity

Urban respondents were significantly more likely (8.9%) than large rural (4.6%) and small rural (4.1%) respondents to report marijuana-impaired driving in the past year ($p < .05$) (Figure 29).

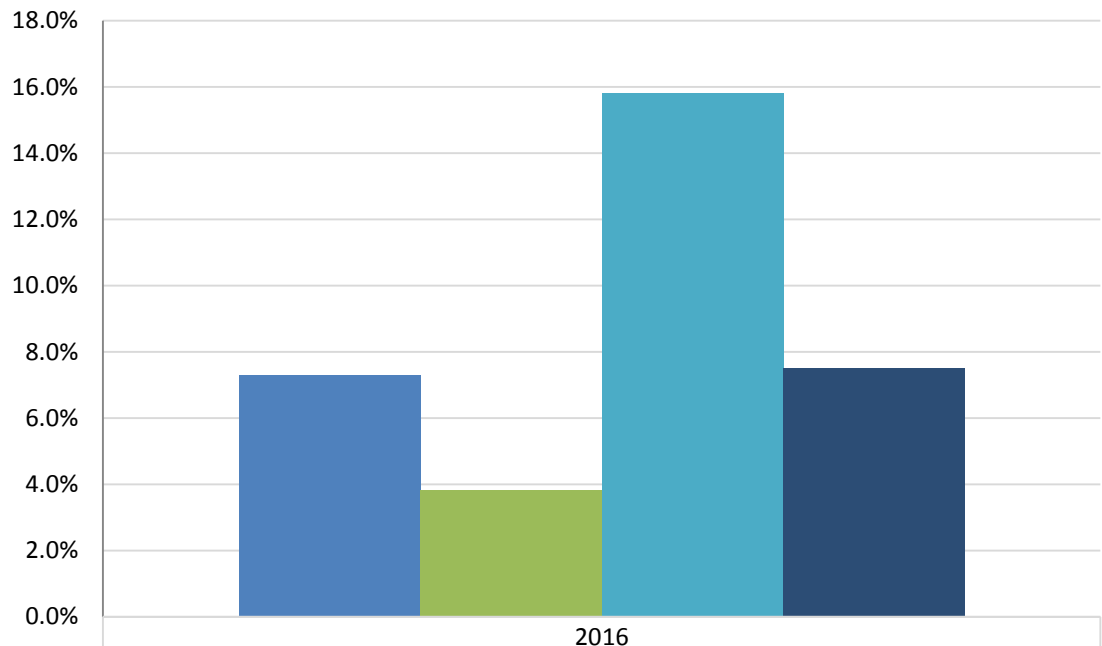


*Percentage who reported that they drove a vehicle while under the influence of marijuana during the 12 months preceding the survey.

College Enrollment Status

In 2016, 19-20-year-old non-full-time students had the highest reported rates of past year driving under the influence of marijuana (15.8%) compared to their full-time student peers age 21-22 (7.3%) ($p < .05$). Those 21-22-year-old, non-full-time students continue to have significantly (7.5%) higher rates of marijuana-impaired driving than full-time students (3.8%) but the difference is smaller ($p < .05$). Student enrollment status information was not collected in 2018 (Figure 30).

Figure 30: Past year driving under the influence of marijuana among 19-22-year-olds in Nebraska by student status and age, 2016*



■ 19-20 Full Time Student
■ 21-22 Full Time Student
■ 19-20 Non-Full Time Student
■ 21-22 Non-Full Time Student

2016

7.3%

3.8%

15.8%

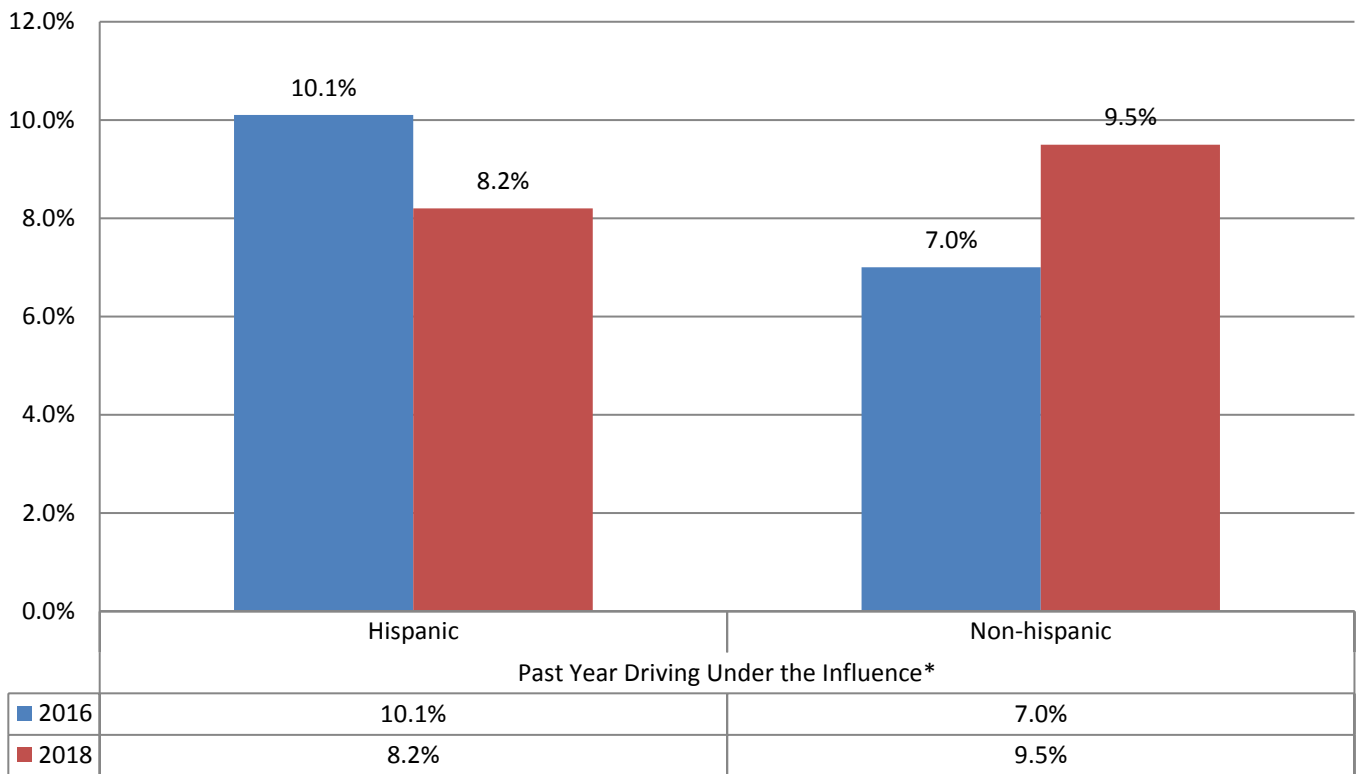
7.5%

*Percentage who reported that they drove a vehicle while under the influence of marijuana during the 12 months preceding the survey.

Ethnicity

In both year, Hispanic respondents and non-Hispanic reported comparable rates of marijuana-impaired driving in the past year. In 2018, non-Hispanic respondents reported a significantly high rate of past year driving under the influence of marijuana compared to non-Hispanic respondents in 2016 ($p < .05$) (Figure 31).

Figure 31: Past-year driving under the influence of marijuana in past year among 19-25-year-olds in Nebraska by ethnicity, 2016-2018*

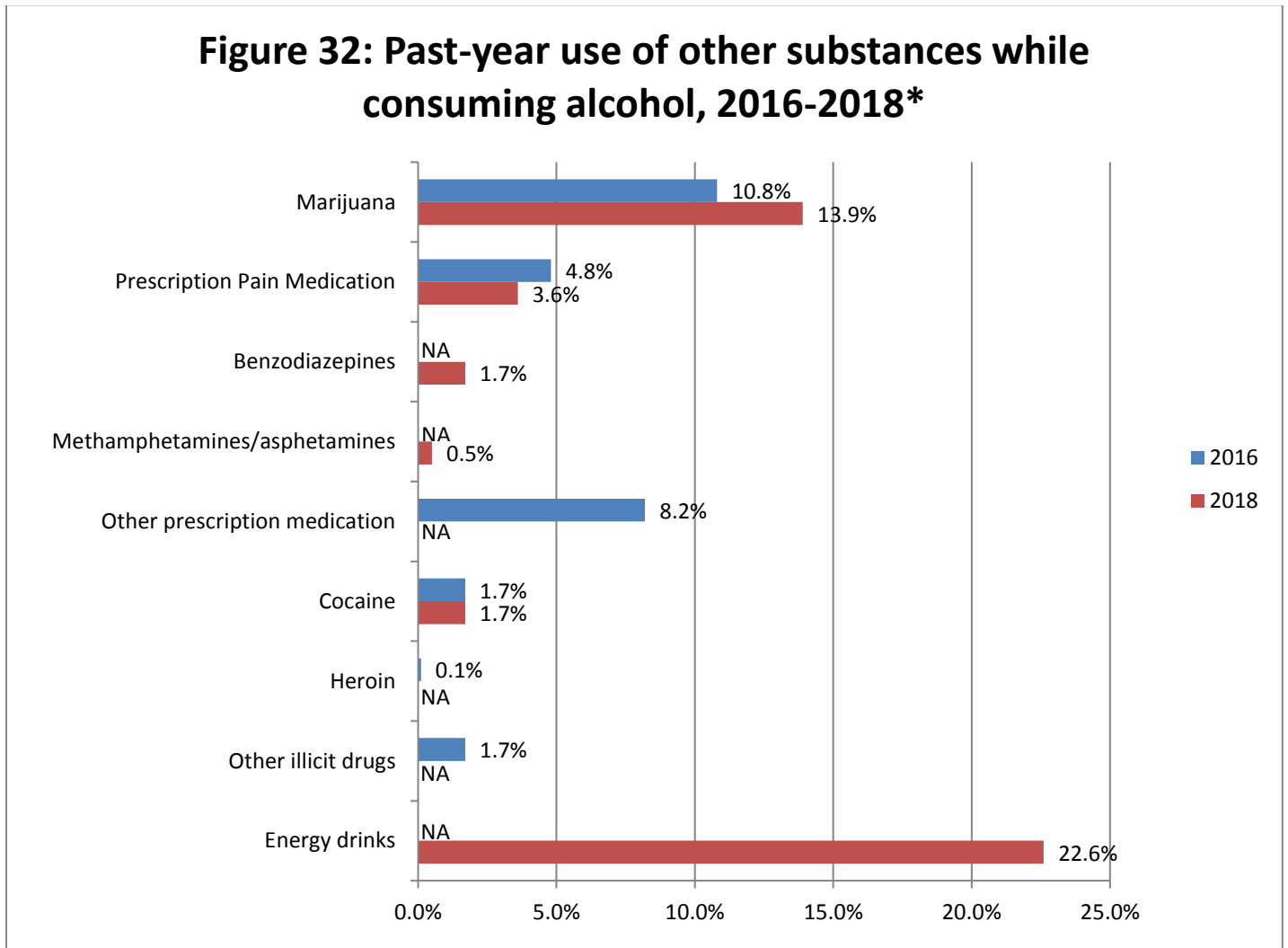


*Percentage who reported that they drove a vehicle while under the influence of marijuana during the 12 months preceding the survey.

Alcohol Use with Other Substances

Past Year Alcohol Use Mixed with Other Substances

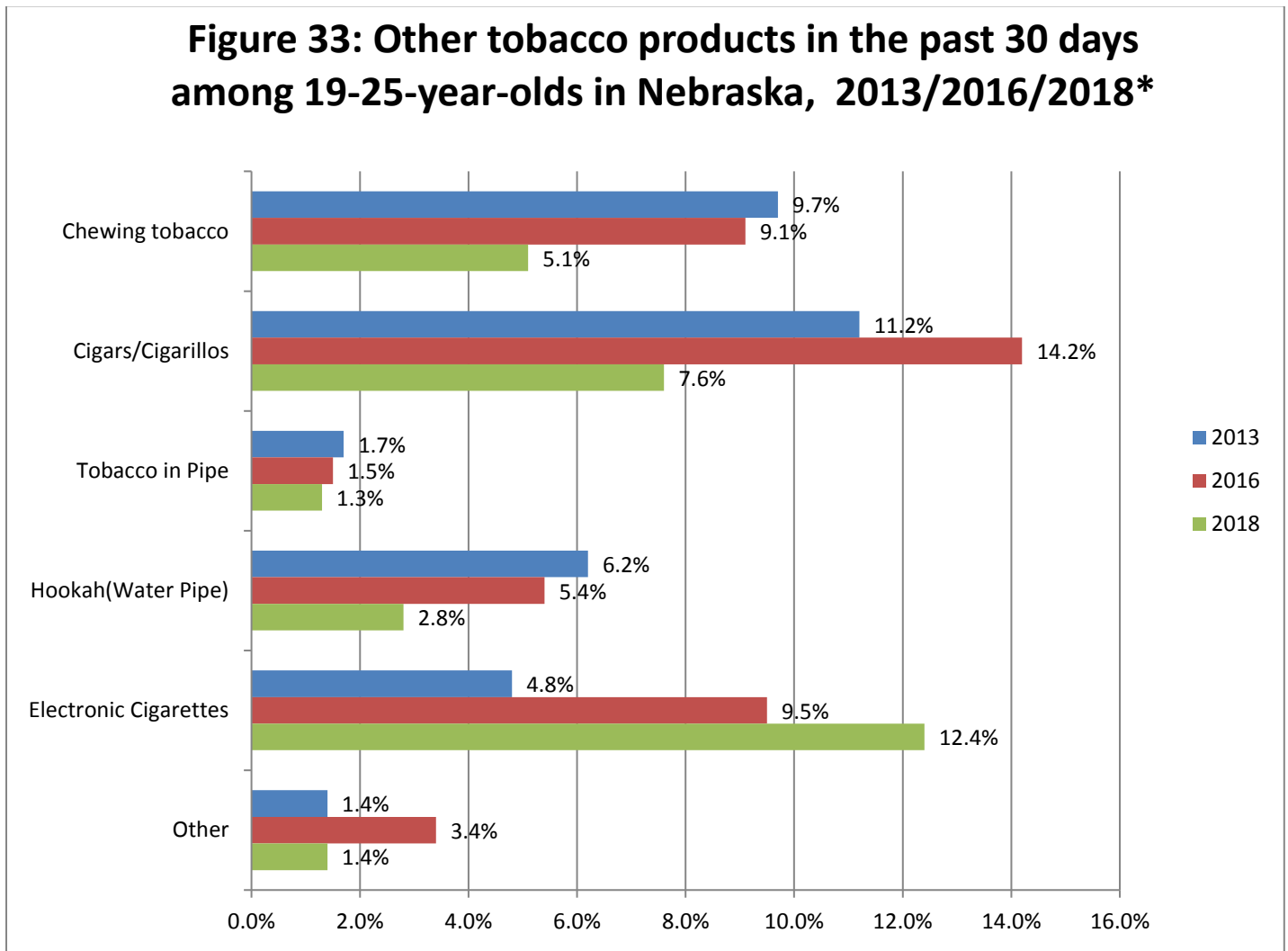
The 2016 NYAAOS asked respondents if they have taken certain substances while they were consuming alcohol in the past 12 months. The most common substance used with alcohol was marijuana with one in ten (10.8%) who said they used marijuana while drinking alcohol in the past 12 months. The second most common substance used (8.2%) was prescription medications (besides pain medication). One in twenty reported mixing alcohol with prescription pain medication (4.8%). In 2018, a few more substances were added to this question. About one out of seven respondents reported using alcohol with marijuana (13.9%), and two-fifths used alcohol with energy drinks (22.6%) (Figure 32).



*Percentage who reported that they take the listed substances while drinking alcohol during the 12 months preceding the survey.

Past Month Other Tobacco Products Use

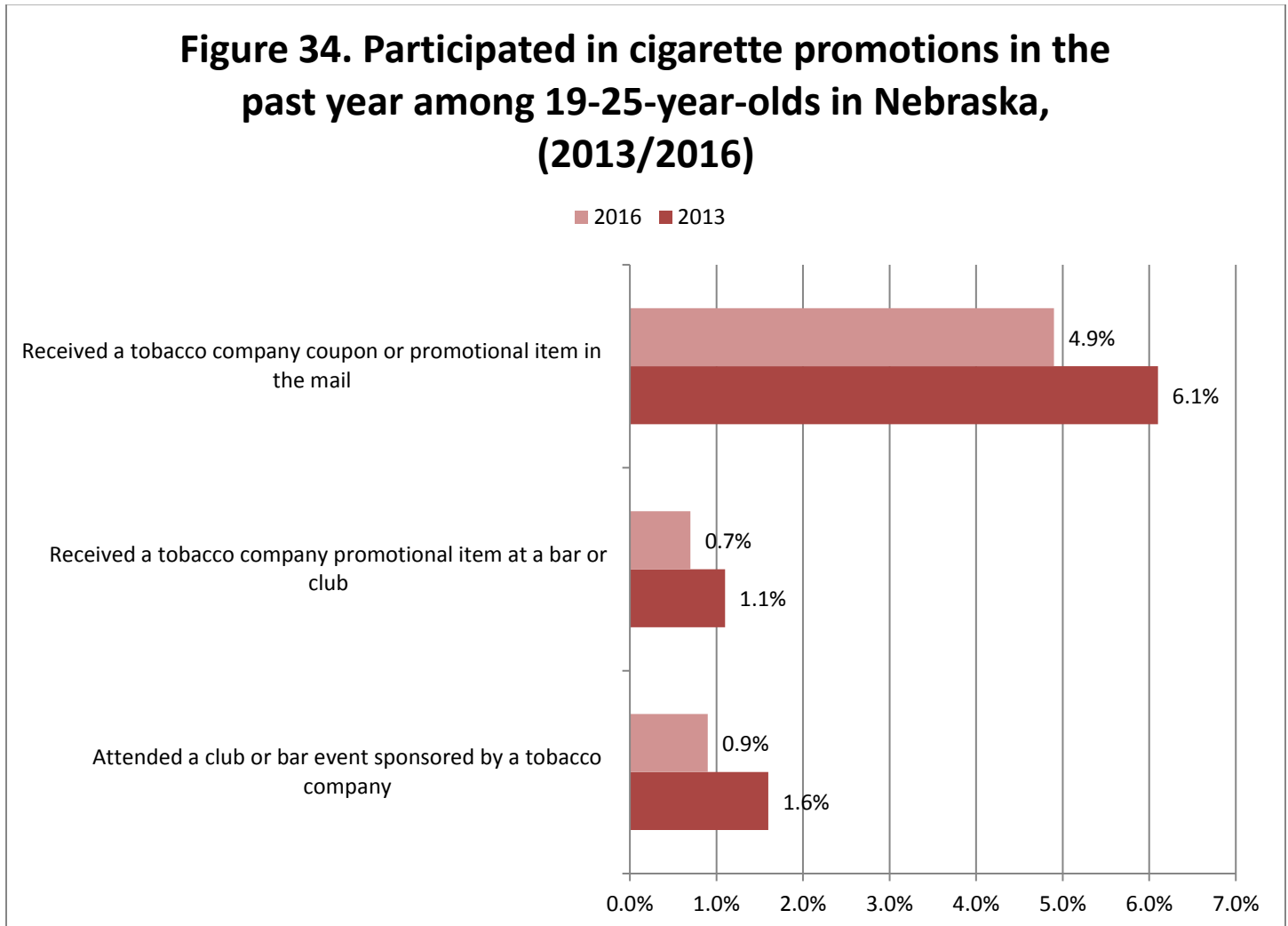
Compared to the rates of 2016, young adults in 2018 reported significantly lower rates of chewing tobacco (5.1%) use, cigars/cigarillos use (7.6%), and hookah use (2.8%) than the earlier administrations ($p < .05$) in 2013 and 2016. However, the consumption of electronic cigarettes, on the contrary, has increased significantly in the most recent two administrations. A significant increase took place in 2016 ($p < .05$), followed by another one in 2018 ($p < .05$), making the rate from 4.8% in 2013 to 12.4% in 2018 (Figure 33).



*Percentage who reported using other tobacco products (chewing tobacco, Cigars/Cigarillos, Tobacco in Pipe, Hookah (Water Pipe), Electronic Cigarettes, Other) in the past 30 days preceding the survey.

Participation in Cigarette Promotions in Past Year

A small percentage (4.9%) of respondents reported that they received a tobacco company coupon or promotional item in the mail, 0.7% of respondents reported that they attended a club or bar event sponsored by a tobacco company, and 0.9% of respondents reported that they received a tobacco company promotional item at a bar or club (Figure 34). This question was not asked in 2018.



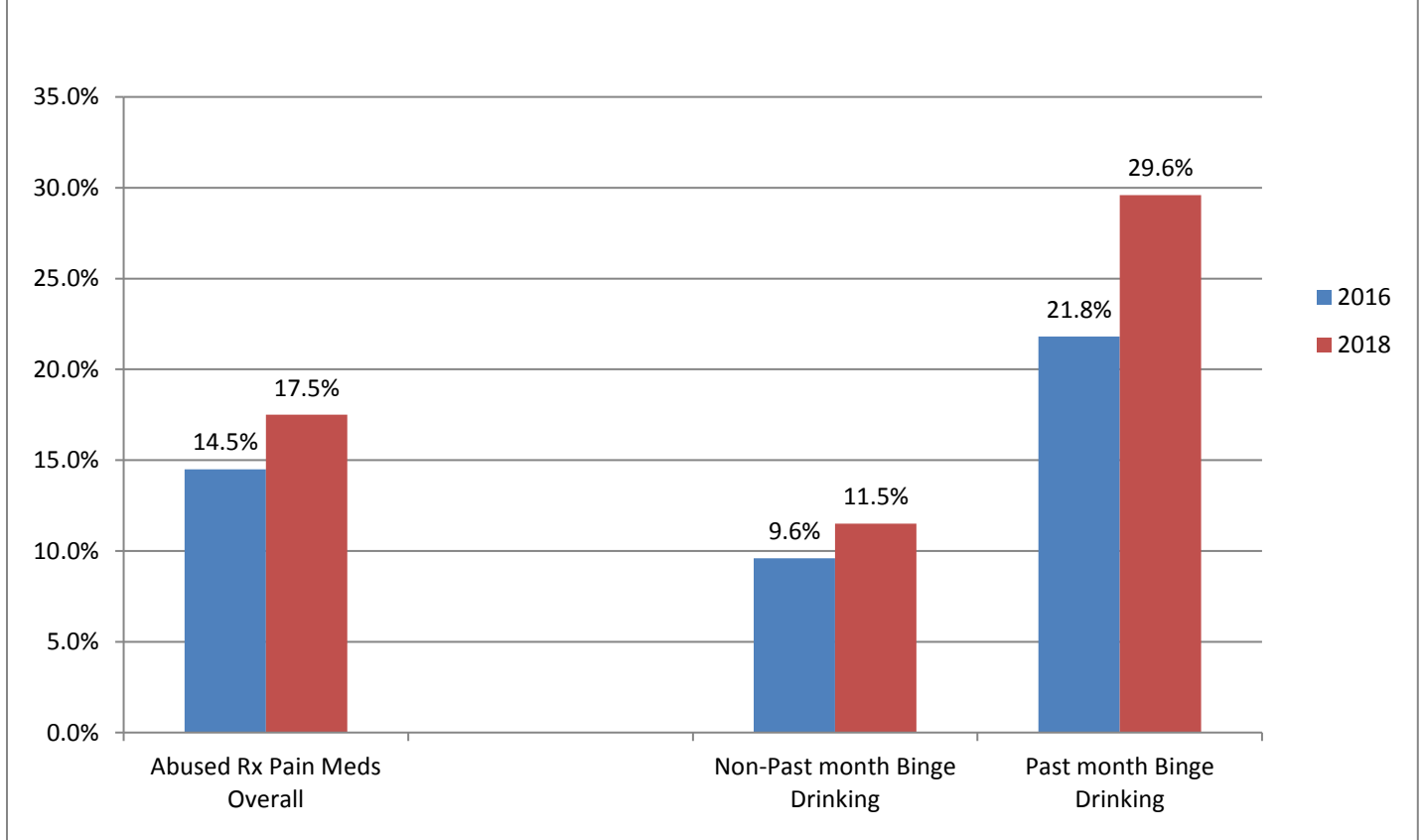
*Percentage who reported ever participating in any of the following types of cigarette promotions (attended a club or bar event sponsored by a tobacco company, received a tobacco company promotional item at a bar or club or received a tobacco company coupon or promotional item in the mail) in the past 12 months preceding the survey.

Past Month Binge Drinking and Prescription Pain Use without Doctor Prescription

Since 2016, NYAAOS asked respondents how many times in their lifetime they have taken a prescription pain medication without a doctor's prescription or differently than how the doctor told them to use it. In 2016, about one in seven (14.5%) reported using prescription pain medications without a doctor's prescription or differently than how they were supposed to be used. Prescription drug abuse was significantly higher among past month binge drinkers with a rate of 21.8% for past month binge drinkers compared to 9.6% for those did not binge drink in past month ($p<.05$). In 2018, similarly, past month binge drinkers reported a significantly higher rate (29.6%) of prescription pain medication abuse ($p<.05$) than that of the non-past month binge drinkers (11.5%).

The overall rate in 2018 (17.5%) was significantly higher than that of 2016 ($p<.05$), and the past month binge drinkers in 2018 (29.6%) also had a significantly higher rate of prescription pain medication abuse compared to the past month binge drinkers in 2016 ($p<.05$) (Figure 35).

Figure 35: Prescription pain medication abuse during lifetime compared with past-month binge drinking among 19-25-year-olds in Nebraska , 2016-2018*



*Those who reported that during their life they have taken prescription pain medicine (such as codeine, Vicodin, OxyContin, Hydrocodone or Percocet) one or more times without a doctor's prescription or differently than how the doctor told them to use it

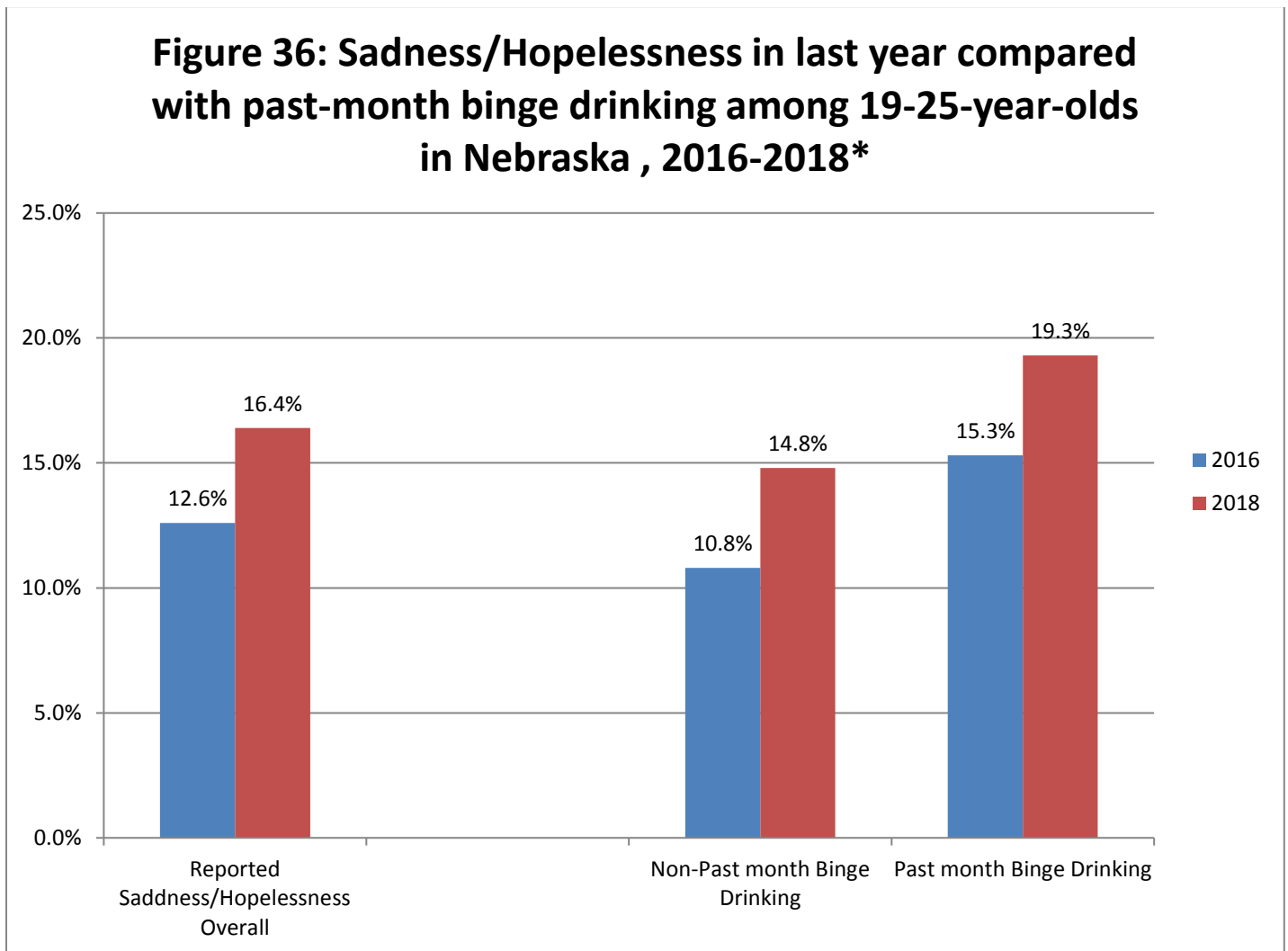
**Those who reported having/not having five or more drinks for men/four or more drinks for women within a couple of hours on at least one of the 30 days preceding the survey

Binge Drinking, Depression and Suicidal Ideation

Past Month Binge Drinking and Depression Symptoms

The 2016 NYAAOS asked respondents if in the past year they have felt so sad or hopeless for almost every day for two weeks or more in a row that they stopped doing some usual activities. About one in eight (12.6%) reported feeling depressed in the past year. Depression symptoms were significantly higher among past month binge drinkers with rate of 15.3% compared 10.8% for those that did not binge drink in past month ($p < .05$) (Figure 36).

Compared to 2016, a larger proportion of respondents reported feeling sad or hopeless in the last year in all categories in 2018. Specifically, the overall rate in 2018 (16.4%) was significantly higher than that of 2016 (12.6%) ($p < .05$), and the non-past month binge drinkers (14.8%) had a significantly higher rate than those in 2016 (10.8%), and past month binge drinkers in 2018 also reported a significantly higher level (19.3%) than those in 2016 (15.3%) ($p < .05$).

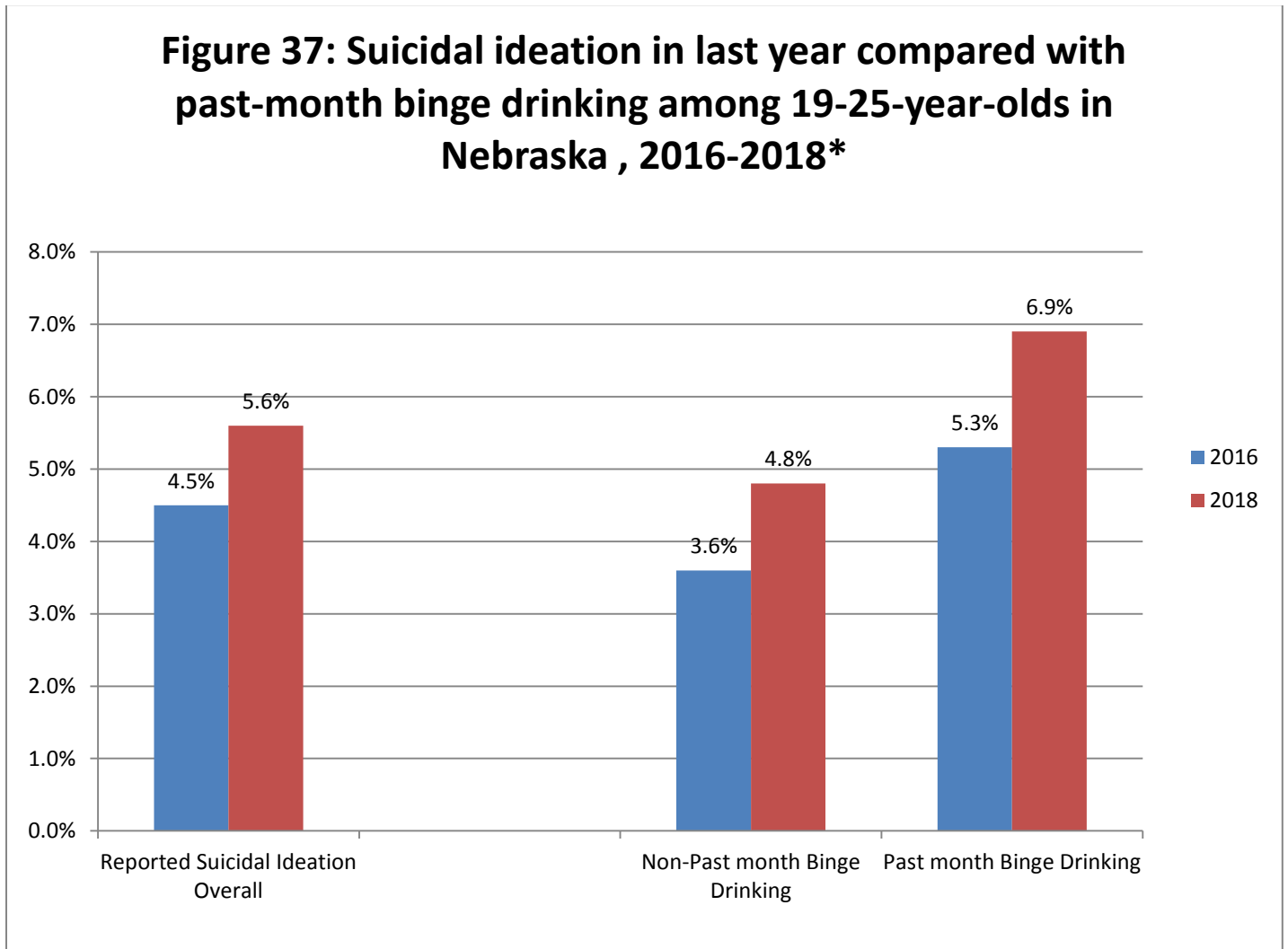


*Those who reported that in the past 12 months they have felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities

**Those who reported having/not having five or more drinks for men/four or more drinks for women within a couple of hours on at least one of the 30 days preceding the survey

Past Month Binge Drinking and Suicidal Ideation

Since 2016, NYAAOS asked respondents if in the past year they seriously considered attempting suicide. In 2016, about one in twenty (4.5%) reported suicidal ideations in the past year. Suicidal ideation was higher, but not significantly, among past month binge drinkers with rate of 5.3% compared to 3.6% for non-past month binge drinkers. In 2018, past month binge drinkers also reported a higher rate of suicidal ideation (6.9%) in the past year than those who did not binge drink in the past month (4.8%), although the difference was not significant. The two years reported comparable rates of suicidal ideation in each category (Figure 37).



*Those who reported that in the past 12 months they seriously considered attempting suicide

**Those who reported having/not having five or more drinks for men/four or more drinks for women within a couple of hours on at least one of the 30 days preceding the survey

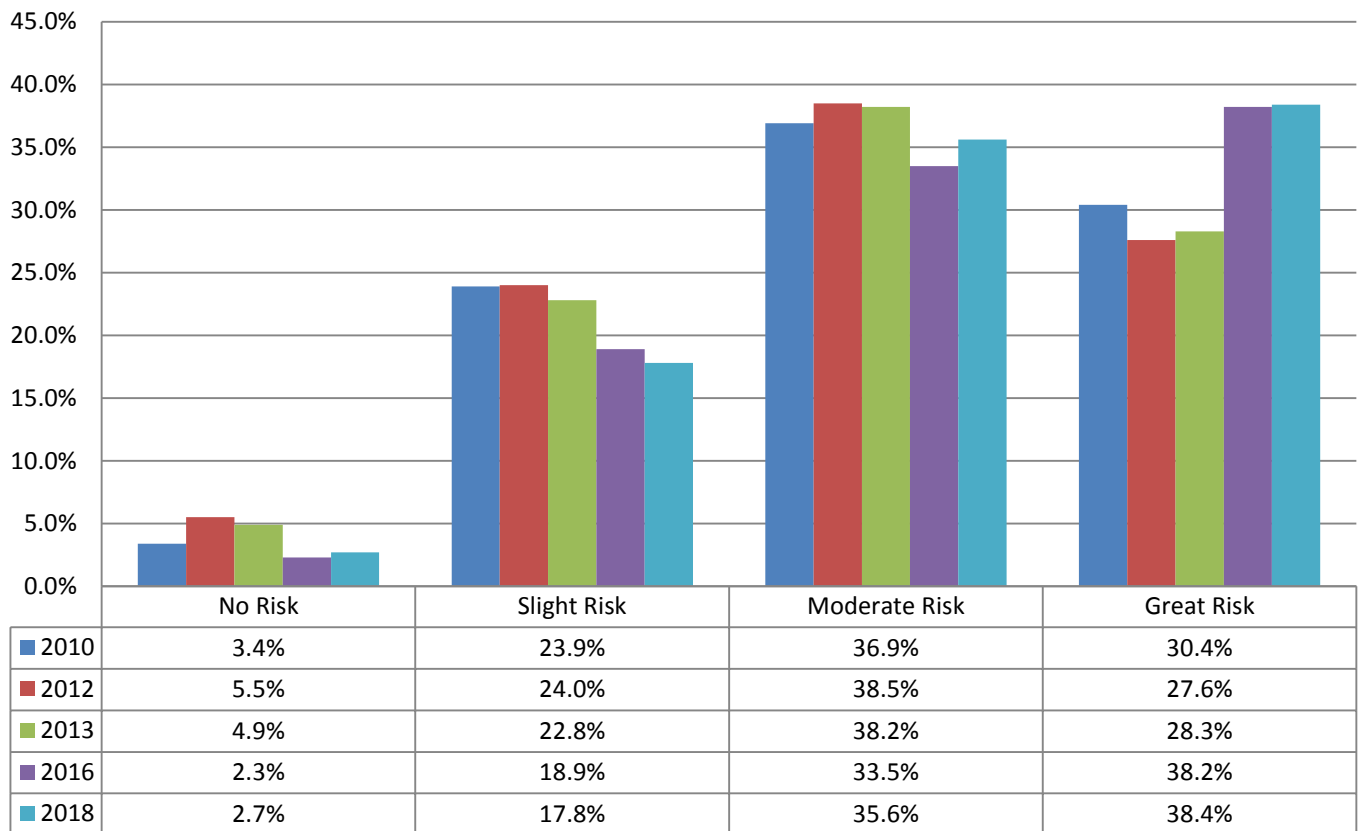
Alcohol-Related Attitudes and Perceptions

Perception of Risk from Binge Drinking

The majority (67.3% in 2010, 66.1% in 2012, 66.5% in 2013, 71.7% in 2016, and 74.0% in 2018) of young adult respondents in all five years of the survey perceived a moderate or great risk of harm (physically or in other ways) from binge drinking.

There was a significant increase in the percentage of young adults who perceived great risk of binge drinking in 2016 (38.2%) and 2018 (38.4%), compared to the three earlier administrations (30.4% in 2010, 27.6% in 2012, 28.3% in 2013) ($p < .05$) (Figure 38).

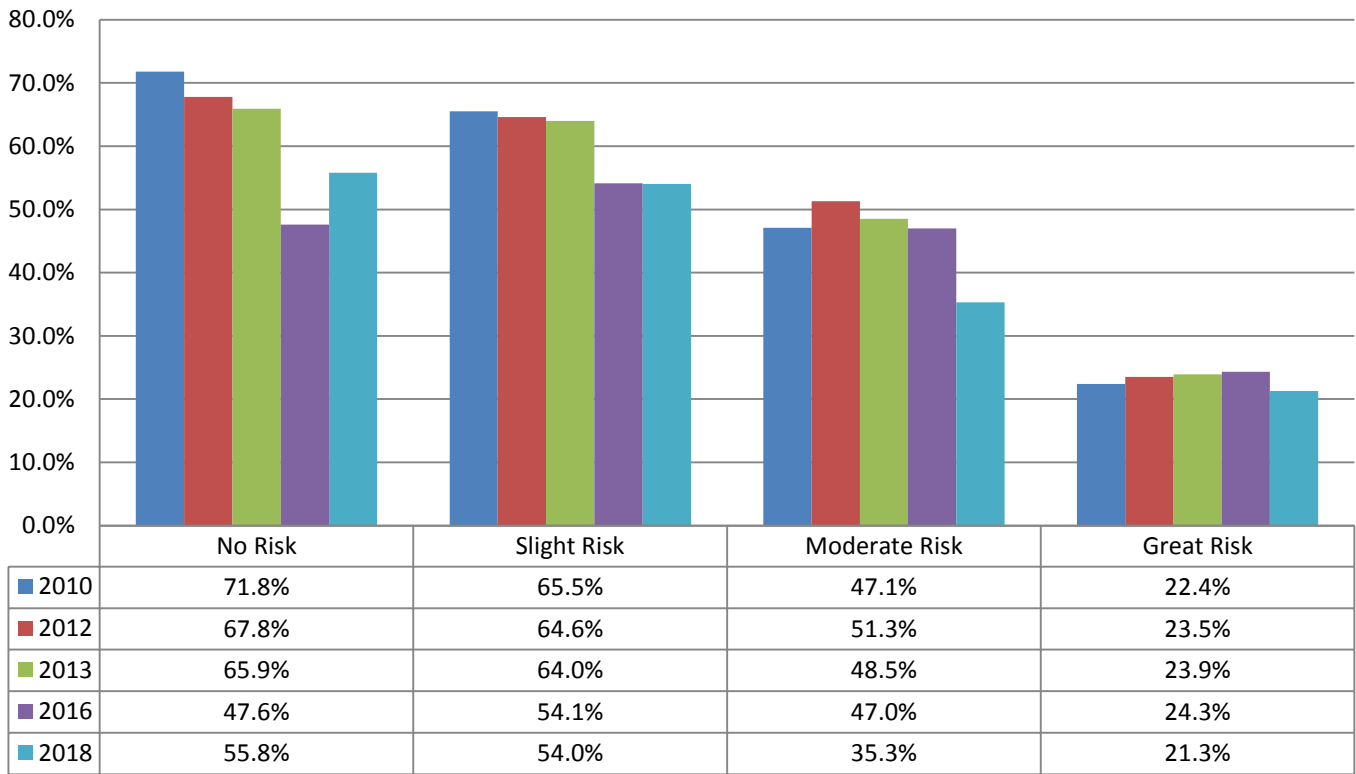
Figure 38: Perceived risk from binge drinking among 19-25-year-olds in Nebraska, 2010-2018*



*How much people risk harming themselves physically or in other ways when they have five or more drinks of an alcoholic beverage once or twice a week.

Throughout the five administrations, since 2012, young past-month binge drinkers were less likely to perceive there is a moderate or great risk harming themselves (physically or in other ways) as a result of binge drinking (74.8% in 2012, 72.4% in 2013, 71.3% in 2016, and 56.6% in 2018) (Figure 39).

Figure 39: Past-month binge drinking* by perceived risk from binge drinking among 19-25-year-olds in Nebraska, 2010-2018**



*Percentage who reported having five or more drinks for men/four or more drinks for women within a couple of hours on at least one of the 30 days preceding the survey.

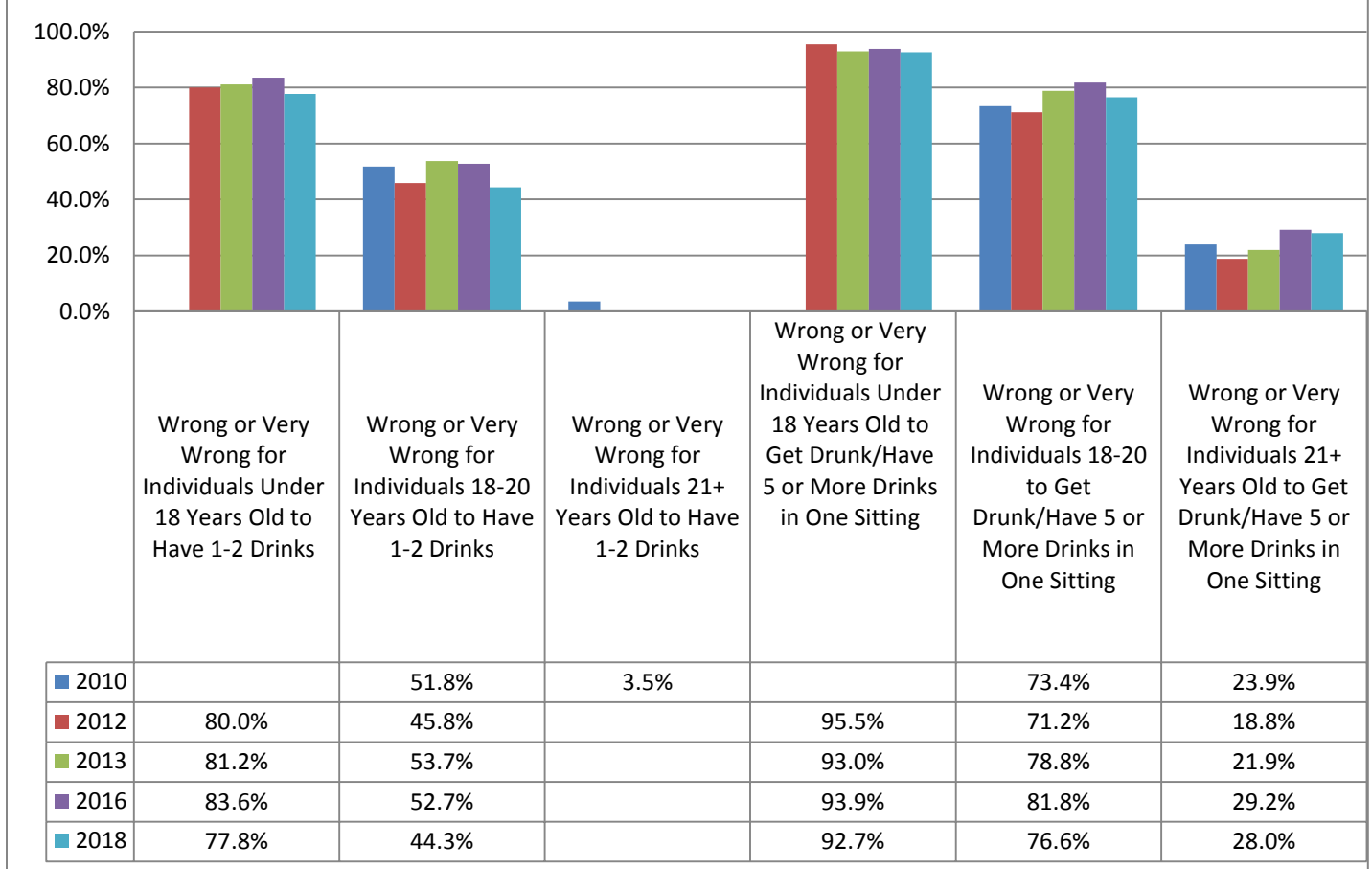
**How much people risk harming themselves physically or in other ways when they have five or more drinks of an alcoholic beverage once or twice a week.

Social Norms Regarding Alcohol Use

Overall, less than one-third of young adult respondents (23.9% in 2010, 18.8% in 2012, 21.9% in 2013, 29.2% in 2016, 28.0% in 2018) felt it is wrong or very wrong for an individual 21 years or older to get drunk. However, the vast majority perceived that it is wrong for individuals under 18 to get drunk (95.5% in 2012, 93.0% in 2013, 93.9% in 2016, and 92.7% in 2018). Over 80% of young adult respondents perceived it is wrong for individuals 18-20 years old to get drunk (73.4% in 2010, 71.2% in 2012, 78.8% in 2013, 81.8% in 2016, and 76.6% in 2018) (Figure 40).

In 2018, young adults were significantly less likely to consider it as wrong or very wrong for those under 18-years-old to consume one or two alcohol drinks (77.8%) ($p < .05$), compared to those in 2016 (83.6%). In addition, young adults in 2018 were significantly less likely to perceive it as wrong or very wrong for those age 18-20 to have one or two drinks (44.3%) than those in 2010, 2013, and 2016 ($p < .05$). Moreover, there is a significant decrease in 2018 (76.6%) from 2016 (81.8%) in the perception of those 18-20 years old getting drunk ($p < .05$). In both 2016 and 2018, respondents reported a significantly higher rate of perception that it is wrong or very wrong for legal age drinkers to be drunk ($p < .05$), compared to the three earlier administrations. Note: Some survey items contained in Figure 42 had slightly different wording in the 2012 administration of the survey and some survey items were not included in certain administrations.

Figure 40: Social norms related to underage and legal age drinking behaviors among 19-25-year-olds in Nebraska, 2010-2018*

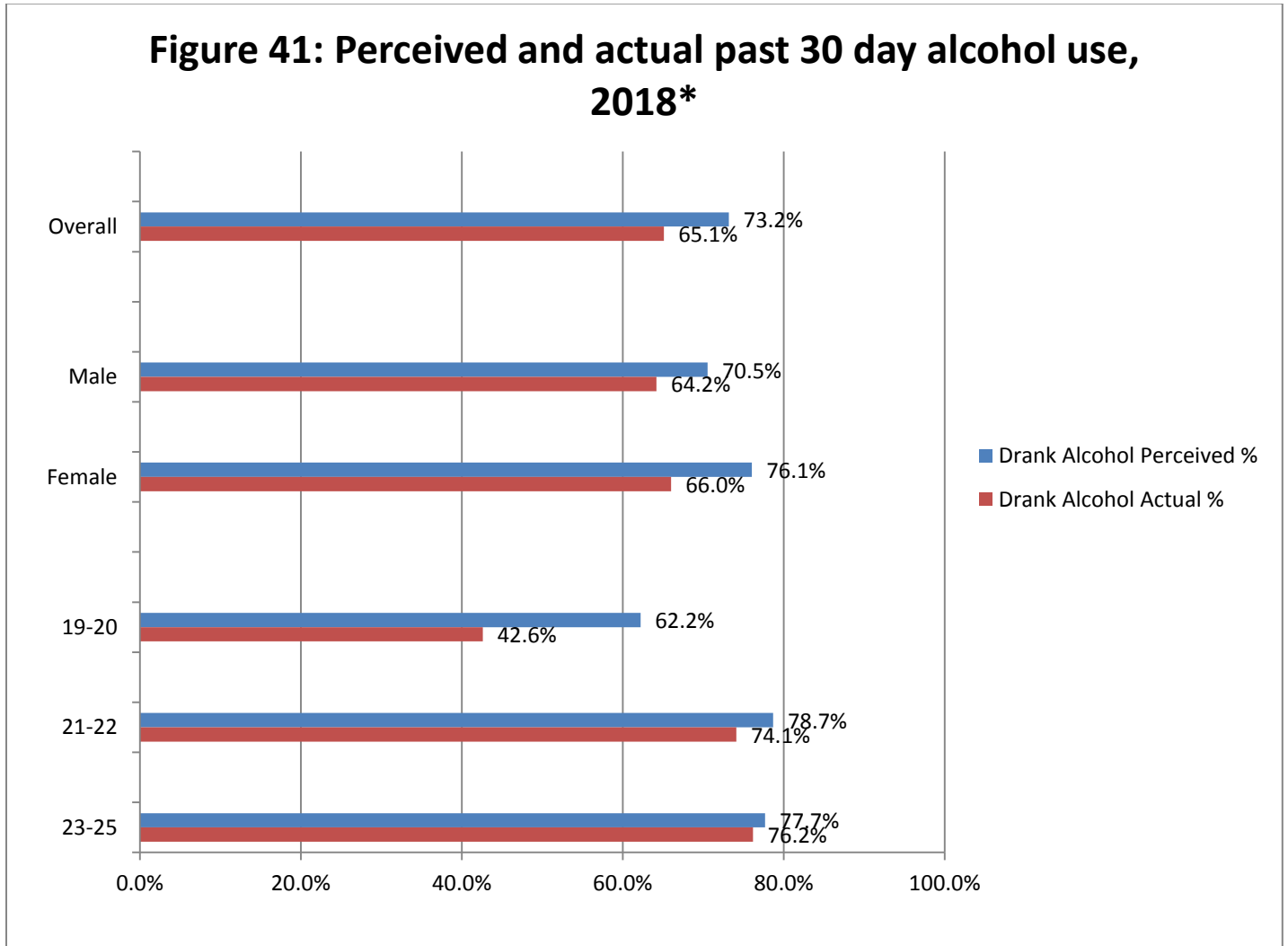


*Percentage who reported how wrong they think different drinking behaviors are based on the following scale: Very Wrong, Wrong, A Little Wrong, Not At All Wrong.

Note: missing data and wording variations are due to changes in the survey starting in 2012 and continuing into 2013. One-third of the sample in 2012 and the total sample 2013 were asked how wrong it is to "have five or more drinks" instead of "get drunk." See the "Methodology" section later in report for an explanation.

Perceptions of Peers' Consumption of Alcohol and Actual Consumption of Alcohol

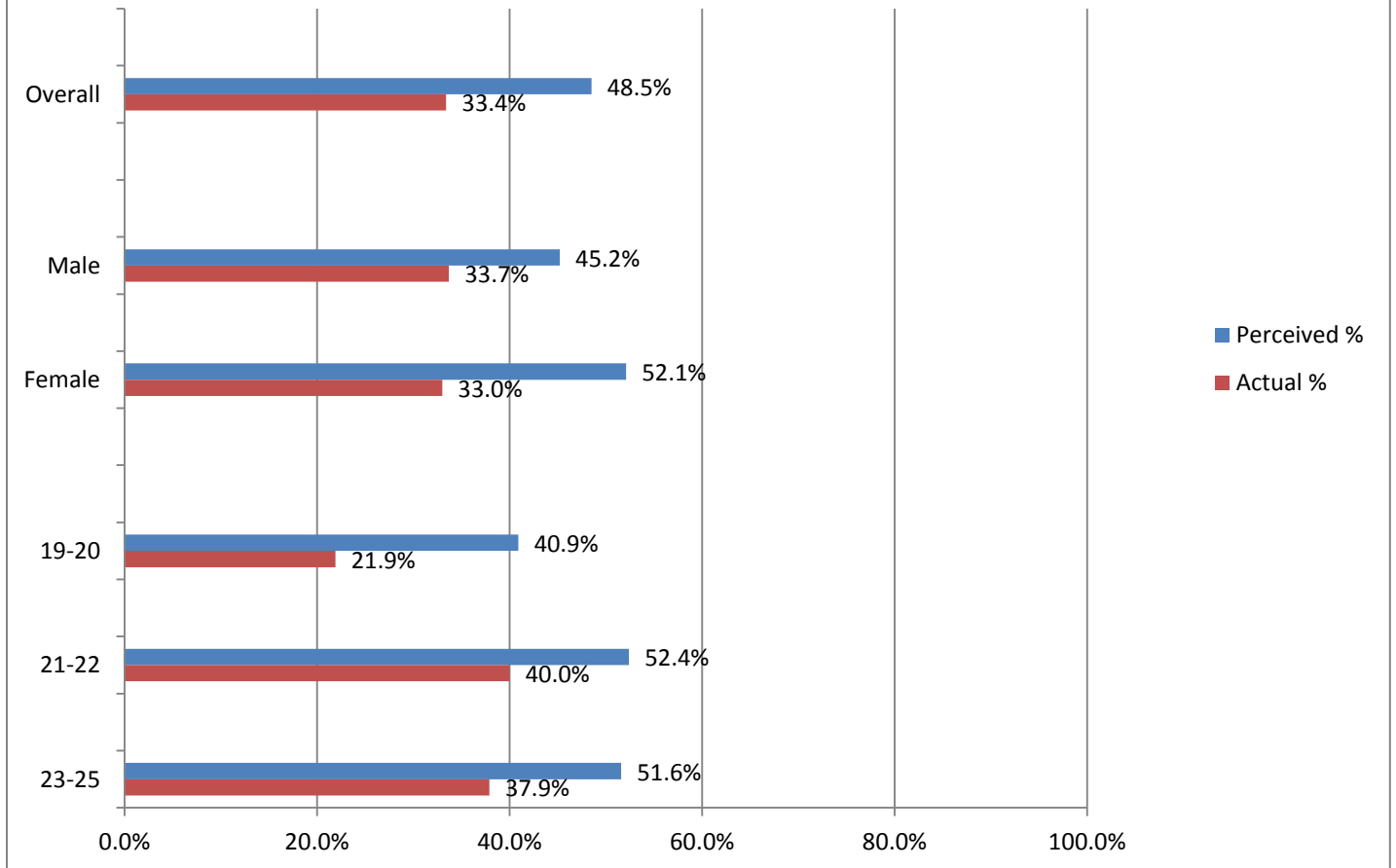
In 2018, young adults believed that most (73.2%) of their peers were drinking alcohol when approximately 2 in 3 actually were (65.1%). Males and females were similar in both their perception of peers drinking alcohol (70.5% Males vs 76.1% Females) and similar in the percentage that actually consumed alcohol. Those younger than 21 perceived that less of their peers drank alcohol in the past 30 days than those 21 and older, but similar to the overall trends, they estimated more of their peers (62.6%) consumed alcohol than actually did (42.6%). Young adults 21 and older had similar perceptions of consumption of alcohol among their peers (78.7% 21-22 and 77.7% 23-25) (Figure 41).



*Perception based on following question: "In the past 30 days what percentage of people your age do you think have had at least one drink of alcohol?"

In 2018, young adults believed that half (48.5%) of their peers binge drank alcohol in the past 30 days, which is higher than the percent that actually binge drank (33.4%). Females were significantly more likely (52.1%) than males (45.2%) to believe their peers binge drank but the actual percentage that binge drank was quite similar (33.7% for males, 33.0% for females). Young adults age 19-20 were significantly less likely to perceive that their peers binge drank alcohol in the past month compared to the 20-21 and 23-25 age groups ($p < .05$) (Figure 42).

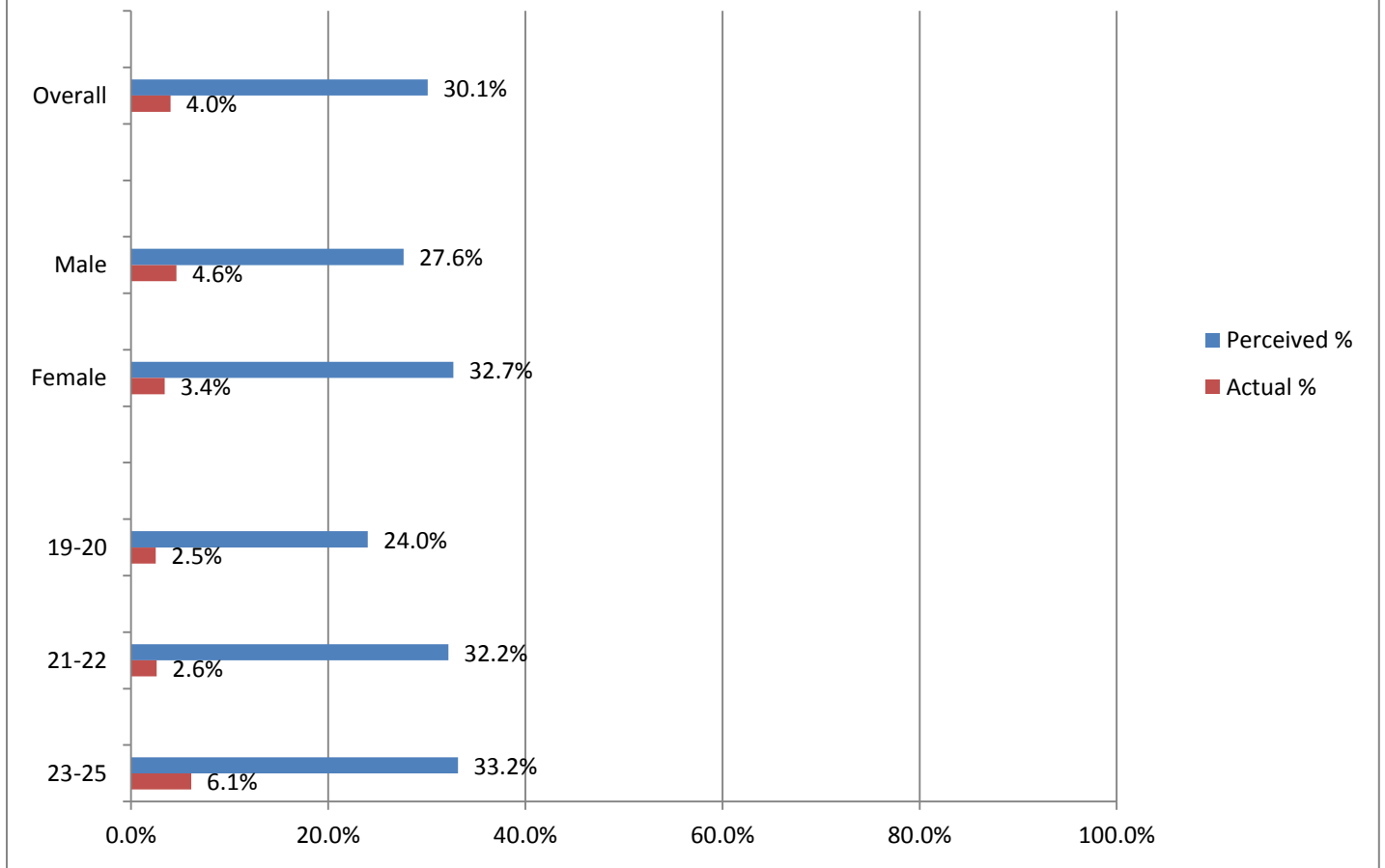
Figure 42: Perceived and actual past 30-day binge drinking, 2018*



*Perception based on following question: "In the past 30 days what percentage of people your age do you think have had 5 or more drinks of alcohol in one setting?"

In 2018, young adults believed that nearly one in three (30.1%) of their peers drove after binge drinking in the past 30 days, which is much higher than the percent that actually did (4.0%). Females were significantly more likely than males to believe their peers drove after binge drinking ($p < .05$), whereas the actual percentages that drove after binge drinking were very similar. In 2018, young adults age 19-20 were significantly less likely to believe that their peers drove after binge drinking than the older age groups ($p < .05$). In fact, only a small percentage actually drove after binge drinking regardless of their age (Figure 43).

Figure 43: Perceived and actual past 30-day driving after binge drinking, 2018*



*Perception based on following question: "In the past 30 days what percentage of people your age do you think have driven shortly after consuming 5 or more drinks of alcohol within a couple of hours?"

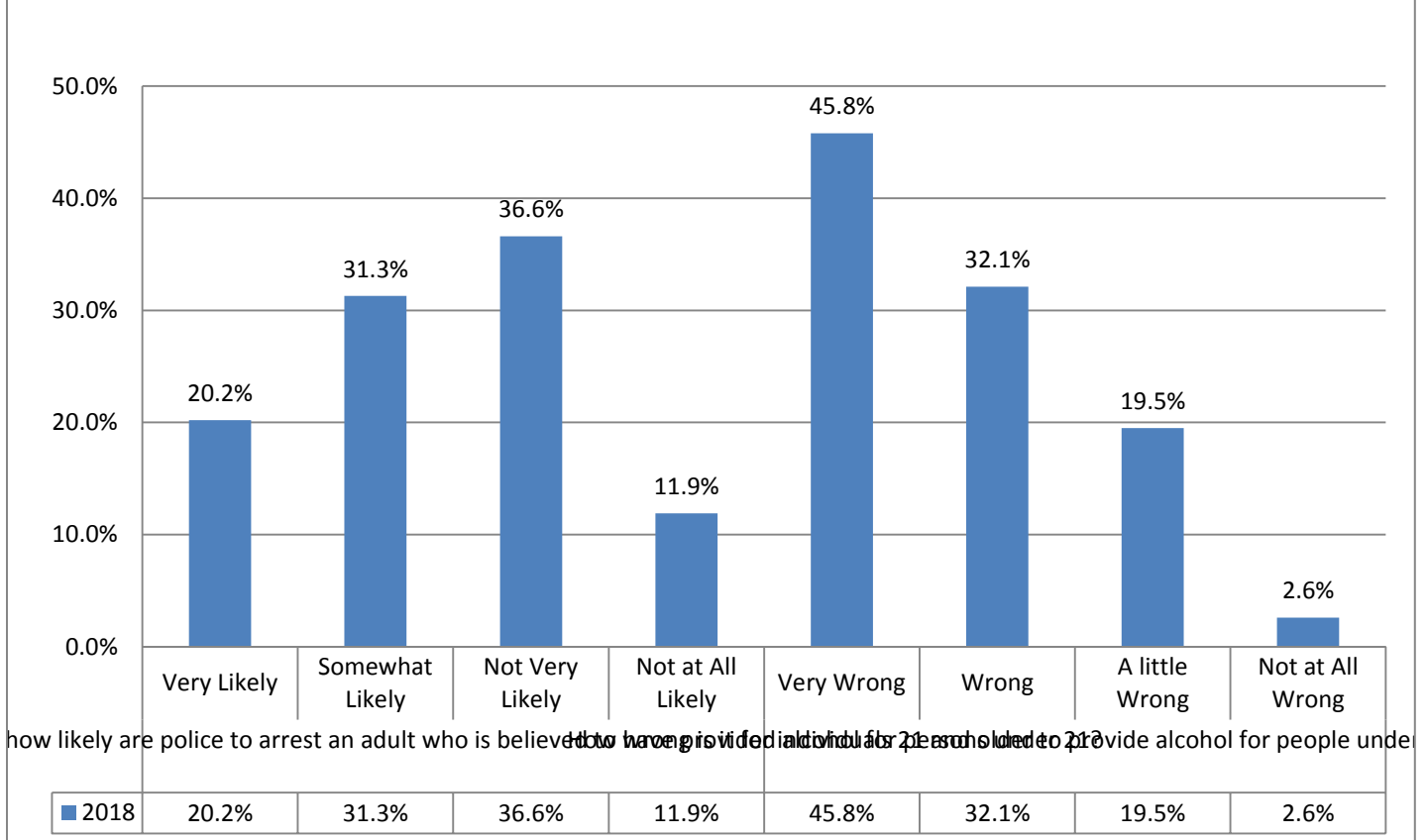
Trends

There was minimal difference between 2010 and 2018 in terms of perceptions of consumption of alcohol, binge drinking or driving after binge drinking. The percentage of young adults who believed their peers binge drank was 52.7% in 2010 and was 48.5% in 2018 and young adults believed 35.0% of peers drove after binge drinking in 2010 compared to 30.1% in 2018. In general, young adults believed more of their peers drank alcohol, binge drank, or drove after binge drinking than actually did, but the perceptions have not changed substantially during those years.

Attitudes and Perceptions Related to Providing Alcohol to Minors

In 2018, about half (51.5%) of respondents perceived that it is somewhat likely or very likely that police will arrest an adult who is believed to have provided alcohol to persons under 21. In addition, the majority (77.9%) of young adults also perceived that it is wrong or very wrong for individuals 21 and older to provide alcohol for people under 21 years old (Figure 44).

Figure 44: Attitudes and perceptions related to providing alcohol to minors among 19-25-year-olds in Nebraska, 2018

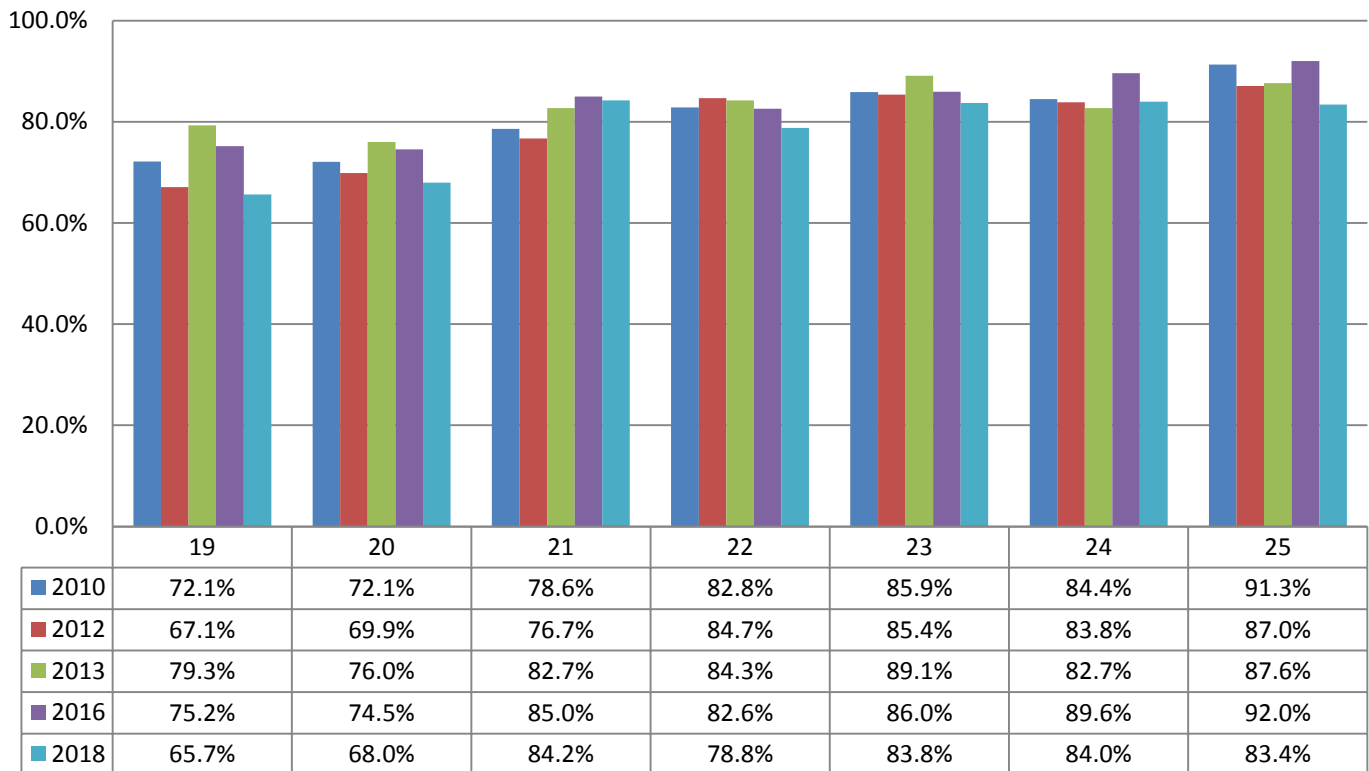


Significantly fewer young adults believe that police are somewhat or very likely to arrest an adult who is believed to have provided alcohol to persons under 21 in 2018 (51.6%) than in 2016 (61.7%) ($p < .05$). There has been a few small fluctuations in the percent of young adults who believe it is wrong or very wrong for individuals 21 and older to provide alcohol for people under 21 from 2010 (80.3%), with the rate of 2018 being the lowest throughout five administrations (77.9%).

Despite minor fluctuations, disapproval for individuals over 21 providing alcohol to minors generally increased with age. In 2018, young adults age 19 were significantly less likely to consider it as wrong or very wrong for adults to provide alcohol to minors than those age 21-25 ($p < .05$), those age 20 were also less likely to disapprove than those age 21 and the others age 23-25 ($p < .05$) (Figure 45).

Since 2016, 21 to 25-year-olds had significantly higher rates in the perception of disapproval for individuals over 21 providing alcohol to minors than 19-20-year-olds ($p < .05$).

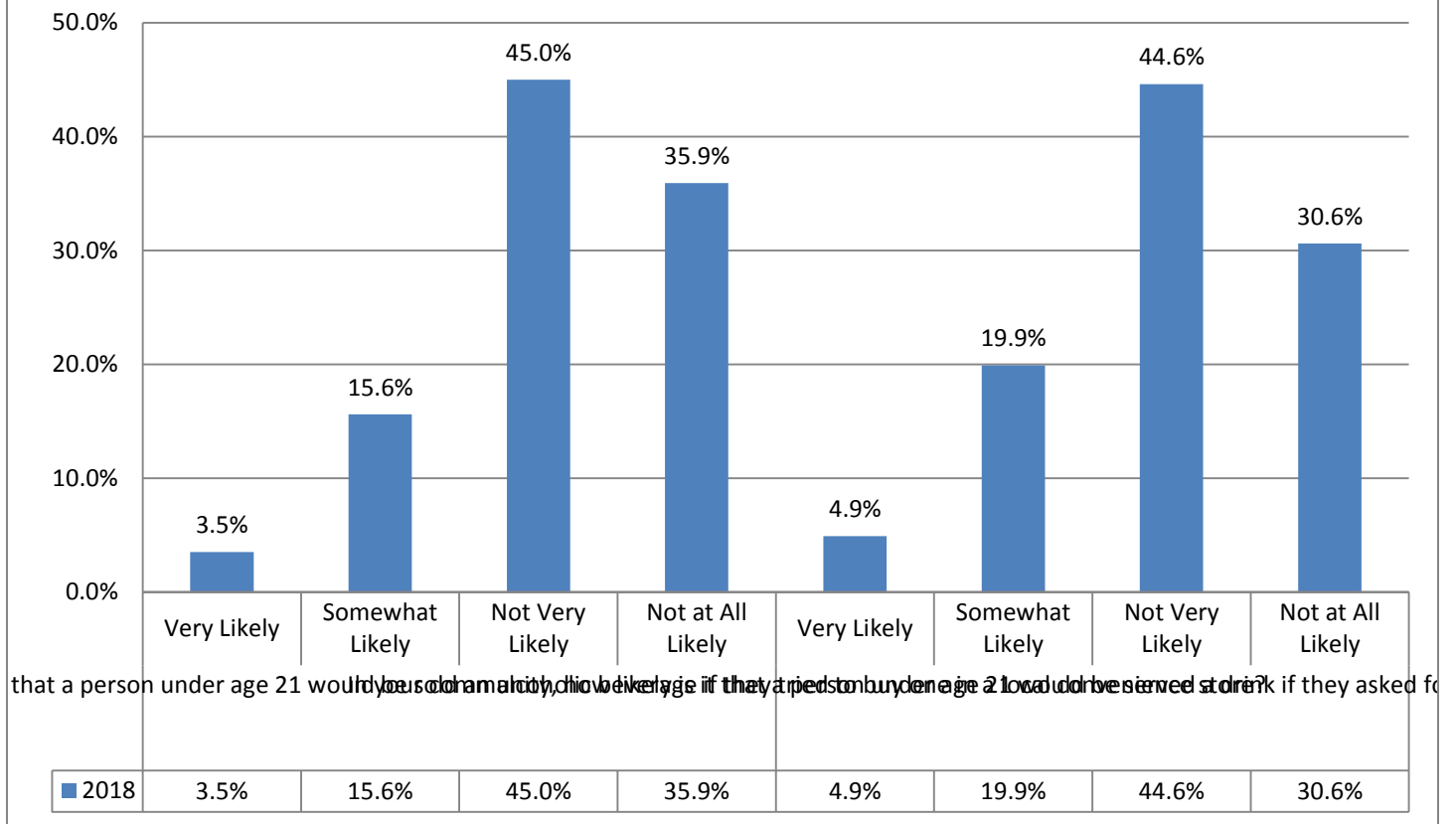
Figure 45: Wrong or Very Wrong for Adults to Provide Alcohol to Minors Among 19-25-year-olds in Nebraska, 2010-2018*



*Percentage reporting that they think it is wrong or very wrong for individuals 21 and older to provide alcohol to persons under 21 years old, based on the following scale: Very Wrong, Wrong, A Little Wrong, Not At All Wrong.

The majority of Nebraska young adult participants perceived that it is unlikely that an individual under 21 would be sold an alcoholic beverage at a convenience store or a restaurant. In 2018, 80.9% reported that it is not very likely or not at all likely that a person under 21 would be sold an alcoholic beverage at a local convenience store. With 75.2% in 2018 reporting that it is not very likely or not at all likely that a person under 21 would be served a drink if they asked for one in a local bar or restaurant (Figure 46).

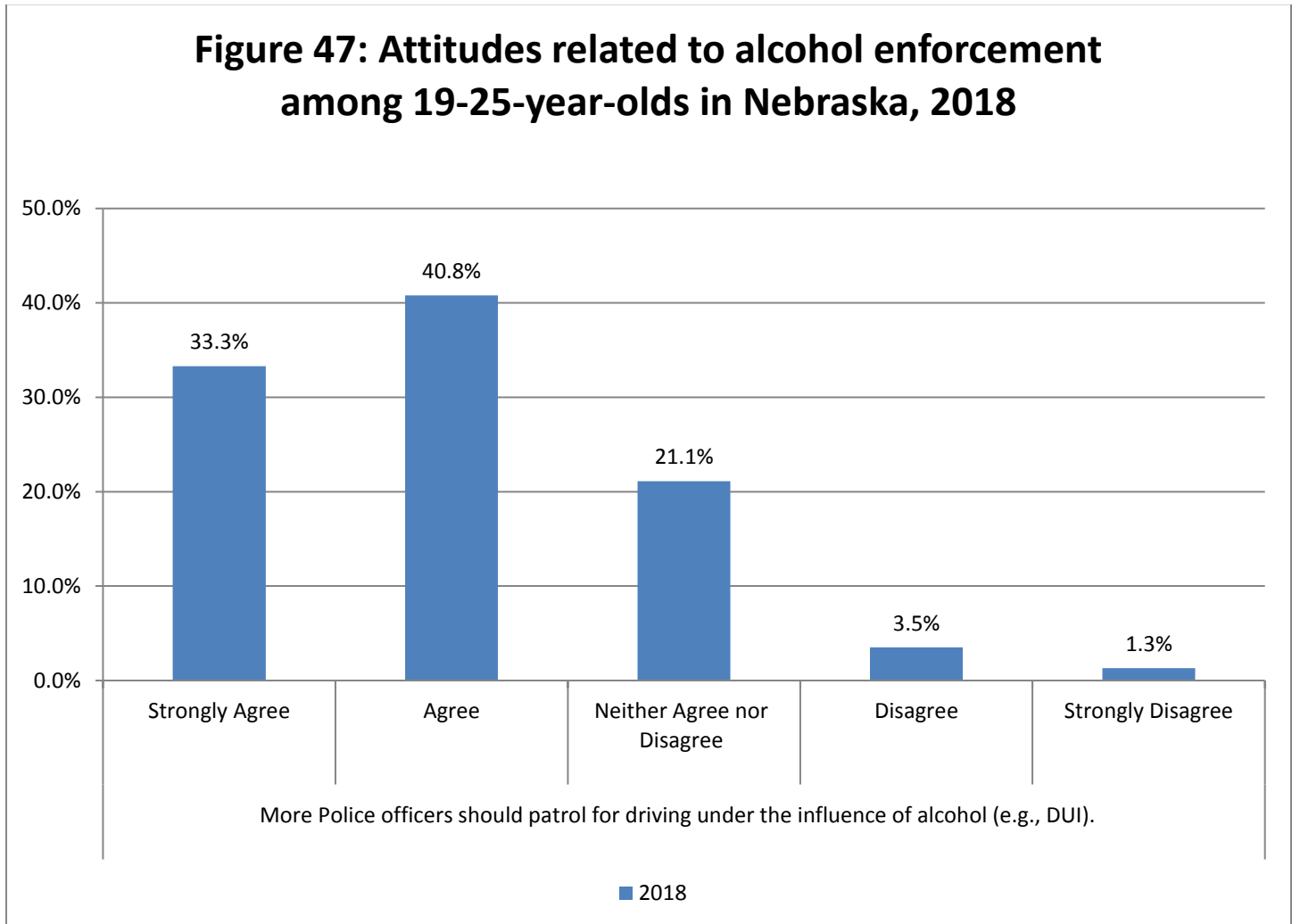
Figure 46: Perceptions of the sale of alcohol to minors among 19-25-year-olds in Nebraska (2018)



Since the first time the question was asked, the majority of young adults perceived that it is unlikely that an individual under 21 would be sold an alcoholic beverage at a convenience store (81.8% in 2012, 79.9% in 2013, 80.5% in 2016, and 80.9% in 2018). Similarly, the majority of young adults perceived it as unlikely that a minor would be sold an alcoholic drink at a bar or restaurant at their own request (76.9% in 2012, 77.7% in 2018, 76.5% in 2016, and 75.2% in 2018).

Attitudes and Perceptions Related to Alcohol Enforcement

In 2018, about three quarters of respondents (74.1%) agreed or strongly agreed that more police officers should patrol for drivers under the influence of alcohol (Figure 47).



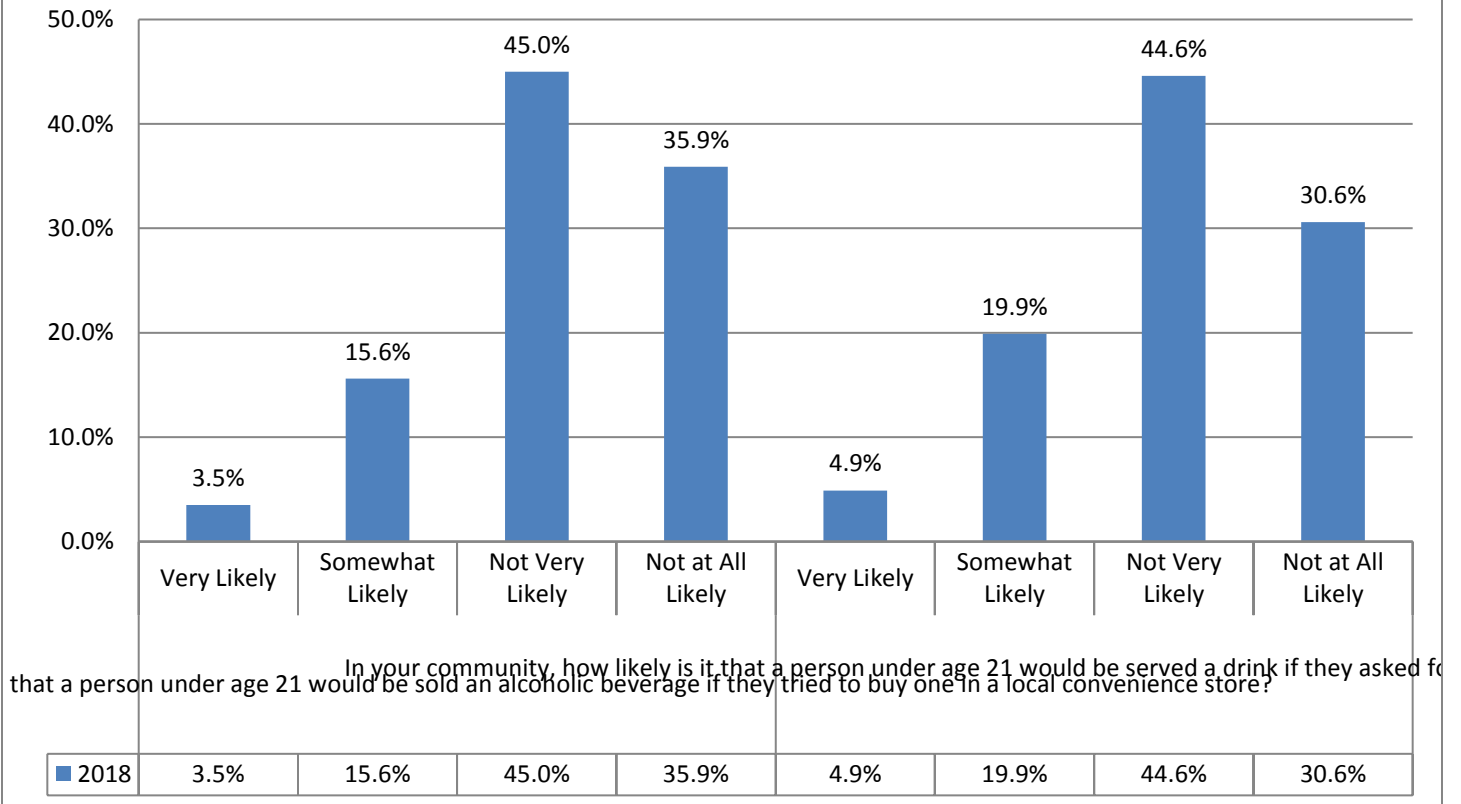
There has been a significant increase in the percent of young adults who agree or strongly agree that more police officers should patrol for driving under the influence from 61.7% in 2010 to 74.1% in 2018 ($p < .05$).

Young adults have not changed their perceptions significantly on whether someone caught driving under the influence of alcohol should be arrested and receive the maximum sentence. In 2010 52.0% agreed or strongly agreed that someone caught driving under the influence of alcohol should be arrested and receive the maximum sentence and in 2016 49.7% agreed or strongly agreed to this. This question was not asked in 2018.

Nearly two-thirds of young adult participants in 2018 reported police as being somewhat likely or very likely to break up parties where persons under 21-years-old are drinking with a rate of 63.9% in 2018. Nearly three-fourths of participants in 2018 also reported that it is somewhat likely or very likely that someone would be stopped by police and arrested for driving under the influence of alcohol, with a rate of 71.6% (Figure 48).

Young adults are significantly less likely to believe police are very likely or somewhat likely to break up parties where underage youth are drinking alcohol in 2018 (63.9%) than all four prior administrations (2010, 74.2%, 2012, 72.8%, 2013, 71.5%, 2016, 76.7%) ($p < .05$). In addition, the percentage of young people who believe that someone driving under the influence of alcohol would be stopped and arrested by police declined significantly in 2018 (71.5%), compared to all four prior administrations (2010, 77.4%, 2012, 77.5%, 2013, 75.9%, 2016, 76.7%) ($p < .05$).

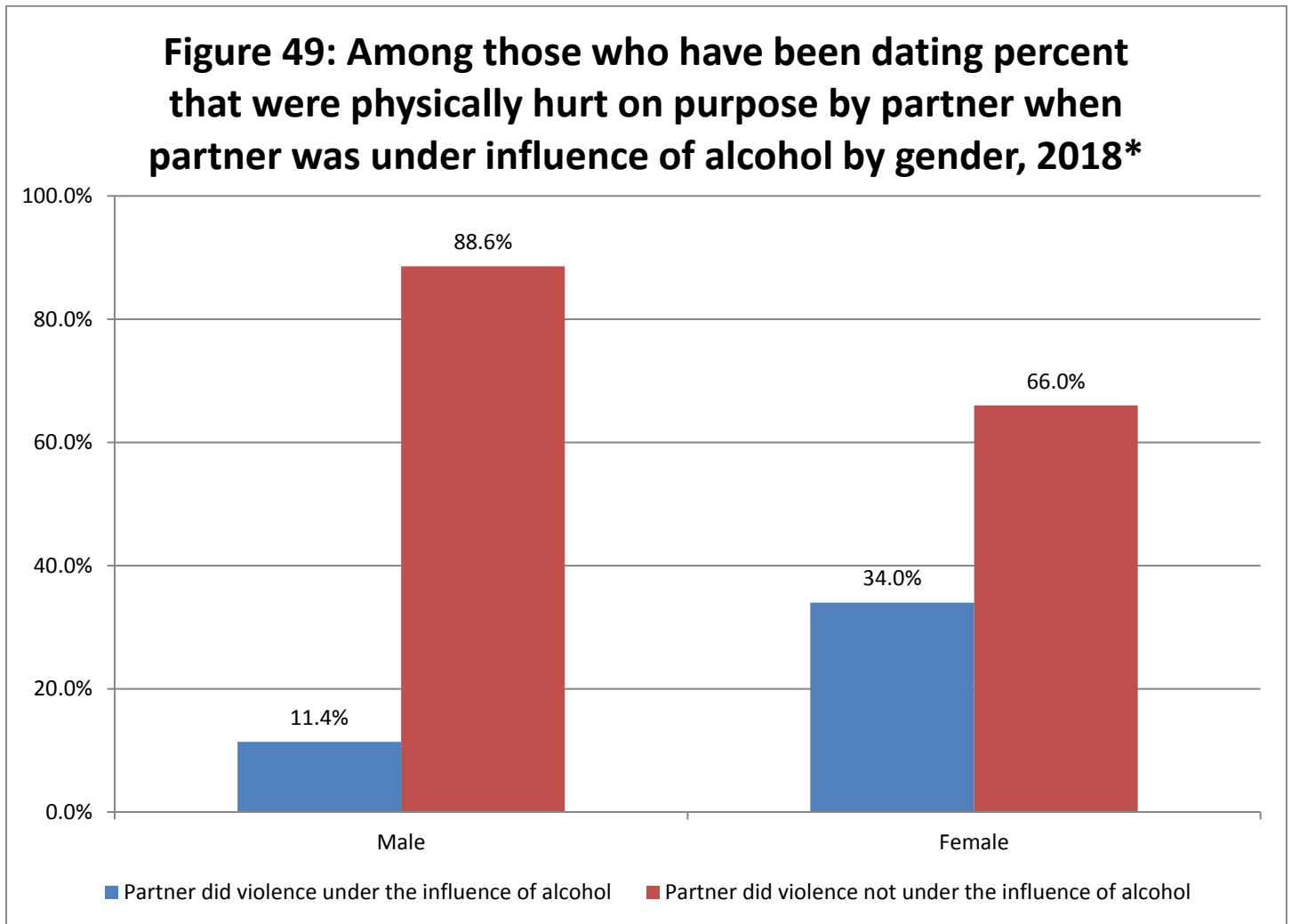
Figure 48: Perceptions of police enforcement of alcohol among 19-25-year-olds in Nebraska, 2018



Alcohol Use and Dating Violence

Physically Hurt By Partner Under Influence of Alcohol and Gender

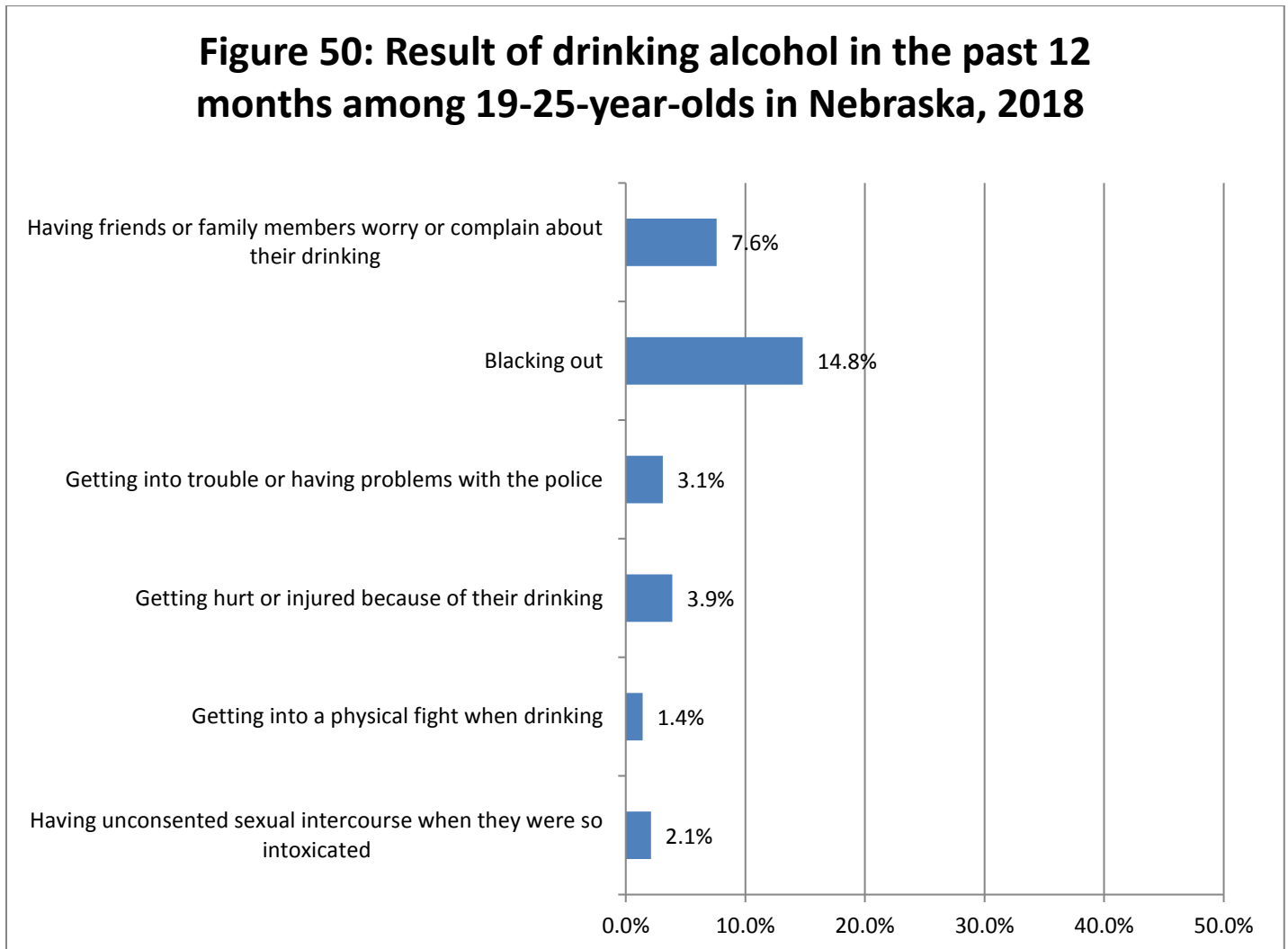
The 2016 NYAAOS asked respondents if someone they were dating or going out with physically hurt them on purpose while their partner was under the influence of alcohol. Due to the different question wording on the two administrations, the results cannot be compared to generate reliable statistics. In 2018, overall 24.7% indicated they had been physically hurt by a partner under the influence of alcohol. Females (34.0%) were significantly more likely to be physically hurt by a partner than males (11.4%) ($p < .05$) (Figure 49).



*Those who reported that they were dating and had been physically hurt on purpose by someone they were dating or going out with who was under the influence of alcohol at the time.

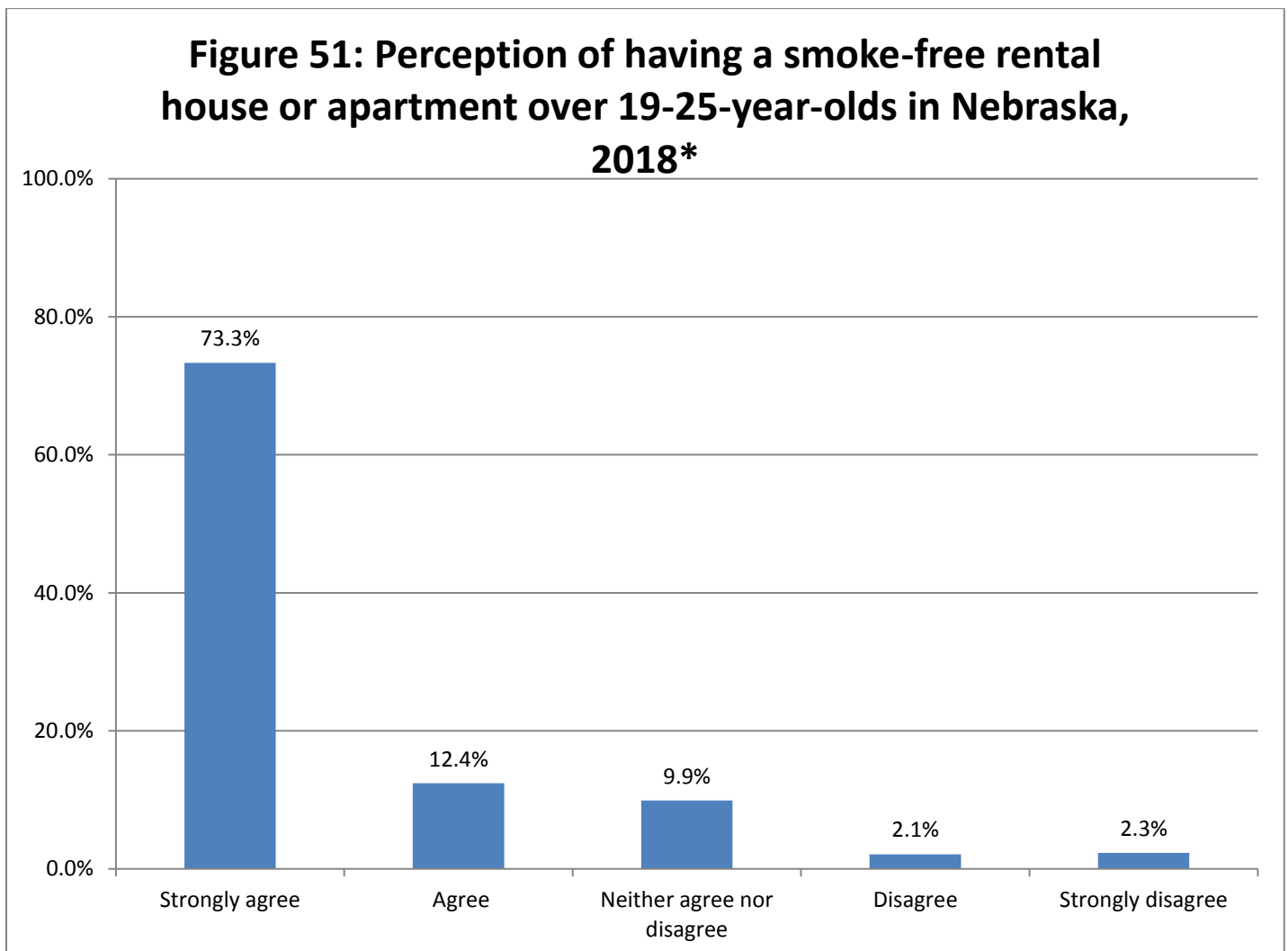
Result of Drinking Alcohol in the Past 12 Months

The 2018 NYAAOS asked respondents if they have experienced any of the facts as a result of drinking alcohol in the past 12 months. About one in seven respondents indicated blacking out, and less than 10 percent having friends or family members worry or complain about their drinking. Few respondents reported other consequences (Figure 50).



Perception of a Smoke-Free Rental House or Apartment

The 2018 NYAAOS asked respondents if they would like to choose a smoke-free rental house or apartment over a place that allows smoking, with other amenities being equal. A vast majority of young adults strongly agreed or agreed with this statement (85.7%) (Figure 51).



Statewide 2010 – 2018 Nebraska Young Adult Alcohol Opinion Survey Summary Table

Indicators Overall and by Gender

Indicators			Overall			Male			Female		
			Sample Size (n) ^a	Weighted % ^b	95% C.I. ^c Low - High	Sample Size (n) ^a	Weighted % ^b	95% C.I. ^c Low - High	Sample Size (n) ^a	Weighted % ^b	95% C.I. ^c Low - High
Alcohol Use											
1	Lifetime Alcohol Use	2010	3,445	87.4%	(86.3-88.5)	1,466	85.3%	(83.5-87.1)	1,979	89.6%	(88.3-90.9)
		2012	2,696	86.8%	(85.5-88.1)	1,149	86.1%	(84.1-88.1)	1,547	87.6%	(86.0-89.2)
		2013	2,787	86.5%	(85.2-87.7)	1,199	85.0%	(83.0-87.1)	1,588	88.0%	(86.4-89.6)
		2016	2,777	84.7%	(83.4-86.0)	1,436	84.3%	(82.4-86.2)	1,342	85.1%	(83.2-87.0)
		2018	1,967	85.7%	(84.2-87.2)	994	84.00%	(81.7-86.3)	949	87.40%	(85.3-89.5)
2	Past Month Alcohol Use	2010	3,427	67.9%	(66.3-69.5)	1,457	68.3%	(65.9-70.7)	1,970	67.5%	(65.4-69.6)
		2012	2,688	69.1%	(67.4-70.8)	1,144	70.4%	(67.8-73.0)	1,544	67.7%	(65.4-70.0)
		2013	2,769	68.4%	(66.7-70.1)	1,181	68.1%	(65.4-70.8)	1,573	68.7%	(66.4-71.0)
		2016	2,750	67.2%	(65.4-69.0)	1,421	68.1%	(65.7-70.5)	1,330	66.2%	(63.7-68.7)
		2018	1,932	65.1%	(63.0-67.2)	986	64.2%	(61.2-67.2)	946	66.0%	(63.0-69.0)
3	Past Month Binge Drinking	2010	3,398	43.8%	(42.1-45.5)	1,445	43.7%	(41.1-46.3)	1,953	43.9%	(41.7-46.1)
		2012	2,693	47.1%	(45.2-49.0)	1,146	50.9%	(48.0-53.8)	1,547	43.5%	(41.0-46.0)
		2013	2,736	44.9%	(43.0-46.8)	1,161	45.9%	(43.0-48.8)	1,575	43.9%	(41.4-46.4)
		2016	2,736	37.4%	(35.6-39.2)	1,408	38.2%	(35.7-40.7)	1,328	36.5%	(33.9-39.1)
		2018	1,915	33.4%	(31.3-35.5)	982	33.7%	(30.7-36.7)	933	33.0%	(30.0-36.0)
4	Past Month Binge Drinking, Among Past Month Alcohol Users	2010	2,290	64.8%	(62.8-66.8)	995	64.3%	(61.3-67.3)	1,295	65.4%	(62.8-68.0)
		2012	1,826	68.3%	(66.2-70.4)	806	72.0%	(68.9-75.1)	1,020	64.2%	(61.3-67.1)
		2013	1,837	66.4%	(64.2-68.6)	782	68.3%	(65.0-71.6)	1,055	64.4%	(61.5-67.3)
		2016	1,810	56.3%	(54.0-58.6)	940	57.1%	(53.9-60.3)	870	55.5%	(52.2-58.8)

Indicators			Overall			Male			Female		
			Sample Size (n) ^a	Weighted % ^b	95% C.I. ^c Low - High	Sample Size (n) ^a	Weighted % ^b	95% C.I. ^c Low - High	Sample Size (n) ^a	Weighted % ^b	95% C.I. ^c Low - High
		2018	1,226	51.9%	(49.1-54.7)	617	53.3%	(49.4-57.2)	609	50.4%	(46.4-54.4)
5	Binge Drank More Than Once in the Past Month	2010	3,398	31.7%	(30.1-33.3)	1,445	33.4%	(31.0-35.8)	1,953	29.9%	(27.9-31.9)
		2012	2,693	33.6%	(31.8-35.4)	1,146	37.3%	(34.5-40.1)	1,547	29.8%	(27.5-32.1)
		2013	1,987	45.8%	(43.6-48.0)	844	49.6%	(46.2-53.0)	1,143	41.8%	(38.9-44.7)
		2016	2,736	25.6%	(24.0-27.2)	1,408	27.3%	(25.0-29.6)	1,328	23.8%	(21.5-26.1)
		2018	1,226	51.9%	(49.1-54.7)	617	53.3%	(49.4-57.2)	609	50.4%	(46.4-54.4)
Alcohol Impaired Driving											
1	Past Month Driving After Binge Drinking	2010	3,419	8.4%	(7.5-9.3)	1,452	10.7%	(9.1-12.3)	1,937	6.0%	(4.9-7.1)
		2012	2,693	7.1%	(6.1-8.1)	1,146	8.6%	(7.0-10.2)	1,547	5.6%	(4.5-6.7)
		2013	1,990	8.9%	(7.6-10.2)	848	11.3%	(9.2-13.4)	1,142	6.4%	(5.0-7.8)
		2016	2,734	4.3%	(3.5-5.1)	1,408	4.9%	(3.8-6.0)	1,326	3.6%	(2.6-4.6)
		2018	1,903	4.0%	(3.1-4.9)	971	4.6%	(3.3-5.9)	932	3.4%	(2.2-4.6)
2	Past Year Alcohol Impaired Driving	2010	3,409	30.3%	(28.8-31.8)	1,446	33.7%	(31.3-36.1)	1,963	26.8%	(24.8-28.8)
		2012	2,696	23.9%	(22.3-25.5)	1,149	25.7%	(23.2-28.2)	1,547	21.9%	(19.8-24.0)
		2013	2,260	26.3%	(24.5-28.1)	948	29.0%	(26.1-31.9)	1,312	23.6%	(21.3-25.9)
		2016	2,737	17.2%	(15.8-18.6)	1,416	19.1%	(17.1-21.1)	1,321	15.1%	(13.2-17.0)
		2018	1,916	19.8%	(18.0-21.6)	979	19.8%	(17.3-22.3)	937	19.9%	(17.3-22.5)
Perception of Risk											
1	Perceive Great Risk from Binge Drinking	2010	3,271	32.1%	(30.5-33.7)	1,378	32.1%	(29.6-34.6)	1,893	38.5%	(36.3-40.7)
		2012	2,567	28.8%	(27.0-30.6)	1,083	28.8%	(26.1-31.5)	1,484	34.4%	(32.0-36.8)
		2013	2,804	28.3%	(26.6-30.0)	1,207	21.8%	(19.5-24.1)	1,597	35.3%	(33.0-37.6)
		2016	2,601	41.1%	(39.2-43.0)	1,322	37.2%	(34.6-39.8)	1,280	45.2%	(42.5-47.9)
		2018	1,855	40.6%	(38.4-42.8)	940	34.4%	(31.4-37.4)	915	47.1%	(43.9-50.3)

Indicators		Overall			Male			Female		
		Sample Size (n) ^a	Weighted % ^b	95% C.I. ^c Low - High	Sample Size (n) ^a	Weighted % ^b	95% C.I. ^c Low - High	Sample Size (n) ^a	Weighted % ^b	95% C.I. ^c Low - High

Indicators		Overall			Male			Female			
		Sample Size (n) ^a	Weighted % ^b	95% C.I. ^c Low - High	Sample Size (n) ^a	Weighted % ^b	95% C.I. ^c Low - High	Sample Size (n) ^a	Weighted % ^b	95% C.I. ^c Low - High	
Social Norms Regarding Alcohol Use											
1	Wrong or Very Wrong for Individuals Under 18 Years Old to Have One or Two Drinks	2010	-	-	-	-	-	-	-	-	-
		2012	2,682	80.0%	(78.5-81.5)	1,142	75.2%	(72.7-77.7)	1,540	85.0%	(83.2-86.8)
		2013	2,792	81.2%	(79.7-82.6)	1,200	78.0%	(75.7-80.4)	1,592	84.5%	(82.7-86.3)
		2016	2,789	83.6%	(82.2-85.0)	1,438	81.2%	(79.2-83.2)	1,350	86.2%	(84.4-88.0)
		2018	1,938	77.8%	(75.9-79.7)	1,003	75.0%	(72.3-77.7)	935	80.9%	(78.4-83.4)
2	Wrong or Very Wrong for Individuals 18 to 20 Years Old to Have One or Two Drinks	2010	3,325	51.8%	(50.1-53.5)	1,407	46.6%	(44.0-49.2)	1,918	57.0%	(54.8-59.2)
		2012	2,685	45.8%	(43.9-47.7)	1,143	42.6%	(39.7-45.5)	1,542	49.1%	(46.6-51.6)
		2013	2,790	53.7%	(51.9-55.6)	1,199	51.3%	(48.5-54.1)	1,591	56.3%	(53.8-58.7)
		2016	2,775	52.7%	(50.8-54.6)	1,432	48.8%	(46.2-51.4)	1,342	56.8%	(54.1-59.5)
		2018	1,951	44.3%	(42.1-46.5)	1,005	43.5%	(40.4-46.6)	946	45.2%	(42.0-48.4)
3	Wrong or Very Wrong for Individuals 21 and Older to Have One or Two Drinks	2010	3,329	3.5%	(2.9-4.1)	1,405	4.1%	(3.1-5.1)	1,924	2.9%	(2.1-3.7)
		2012	-	-	-	-	-	-	-	-	-
		2013	-	-	-	-	-	-	-	-	-
		2016	-	-	-	-	-	-	-	-	-
		2018	-	-	-	-	-	-	-	-	-
4	Wrong or Very Wrong for Individuals Under 18 Years Old to Get Drunk	2010	-	-	-	-	-	-	-	-	-
		2012	2,690	95.5%	(94.7-96.3)	1,147	91.3%	(89.7-92.9)	1,543	93.8%	(92.6-95.0)
		2013	2,806	93.0%	(92.1-94.0)	1,206	91.7%	(90.2-93.3)	1,600	94.5%	(93.3-95.6)

		2016	2,792	93.9%	(93.0-94.8)	1,442	93.4%	(92.1-94.7)	1,350	94.4%	(93.2-95.6)
		2018	1,952	92.8%	(91.7-93.9)	1,011	91.2%	(89.5-92.9)	941	94.5%	(93.0-96.0)
5	Wrong or Very Wrong for Individuals 18 to 20 Years Old to Get Drunk	2010	3,331	73.4%	(71.9-74.9)	1,409	69.8%	(67.4-72.2)	1,922	76.9%	(75.0-78.8)
		2012	2,670	71.1%	(69.4-72.8)	1,140	66.9%	(64.2-69.6)	1,530	75.5%	(73.3-77.7)
		2013	2,769	78.8%	(77.3-80.3)	1,186	74.9%	(72.5-77.4)	1,583	82.9%	(81.1-84.8)
		2016	2,797	81.8%	(80.4-83.2)	1,447	79.2%	(77.1-81.3)	1,350	84.6%	(82.7-86.5)
		2018	1,944	76.6%	(74.7-78.5)	1,002	74.8%	(72.1-77.5)	942	78.6%	(76.0-81.2)
Indicators			Overall			Male			Female		
			Sample Size (n) ^a	Weighted % ^b	95% C.I. ^c Low - High	Sample Size (n) ^a	Weighted % ^b	95% C.I. ^c Low - High	Sample Size (n) ^a	Weighted % ^b	95% C.I. ^c Low - High
6	Wrong or Very Wrong for Individuals 21 and Older to Get Drunk	2010	3,319	23.9%	(22.4-25.4)	1,403	25.6%	(23.3-27.9)	1,916	22.3%	(20.4-24.2)
		2012	2,684	18.8%	(17.3-20.3)	1,144	19.3%	(17.0-21.6)	1,540	18.2%	(16.3-20.1)
		2013	2,802	21.9%	(20.3-23.4)	1,205	21.8%	(19.4-24.1)	1,597	22.0%	(20.0-24.0)
		2016	2,796	29.2%	(27.5-30.9)	1,443	29.2%	(26.9-31.5)	1,353	29.1%	(26.7-31.5)
		2018	1,960	28.0%	(26.0-30.0)	1,012	28.4%	(25.6-31.2)	948	27.6%	(24.8-30.4)
7	Average Percent of Peers Believed to have binge Drank in Past 30 Days	2010	3,399	53.0%	(51.3-54.7)	1,448	50.8%	(48.2-53.4)	1,951	55.2%	(53.0-57.4)
		2012	2,660	52.8%	(50.9-54.7)	1,131	49.6%	(46.7-52.5)	1,529	56.0%	(53.5-58.5)
		2013	2,750	53.1%	(51.2-55.0)	1,176	50.5%	(47.6-53.4)	1,574	55.9%	(53.4-58.4)
		2016	2,726	49.7%	(47.8-51.6)	1,407	46.8%	(44.2-49.4)	1,320	52.8%	(50.1-55.5)
		2018	1,943	48.5%	(46.3-50.7)	1,005	45.2%	(42.1-48.2)	938	52.1%	(48.9-55.3)
8	Average Percent of Peers Believed to have Driving after Binge Drinking in Past 30 Days	2010	3,391	35.1%	(33.5-36.7)	1,447	32.0%	(29.6-34.4)	1,944	38.4%	(36.2-40.6)
		2012	2,644	33.1%	(31.3-34.9)	1,124	29.9%	(27.2-32.6)	1,520	36.4%	(34.0-38.8)
		2013	2,732	33.4%	(31.6-35.2)	1,167	31.1%	(28.4-33.8)	1,565	35.9%	(33.5-38.3)
		2016	2,713	30.5%	(28.8-32.2)	1,398	27.6%	(25.3-29.9)	1,315	33.7%	(31.1-36.3)
		2018	1,937	30.1%	(28.0-32.1)	1,002	27.6%	(24.9-30.4)	934	32.7%	(29.7-35.7)
Attitudes and Perceptions Related to Providing Alcohol to Minors											
1	Wrong or Very Wrong for Individuals 21 and Older to	2010	3,319	80.3%	(78.9-81.7)	1,406	75.9%	(73.7-78.1)	1,913	84.8%	(83.2-86.4)
		2012	2,678	79.1%	(77.6-80.6)	1,141	75.6%	(73.1-78.1)	1,537	82.8%	(80.9-84.7)

	Provide Alcohol for People Under 21 Years Old	2013	2,801	83.0%	(81.6-84.4)	1,204	79.7%	(77.4-82.0)	1,597	86.4%	(84.7-88.1)
		2016	2,790	83.2%	(81.8-84.6)	1,440	80.4%	(78.3-82.5)	1,350	86.1%	(84.3-87.9)
		2018	1,955	77.9%	(76.1-79.7)	1,007	78.0%	(75.4-80.6)	948	77.8%	(75.2-80.4)
2	Likely That a Person Under 21 Would Be Served a Drink at a Bar or Restaurant	2010	-	-	-	-	-	-	-	-	-
		2012	2,493	23.1%	(21.4-24.8)	1,039	20.9%	(18.4-23.4)	1,400	25.4%	(23.1-27.7)
		2013	2,789	20.2%	(18.7-21.7)	1,198	18.2%	(16.0-20.4)	1,591	22.2%	(20.2-24.2)
		2016	2,497	23.5%	(21.8-25.2)	1,284	21.1%	(18.9-23.3)	1,213	26.0%	(23.5-28.5)
		2018	1,762	24.8%	(22.8-26.8)	909	19.6%	(17.0-22.2)	853	30.4%	(27.3-33.5)
Indicators			Overall			Male			Female		
			Sample Size (n) ^a	Weighted % ^b	95% C.I. ^c Low - High	Sample Size (n) ^a	Weighted % ^b	95% C.I. ^c Low - High	Sample Size (n) ^a	Weighted % ^b	95% C.I. ^c Low - High
3	Likely That a Person Under 21 Would Be Sold a Drink at a Convenience Store	2010	-	-	-	-	-	-	-	-	-
		2012	2,444	18.2%	(16.7-19.7)	1,041	16.9%	(14.6-19.2)	1,403	19.5%	(17.4-21.6)
		2013	2,790	15.4%	(14.1-16.7)	1,201	15.2%	(13.2-17.2)	1,589	15.7%	(13.9-17.5)
		2016	2,561	19.5%	(18.0-21.0)	1,321	17.2%	(15.2-19.2)	1,241	22.0%	(19.7-24.3)
		2018	1,794	19.1%	(17.3-20.9)	932	16.1%	(13.7-18.5)	862	22.4%	(19.6-25.2)
4	Likely That Police Will Arrest an Adult Who is Believed to Have Provided Alcohol for People Under 21 Years Old	2010	3,004	70.2%	(68.6-71.8)	1,296	70.4%	(67.9-72.9)	1,708	70.0%	(67.8-72.2)
		2012	2,257	67.9%	(66.0-69.8)	993	69.8%	(66.9-72.7)	1,264	65.9%	(63.3-68.5)
		2013	2,787	53.4%	(51.5-55.2)	1,198	54.9%	(52.0-57.7)	1,589	51.8%	(49.3-54.2)
		2016	2,207	61.7%	(59.7-63.7)	1,145	60.0%	(57.2-62.8)	1,061	63.5%	(60.6-66.4)
		2018	1,555	51.6%	(49.1-54.1)	806	49.1%	(45.6-52.6)	749	54.2%	(50.6-57.8)
5	While Growing up Parents or Caregivers Allowed Alcoholic Drinks at Home while Underage	2010	-	-	-	-	-	-	-	-	-
		2012	-	-	-	-	-	-	-	-	-
		2013	-	-	-	-	-	-	-	-	-
		2016	2,800	18.1%	(16.7-19.5)	1,448	15.4%	(13.5-17.3)	1,352	21.0%	(18.8-23.2)
		2018	1,951	41.9%	(39.7-44.1)	1,004	40.4%	(37.4-43.4)	947	43.5%	(40.3-46.7)
Attitudes, Perceptions, and Behaviors Related to Alcohol Service and Sale											
1		2010	3,460	92.4%	(91.5-93.3)	1,473	89.2%	(87.6-90.8)	1,987	95.7%	(94.8-96.6)

	Support for Responsible Beverage Service Training	2012	2,695	95.2%	(94.4-96.0)	1,149	93.1%	(91.6-94.6)	1,546	97.5%	(96.7-98.3)
		2013	2,815	95.3%	(94.6-96.1)	1,212	93.1%	(91.7-94.5)	1,603	97.7%	(97.0-98.5)
		2016	-	-	-	-	-	-	-	-	-
		2018	-	-	-	-	-	-	-	-	-
2	Support Responsible Seller	2010	-	-	-	-	-	-	-	-	-
		2012	2,692	92.5%	(91.5-93.5)	1,147	91.0%	(89.3-92.7)	1,545	94.0%	(92.8-95.2)
		2013	2,809	82.7%	(81.3-84.1)	1,209	77.6%	(75.3-80.0)	1,600	88.2%	(86.6-89.7)
		2016	-	-	-	-	-	-	-	-	-
		2018	-	-	-	-	-	-	-	-	
Indicators			Overall			Male			Female		
			Sample Size (n) ^a	Weighted % ^b	95% C.I. ^c Low - High	Sample Size (n) ^a	Weighted % ^b	95% C.I. ^c Low - High	Sample Size (n) ^a	Weighted % ^b	95% C.I. ^c Low - High
3	Support Bars Staying Open Until 2 AM	2010	-	-	-	-	-	-	-	-	-
		2012	2,678	49.4%	(47.5-51.3)	1,143	51.4%	(48.5-54.3)	1,535	47.3%	(44.8-49.8)
		2013	2,804	50.2%	(48.4-52.1)	1,206	49.5%	(46.6-52.3)	1,598	51.0%	(48.5-53.4)
		2018	-	-	-	-	-	-	-	-	-
		2018	-	-	-	-	-	-	-	-	-
4	Likely That a Drunk Adult Would be Served an Alcoholic Beverage at a Local Bar or Restaurant	2010	3,092	88.6%	(87.5-89.7)	1,302	87.8%	(86.0-89.6)	1,790	89.5%	(88.1-90.9)
		2012	2,362	86.9%	(85.5-88.3)	998	85.4%	(83.2-87.6)	1,364	88.3%	(86.6-90.0)
		2013	2,793	75.2%	(73.6-76.8)	1,199	72.1%	(69.5-74.6)	1,594	78.4%	(76.4-80.4)
		2016	-	-	-	-	-	-	-	-	-
		2018	-	-	-	-	-	-	-	-	-
5	Likely That a Drunk Adult Would be Sold an Alcoholic Beverage at a Local Convenience Store	2010	3,019	84.2%	(82.9-85.5)	1,280	83.4%	(81.4-85.4)	1,739	84.9%	(83.2-86.6)
		2012	2,324	80.8%	(79.2-82.4)	998	79.3%	(76.8-81.8)	1,336	82.4%	(80.4-84.4)
		2013	2,792	69.6%	(67.9-71.4)	1,199	68.8%	(66.2-71.4)	1,593	70.5%	(68.3-72.8)
		2016	-	-	-	-	-	-	-	-	-
		2018	-	-	-	-	-	-	-	-	-
6		2010	1,107	15.4%	(13.3-17.5)	447	14.1%	(10.9-17.3)	660	16.6%	(13.8-19.4)

	ID Was Not Checked at Last Purchase Attempt, Among Those Who Bought or Tried to Buy Alcohol in the Past 30 Days and Did Not Believe the Person Selling Them the Alcohol Personally Knew if They Were Old Enough to Buy	2012	868	16.3%	(13.8-18.8)	355	16.8%	(12.9-20.7)	513	15.9%	(12.7-19.1)
		2013	1,552	15.0%	(13.2-16.8)	663	13.6%	(11.0-16.2)	889	16.1%	(13.7-18.5)
		2016	955	13.0%	(10.9-15.1)	460	18.3%	(14.8-21.8)	496	8.3%	(5.9-10.7)
		2018	568	13.6%	(10.8-16.4)	252	14.3%	(10.0-18.6)	316	13.0%	(9.3-16.7)
7	Support for Additional Taxes on Alcohol	2010	-	-	-	-	-	-	-	-	-
		2012	-	-	-	-	-	-	-	-	-
		2013	-	-	-	-	-	-	-	-	-
		2016	2,356	41.1%	(39.1-43.1)	1,243	37.2%	(34.5-39.9)	1,113	45.5%	(42.6-48.4)
		2018	-	-	-	-	-	-	-	-	-

Indicators		Overall			Male			Female			
		Sample Size (n) ^a	Weighted % ^b	95% C.I. ^c Low - High	Sample Size (n) ^a	Weighted % ^b	95% C.I. ^c Low - High	Sample Size (n) ^a	Weighted % ^b	95% C.I. ^c Low - High	
Attitudes and Perceptions Related to Alcohol Enforcement											
1	Support for Increased Patrolling of DUI	2010	3,454	61.7%	(60.1-63.3)	1,470	54.7%	(52.2-57.2)	1,984	68.9%	(66.9-70.9)
		2012	2,684	63.8%	(62.0-65.6)	1,146	54.9%	(52.0-57.8)	1,538	73.0%	(70.8-75.2)
		2013	2,804	60.8%	(59.0-62.6)	1,205	54.4%	(51.6-57.2)	1,599	67.5%	(65.2-69.8)
		2016	2,799	65.4%	(63.6-67.2)	1,448	62.0%	(59.5-64.5)	1,351	69.7%	(67.2-72.2)
		2018	1,956	74.1%	(72.2-76.0)	1,006	68.6%	(65.7-71.5)	950	79.9%	(77.3-82.5)
2	Support for Increased Sobriety Checkpoints	2010	-	-	-	-	-	-	-	-	-
		2012	2,650	43.8%	(41.9-45.7)	1,135	36.2%	(33.4-39.0)	1,515	51.7%	(49.2-54.2)
		2013	-	-	-	-	-	-	-	-	-
		2016	-	-	-	-	-	-	-	-	-
		2018	-	-	-	-	-	-	-	-	-
3	Support for Maximum Punishment for DUI Offense	2010	3,445	51.9%	(50.2-53.6)	1,469	48.0%	(45.4-50.6)	1,976	56.1%	(53.9-58.3)
		2012	2,683	45.0%	(43.1-46.9)	1,140	42.0%	(39.1-44.9)	1,543	48.0%	(45.5-50.5)
		2013	2,787	44.3%	(42.5-46.2)	1,199	41.1%	(38.3-43.9)	1,588	47.8%	(45.3-50.2)

		2016	2,786	49.7%	(47.8-51.6)	1,432	49.4%	(46.8-52.0)	1,354	51.0%	(48.3-53.7)
		2018	-	-	-	-	-	-	-	-	-
4	Likely That Someone Would be Stopped by the Police and Arrested for Driving Under the Influence of Alcohol	2010	3,221	77.4%	(76.0-78.8)	1,372	75.7%	(73.4-78.0)	1,849	79.1%	(77.2-81.0)
		2012	2,500	77.5%	(75.9-79.1)	1,062	78.9%	(76.4-81.4)	1,438	76.0%	(73.8-78.2)
		2013	2,793	75.9%	(74.3-77.5)	1,205	68.2%	(65.6-70.8)	1,588	72.0%	(69.8-74.3)
		2016	2,560	76.7%	(75.1-78.3)	1,345	73.8%	(71.4-76.2)	1,215	80.0%	(77.7-82.3)
		2018	1,752	71.5%	(69.4-73.6)	895	67.9%	(64.8-71.0)	857	75.3%	(72.4-78.2)
5	Likely that Police Will Break Up Parties Where Minors Are Drinking	2010	3,127	74.2%	(72.7-75.7)	1,336	76.1%	(73.8-78.4)	1,791	72.3%	(70.2-74.4)
		2012	2,385	72.8%	(71.0-74.6)	1,026	75.0%	(72.3-77.7)	1,359	70.6%	(68.2-73.0)
		2013	2,787	71.5%	(69.8-73.2)	1,201	62.2%	(59.4-64.9)	1,586	59.0%	(56.6-61.5)
		2016	2,346	76.7%	(75.0-78.4)	1,226	66.8%	(64.2-69.4)	1,120	72.9%	(70.3-75.5)
		2018	1,648	64.0%	(61.7-66.3)	847	61.9%	(58.6-65.2)	801	66.2%	(62.9-69.5)
Indicators			Overall			Male			Female		
			Sample Size (n) ^a	Weighted % ^b	95% C.I. ^c Low - High	Sample Size (n) ^a	Weighted % ^b	95% C.I. ^c Low - High	Sample Size (n) ^a	Weighted % ^b	95% C.I. ^c Low - High
6	Support for Alcohol Being Allowed in State Parks	2010	-	-	-	-	-	-	-	-	-
		2012	2,688	50.2%	(48.3-52.1)	1,147	53.3%	(50.4-56.2)	1,541	47.0%	(44.5-49.5)
		2013	2,798	48.8%	(46.9-50.6)	1,204	50.5%	(47.6-53.3)	1,594	47.0%	(44.5-49.4)
		2016	-	-	-	-	-	-	-	-	-
		2018	-	-	-	-	-	-	-	-	-

^a Unweighted sample size (i.e., number of survey respondents)

^b Percentage weighted by gender, age, and region

^c 95% confidence interval for the weighted percentage

Indicators by Age Category

Indicators			19-20-year-olds			21-22-year-olds			23-25-year-olds		
			Sample Size (n) ^a	Weighted % ^b	95% C.I. ^c Low - High	Sample Size (n) ^a	Weighted % ^b	95% C.I. ^c Low - High	Sample Size (n) ^a	Weighted % ^b	95% C.I. ^c Low - High
Alcohol Use											
1	Lifetime Alcohol Use	2010	920	71.6%	(68.7-74.5)	1,061	93.7%	(92.2-95.2)	1,464	95.0%	(93.9-96.1)
		2012	725	72.3%	(69.0-75.6)	837	91.4%	(89.5-93.3)	1,134	93.6%	(92.2-95.0)
		2013	804	72.1%	(69.0-75.2)	803	92.9%	(91.1-94.7)	1,180	92.1%	(90.6-93.6)
		2016	817	70.5%	(67.4-73.6)	850	89.5%	(87.4-91.6)	1,111	91.4%	(89.7-93.1)
		2018	609	72.1%	(68.5-75.7)	498	90.4%	(87.8-93.0)	835	92.7%	(90.9-94.5)
2	Past Month Alcohol Use	2010	914	43.1%	(39.9-46.3)	1,060	81.2%	(78.8-83.6)	1,453	77.6%	(75.5-79.7)
		2012	725	48.1%	(44.5-51.7)	835	77.4%	(74.6-80.2)	1,128	78.0%	(75.6-80.4)
		2013	794	46.0%	(42.5-49.5)	794	77.3%	(74.4-80.2)	1,166	77.8%	(75.4-80.2)
		2016	815	43.9%	(40.5-47.3)	845	76.1%	(73.2-79.0)	1,091	77.6%	(75.1-80.1)
		2018	608	42.6%	(38.7-46.5)	498	74.1%	(70.2-78.0)	827	76.2%	(73.3-79.1)
3	Past Month Binge Drinking	2010	908	27.3%	(24.4-30.2)	1,050	52.6%	(49.6-55.6)	1,440	50.4%	(47.8-53.0)
		2012	723	34.8%	(31.3-38.3)	836	52.8%	(49.4-56.2)	1,134	52.0%	(49.1-54.9)
		2013	838	33.3%	(30.1-36.5)	783	51.7%	(48.2-55.2)	1,115	49.0%	(46.1-51.9)
		2016	818	24.8%	(21.8-27.8)	841	48.0%	(44.6-51.4)	1,077	38.6%	(35.7-41.5)
		2018	608	21.9%	(18.6-25.2)	498	40.0%	(35.7-44.3)	809	37.9%	(34.6-41.2)
4	Past Month Binge Drinking, Among Past Month Alcohol Users	2010	396	64.0%	(59.3-68.7)	811	64.9%	(61.6-68.2)	1,083	65.1%	(62.3-67.9)
		2012	343	72.1%	(67.3-76.9)	632	68.5%	(64.9-72.1)	851	66.5%	(63.3-69.7)
		2013	364	70.1%	(65.5-74.7)	591	68.7%	(65.0-72.4)	852	63.0%	(59.7-66.3)
		2016	364	57.2%	(52.0-62.4)	591	64.0%	(60.2-67.8)	852	50.2%	(46.8-53.6)
		2018	258	51.6%	(45.5-57.7)	360	55.3%	(50.1-60.5)	609	50.1%	(46.1-54.1)

Indicators			19-20-year-olds			21-22-year-olds			23-25-year-olds		
			Sample Size (n) ^a	Weighted % ^b	95% C.I. ^c Low - High	Sample Size (n) ^a	Weighted % ^b	95% C.I. ^c Low - High	Sample Size (n) ^a	Weighted % ^b	95% C.I. ^c Low - High
5	Binge Drank More Than Once in the Past Month	2010	908	20.2%	(17.6-22.8)	1,050	39.2%	(36.2-42.2)	1,440	35.3%	(32.8-37.8)
		2012	723	25.0%	(21.8-28.2)	836	39.5%	(36.2-42.8)	1,134	35.6%	(32.8-38.4)
		2013	414	44.4%	(39.6-49.2)	640	49.2%	(45.3-53.1)	933	44.2%	(41.0-47.4)
		2016	818	18.0%	(15.4-20.6)	841	32.9%	(29.7-36.1)	1,077	25.7%	(23.1-28.3)
		2018	608	14.8%	(12.0-17.6)	499	28.1%	(24.1-32.1)	809	19.8%	(17.0-22.6)
Alcohol Impaired Driving											
1	Past Month Driving After Binge Drinking	2010	912	4.1%	(2.8-5.4)	1,058	8.8%	(7.1-10.5)	1,449	11.4%	(9.8-13.0)
		2012	723	5.6%	(3.9-7.3)	836	6.8%	(5.1-8.5)	1,134	8.2%	(6.6-9.8)
		2013	837	5.6%	(4.0-7.2)	783	6.8%	(5-8.6)	1,113	6.3%	(4.9-7.7)
		2016	806	2.6%	(1.5-3.7)	787	4.6%	(3.2-6.0)	1,152	5.2%	(3.9-6.5)
		2018	601	2.5%	(1.2-3.8)	493	2.6%	(1.2-4.0)	808	6.1%	(4.4-7.8)
2	Past Year Alcohol Impaired Driving	2010	912	19.3%	(16.7-21.9)	1,053	34.9%	(32.0-37.8)	1,444	35.6%	(33.1-38.1)
		2012	725	19.4%	(16.5-22.3)	837	22.1%	(19.3-24.9)	1,134	28.1%	(25.5-30.7)
		2013	511	16.0%	(20.8-28.2)	713	21.5%	(20.2-26.4)	1,036	26.4%	(26.4-32.0)
		2016	810	10.9%	(8.8-13.0)	838	20.0%	(17.3-22.7)	1,088	19.6%	(17.2-22.0)
		2018	606	13.4%	(10.7-16.1)	491	17.9%	(14.5-21.3)	819	25.8%	(22.8-28.8)
Perception of Risk											
1	Perceive Great Risk from Binge Drinking	2010	887	36.5%	(32.4-40.8)	995	28.8%	(25.3-32.6)	1,389	31.1%	(27.9-34.4)
		2012	687	32.3%	(28.8-35.8)	798	29.8%	(26.6-33.0)	1,130	84.3%	(82.2-86.4)
		2013	816	30.7%	(27.5-33.9)	807	28.5%	(25.4-31.6)	1,172	83.2%	(81.1-85.4)
		2016	771	43.2%	(39.7-46.7)	801	41.9%	(38.5-45.3)	1,029	39.0%	(36.0-42.0)
		2018	580	43.1%	(39.1-47.1)	476	42.0%	(37.6-46.4)	799	38.0%	(34.6-41.4)

Indicators		19-20-year-olds			21-22-year-olds			23-25-year-olds			
		Sample Size (n) ^a	Weighted % ^b	95% C.I. ^c Low - High	Sample Size (n) ^a	Weighted % ^b	95% C.I. ^c Low - High	Sample Size (n) ^a	Weighted % ^b	95% C.I. ^c Low - High	
Social Norms Regarding Alcohol Use											
1	Wrong or Very Wrong for Individuals Under 18 Years Old to Have One or Two Drinks	2010	-	-	-	-	-	-	-	-	-
		2012	721	74.40%	(71.3-77.5)	831	79.20%	(76.5-81.9)	1,130	84.30%	(82.2-86.4)
		2013	867	76.40%	(73.6-79.3)	797	83.10%	(80.5-85.7)	1,128	83.50%	(81.3-85.7)
		2016	815	77.1%	(74.2-80.0)	866	84.8%	(82.4-87.2)	1,107	87.6%	(85.7-89.5)
		2018	603	71.5%	(67.9-75.1)	506	79.1%	(75.5-82.7)	829	81.7%	(79.1-84.3)
2	Wrong or Very Wrong for Individuals 18 to 20 Years Old to Have One or Two Drinks	2010	890	45.20%	(40.9-49.5)	1,027	51.50%	(47.5-55.5)	1,408	57.20%	(53.7-60.6)
		2012	723	35.80%	(32.3-39.3)	832	46.10%	(42.7-49.5)	1,130	52.40%	(49.5-55.3)
		2013	863	45.10%	(41.8-48.4)	797	56.80%	(53.4-60.2)	1,130	58.00%	(55.1-60.9)
		2016	812	40.10%	(36.7-43.5)	796	56.90%	(53.6-60.2)	1,168	58.70%	(55.8-61.6)
		2018	606	36.0%	(32.2-39.8)	509	47.0%	(42.7-51.3)	835	48.7%	(45.3-52.1)
3	Wrong or Very Wrong for Individuals 21 and Older to Have One or Two Drinks	2010	893	3.6%	(2.4-4.8)	1,029	3.0%	(2.0-4.0)	1,132	95.4%	(94.2-96.6)
		2012	-	-	-	-	-	-	-	-	-
		2013	-	-	-	-	-	-	-	-	-
		2016	-	-	-	-	-	-	-	-	-
		2018	-	-	-	-	-	-	-	-	-
4	Wrong or Very Wrong for Individuals Under 18 Years Old to Get Drunk	2010	-	-	-	-	-	-	-	-	-
		2012	724	88.5%	(86.2-90.8)	834	92.3%	(90.5-94.1)	1,159	83.4%	(81.3-85.6)
		2013	868	89.7%	(87.7-91.7)	799	95%	(93.0-96.2)	1,139	95%	(93.2-95.8)
		2016	825	89.9%	(87.8-92.0)	868	95%	(93.2-96.2)	1,099	96%	(95.1-97.3)
		2018	602	90.0%	(87.6-92.4)	514	93%	(91.0-95.4)	836	94%	(92.8-96.0)
5	Wrong or Very Wrong for Individuals 18 to 20 Years Old to Get Drunk	2010	891	68.7%	(65.7-71.7)	1,030	73.3%	(70.6-76.0)	1,130	19.5%	(17.2-21.8)
		2012	717	61.1%	(57.5-64.7)	825	72.7%	(69.7-75.7)	1,182	20.4%	(18.1-22.7)
		2013	864	70.7%	(67.7-73.7)	786	80.5%	(77.7-83.3)	1,119	83.8%	(81.6-86.0)

		2016	824	73.9%	(70.9-76.9)	867	84.2%	(81.8-86.6)	1106	85.8%	(83.7-87.9)
		2018	601	65.2%	(61.4-69.0)	513	82.1%	(78.8-85.4)	830	81.4%	(78.7-84.1)
Indicators		19-20-year-olds			21-22-year-olds			23-25-year-olds			
			Sample Size (n) ^a	Weighted % ^b	95% C.I. ^c Low - High	Sample Size (n) ^a	Weighted % ^b	95% C.I. ^c Low - High	Sample Size (n) ^a	Weighted % ^b	95% C.I. ^c Low - High
6	Wrong or Very Wrong for Individuals 21 and Older to Get Drunk	2010	889	26.7%	(23.8-29.6)	1026	21.8%	(19.3-24.3)	1404	87.6%	(85.9-89.3)
		2012	724	17.9%	(15.1-20.7)	830	18.4%	(15.8-21.0)	1126	85.5%	(83.4-87.6)
		2013	817	23.3%	(20.4-26.2)	803	22.6%	(19.7-25.5)	1181	86.3%	(84.4-88.3)
		2016	822	31.4%	(28.2-34.6)	866	28.9%	(25.9-31.9)	1108	27.8%	(25.2-30.4)
		2018	608	32.4%	(28.7-36.1)	512	29.7%	(25.7-33.7)	840	23.8%	(20.9-26.7)
7	Average Percent of Peers Believed to have binge Drank in Past 30 Days	2010	912	50.8%	(47.6-54.0)	1,046	56.7%	(53.7-59.7)	1,441	52.1%	(49.5-54.7)
		2012	714	50.1%	(46.4-53.8)	823	55.2%	(51.8-58.6)	1,123	53.0%	(50.1-55.9)
		2013	797	49.6%	(46.1-53.1)	792	56.3%	(52.8-59.8)	1,161	53.4%	(50.5-56.3)
		2016	796	45.2%	(41.7-48.7)	847	52.2%	(48.8-55.6)	1,083	51.1%	(48.1-54.1)
		2018	598	40.9%	(36.9-44.8)	511	52.4%	(48.0-56.7)	834	51.6%	(48.2-55.0)
8	Average Percent of Peers Believed to have Driving after Binge Drinking in Past 30 Days	2010	910	32.6%	(29.6-35.6)	1,043	37.0%	(34.1-39.9)	1,438	35.7%	(33.2-38.2)
		2012	711	31.6%	(28.2-35.0)	820	33.6%	(30.4-36.8)	1,113	33.9%	(31.1-36.7)
		2013	792	31.0%	(27.8-34.2)	783	33.9%	(30.6-37.2)	1,157	34.8%	(32.1-37.5)
		2016	793	29.0%	(25.8-32.2)	844	31.4%	(28.3-34.5)	1,076	31.0%	(28.2-33.8)
		2018	597	24.0%	(20.6-27.5)	510	32.2%	(28.1-36.2)	830	33.2%	(29.9-36.4)
Attitudes and Perceptions Related to Providing Alcohol to Minors											
1	Wrong or Very Wrong for Individuals 21 and Older to Provide Alcohol for People Under 21 Years Old	2010	888	71.6%	(68.6-74.6)	1,027	79.7%	(77.2-82.2)	1,030	22.8%	(20.2-25.4)
		2012	722	68.5%	(65.1-71.9)	830	80.6%	(77.9-83.3)	1,179	21.0%	(18.7-23.3)
		2013	815	77.8%	(74.9-80.6)	805	83.4%	(80.8-86.0)	1,168	88.6%	(86.8-90.4)
		2016	823	74.8%	(71.8-77.8)	866	83.8%	(81.3-86.3)	1,101	88.9%	(87.0-90.8)
		2018	610	66.7%	(63.0-70.4)	510	81.6%	(78.2-85.0)	836	83.7%	(81.2-86.2)
2		2010	-	-	-	-	-	-	-	-	-
		2012	641	21.6%	(18.4-24.8)	768	24.9%	(21.8-28.0)	1,251	73.9%	(71.5-76.3)

	Likely That a Person Under 21 Would Be Served a Drink at a Bar or Restaurant	2013	803	19.9%	(17.1-22.7)	807	19.1%	(16.4-21.8)	1,051	25.8%	(23.2-28.4)
		2016	722	18.8%	(15.9-21.7)	776	24.4%	(21.4-27.4)	998	26.3%	(23.6-29.0)
		2018	537	20.9%	(17.5-24.3)	486	27.2%	(23.2-31.2)	738	26.0%	(22.8-29.2)
Indicators			19-20-year-olds			21-22-year-olds			23-25-year-olds		
			Sample Size (n) ^a	Weighted % ^b	95% C.I. ^c Low - High	Sample Size (n) ^a	Weighted % ^b	95% C.I. ^c Low - High	Sample Size (n) ^a	Weighted % ^b	95% C.I. ^c Low - High
3	Likely That a Person Under 21 Would Be Sold a Drink at a Convenience Store	2010	-	-	-	-	-	-	-	-	-
		2012	648	22.4%	(19.4-25.4)	775	15.6%	(13.0-18.2)	1,021	17.3%	(15.0-20.6)
		2013	806	18.1%	(15.4-20.8)	806	15.0%	(12.5-17.5)	1,173	54.0%	(51.2-56.9)
		2016	726	22.7%	(19.6-25.8)	810	17.4%	(14.8-20.0)	1,026	18.9%	(16.5-21.3)
		2018	558	20.1%	(16.8-23.4)	474	19.0%	(15.5-22.5)	763	18.6%	(15.8-21.4)
4	Likely That Police Will Arrest an Adult Who is Believed to Have Provided Alcohol for People Under 21 Years Old	2010	811	64.6%	(61.3-67.9)	942	71.2%	(68.3-74.1)	1,469	92.6%	(91.3-93.9)
		2012	611	67.4%	(63.7-71.1)	709	65.4%	(61.9-68.9)	1,133	96.1%	(95.0-97.2)
		2013	807	51.7%	(48.3-55.2)	807	54.0%	(50.6-57.5)	1,188	95.2%	(94.0-96.5)
		2016	651	64.8%	(61.1-68.5)	710	62.8%	(59.2-66.4)	847	58.4%	(55.1-61.7)
		2018	499	53.3%	(48.9-57.7)	409	50.9%	(46.0-55.8)	649	50.5%	(46.6-54.4)
5	While Growing up Parents or Caregivers Allowed Alcoholic Drinks at Home while Underage	2010	-	-	-	-	-	-	-	-	-
		2012	-	-	-	-	-	-	-	-	-
		2013	-	-	-	-	-	-	-	-	-
		2016	822	18.7%	(16.0-21.4)	868	19.7%	(17.1-22.3)	1,110	16.4%	(14.2-18.6)
		2018	607	44.8%	(40.8-48.8)	513	48.1%	(43.8-52.4)	831	36.1%	(32.8-39.4)
Attitudes, Perceptions, and Behaviors Related to Alcohol Service and Sale											
1	Support for Responsible Beverage Service Training	2010	929	92.9%	(91.2-94.6)	1,062	91.5%	(89.8-93.2)	1,186	80.6%	(78.3-82.8)
		2012	725	94%	(92.3-95.7)	837	95.3%	(93.9-96.7)	1,133	96.1%	(95.0-97.0)
		2013	819	93.9%	(92.3-95.5)	808	97.0%	(95.8-98.2)	1,126	49.3%	(46.4-52.2)
		2016	-	-	-	-	-	-	-	-	-
		2018	-	-	-	-	-	-	-	-	-
2	Support Responsible Seller	2010	-	-	-	-	-	-	-	-	

		2012	724	91.1%	(89.0-93.2)	835	94.3%	(92.7-95.9)	1,349	89.3%	(87.6-91.0)
		2013	815	82.5%	(79.9-85.1)	808	86.3%	(83.9-88.7)	1,034	89.7%	(87.8-91.6)
		2016	-	-	-	-	-	-	-	-	-
		2018	-	-	-	-	-	-	-	-	-
Indicators			19-20-year-olds			21-22-year-olds			23-25-year-olds		
			Sample Size (n) ^a	Weighted % ^b	95% C.I. ^c Low - High	Sample Size (n) ^a	Weighted % ^b	95% C.I. ^c Low - High	Sample Size (n) ^a	Weighted % ^b	95% C.I. ^c Low - High
3	Support Bars Staying Open Until 2 AM	2010	-	-	-	-	-	-	-	-	-
		2012	722	46.1%	(42.5-49.7)	830	52.7%	(49.3-56.1)	1,303	84.0%	(82.0-86.0)
		2013	814	38.7%	(35.4-42.1)	807	57.1%	(53.6-60.5)	1,034	89.7%	(87.8-91.6)
		2016	-	-	-	-	-	-	-	-	-
		2018	-	-	-	-	-	-	-	-	-
4	Likely That a Drunk Adult Would be Served an Alcoholic Beverage at a Local Bar or Restaurant	2010	782	87.9%	(85.6-90.2)	961	88.4%	(86.4-90.4)	1,178	71.7%	(69.1-74.3)
		2012	589	84.2%	(81.2-87.2)	739	85.0%	(82.4-87.6)	622	16.3%	(13.4-19.2)
		2013	806	69.4%	(66.2-72.6)	808	77.4%	(74.5-80.3)	449	17.6%	(14.1-21.1)
		2016	-	-	-	-	-	-	-	-	-
		2018	-	-	-	-	-	-	-	-	-
5	Likely That a Drunk Adult Would be Sold an Alcoholic Beverage at a Local Convenience Store	2010	783	84.5%	(82.0-87.0)	933	84.0%	(81.6-86.4)	869	14.2%	(11.9-16.5)
		2012	589	84.2%	(81.4-87.0)	739	85.0%	(82.6-87.4)	1,034	89.7%	(87.8-91.6)
		2013	712	85.4%	(82.8-88.0)	729	87.5%	(85.1-89.9)	1,021	85.0%	(82.8-87.2)
		2016	-	-	-	-	-	-	-	-	-
		2018	-	-	-	-	-	-	-	-	-
6	ID Was Not Checked at Last Purchase Attempt, Among Those Who Bought or Tried to Buy Alcohol in the Past 30 Days and Did Not Believe the Person Selling Them the Alcohol Personally Knew if They Were Old Enough to Buy	2010	31	^	^	454	10.4%	(7.4-14.5)	622	16.3%	(13.0-20.3)
		2012	58	60.6%	(48.0-73.2)	361	5.8%	(2.8-8.8)	449	17.6%	(14.1-21.1)
		2013	78	45.1%	(34.1-56.1)	317	7.8%	(4.8-10.8)	451	13.4%	(10.3-16.5)
		2016	70	24.1%	(14.5-33.7)	357	12.5%	(9.3-15.7)	450	11.7%	(8.8-14.6)
		2018	24	29.2%	(10.0-48.4)	192	7.8%	(4.0-11.6)	353	15.9%	(12.1-19.7)
7		2010	-	-	-	-	-	-	-	-	-

Support for Additional Taxes on Alcohol	2012	-	-	-	-	-	-	-	-	-
	2013	-	-	-	-	-	-	-	-	-
	2016	629	46.3%	(42.4-50.2)	752	41.1%	(37.6-44.6)	975	37.7%	(34.7-40.7)
	2018	-	-	-	-	-	-	-	-	-

Indicators		19-20-year-olds			21-22-year-olds			23-25-year-olds			
		Sample Size (n) ^a	Weighted % ^b	95% C.I. ^c Low - High	Sample Size (n) ^a	Weighted % ^b	95% C.I. ^c Low - High	Sample Size (n) ^a	Weighted % ^b	95% C.I. ^c Low - High	
Attitudes and Perceptions Related to Alcohol Enforcement											
1	Support for Increased Patrolling of DUI	2010	928	68.5%	(65.5-71.5)	1,062	60.6%	(57.7-63.5)	1,117	44.6%	(41.7-47.5)
		2012	722	67.2%	(63.8-70.6)	832	63.6%	(60.4-66.8)	1,130	61.5%	(58.7-64.3)
		2013	817	65.0%	(61.8-68.3)	808	60.2%	(56.8-63.6)	1,460	52.0%	(49.4-54.6)
		2016	824	70.9%	(67.8-74.0)	865	65.1%	(61.9-68.3)	1,110	62.4%	(59.5-65.3)
		2018	610	74.8%	(71.3-78.3)	507	73.8%	(70.0-77.6)	840	73.8%	(70.8-76.8)
2	Support for Increased Sobriety Checkpoints	2010	-	-	-	-	-	-	-	-	-
		2012	711	41.3%	(37.7-44.9)	822	45.1%	(41.7-48.5)	1,117	44.6%	(41.7-47.5)
		2013	-	-	-	-	-	-	-	-	-
		2016	-	-	-	-	-	-	-	-	-
		2018	-	-	-	-	-	-	-	-	-
3	Support for Maximum Punishment for DUI Offense	2010	928	54.8%	(51.6-58.0)	1,057	48.7%	(45.7-51.7)	1,063	80.7%	(78.3-83.1)
		2012	724	43.3%	(39.7-46.9)	831	44.3%	(40.9-47.7)	1,181	73.2%	(70.6-75.7)
		2013	861	42.5%	(39.2-45.8)	797	45.0%	(41.5-48.5)	1,129	45.3%	(42.4-48.2)
		2016	818	52.7%	(49.3-56.1)	860	49.4%	(46.1-52.7)	1,107	48.9%	(46.0-51.8)
		2018	711	41.3%	(37.7-44.9)	822	45.1%	(41.7-48.5)	1,117	44.6%	(41.7-47.5)
4	Likely That Someone Would be Stopped by the Police and Arrested for Driving Under the Influence of Alcohol	2010	870	76.1%	(73.3-78.9)	983	76.9%	(74.3-79.5)	985	73.6%	(70.8-76.4)
		2012	668	75.0%	(71.7-78.3)	769	75.0%	(71.9-78.1)	1,176	58.8%	(56.0-61.6)
		2013	861	42.5%	(39.2-45.8)	797	45.0%	(41.5-48.5)	1,129	45.3%	(42.4-48.2)
		2016	765	73.3%	(70.2-76.4)	802	76.1%	(73.1-79.1)	993	79.9%	(77.4-82.4)

		2018	551	64.4%	(60.4-68.4)	449	77.1%	(73.2-81.0)	752	73.4%	(70.2-76.6)
5	Likely that Police Will Break Up Parties Where Minors Are Drinking	2010	853	71.3%	(68.3-74.3)	976	74.8%	(72.1-77.5)	1,131	56.8%	(53.9-59.7)
		2012	651	73.7%	(70.3-77.1)	749	70.9%	(67.6-74.2)	1,181	56.4%	(53.5-59.2)
		2013	806	61.9%	(58.5-65.3)	805	62.1%	(58.7-65.4)	1,181	56.4%	(53.5-59.2)
		2016	708	72.0%	(68.7-75.3)	741	70.9%	(67.6-74.2)	896	67.0%	(63.9-70.1)
		2018	531	66.5%	(62.5-70.5)	437	63.6%	(59.1-68.1)	681	62.3%	(58.7-65.9)
Indicators			19-20-year-olds			21-22-year-olds			23-25-year-olds		
			Sample Size (n) ^a	Weighted % ^b	95% C.I. ^c Low - High	Sample Size (n) ^a	Weighted % ^b	95% C.I. ^c Low - High	Sample Size (n) ^a	Weighted % ^b	95% C.I. ^c Low - High
6	Support for Alcohol Being Allowed in State Parks	2010	-	-	-	-	-	-	-	-	-
		2012	724	39.7%	(36.2-43.2)	833	51.2%	(47.8-54.6)	1,131	56.8%	(55.9-59.7)
		2013	860	39.8%	(36.5-43.1)	800	47.3%	(43.8-50.8)	1,138	56.4%	(53.5-59.3)
		2016	-	-	-	-	-	-	-	-	-
		2018	-	-	-	-	-	-	-	-	-

^a Unweighted sample size (i.e., number of survey respondents)

^b Percentage weighted by gender, age, and region

^c 95% confidence interval for the weighted percentage

Indicator Definitions

Alcohol Use

1. Percentage who reported that they have ever consumed alcohol (more than a few sips) during their lifetime.
2. Percentage who reported having at least one alcoholic beverage during the 30 days preceding the survey.
3. Percentage who reported having five or more drinks for men/four or more drinks for women within a couple of hours on one or more of the 30 days preceding the survey.
4. Among past month alcohol users, the percentage who reported having five or more drinks for men/four or more drinks for women within a couple of hours on one or more of the 30 days preceding the survey.
5. Percentage who reported binge drinking on two or more of the 30 days preceding the survey.

Alcohol-Impaired Driving

1. Percentage who reported that they drove shortly after consuming five drinks of alcohol within a couple of hours during the 30 days preceding the survey.
2. Percentage who reported that they drove a vehicle while under the influence of alcohol during the 12 months preceding the survey.

Perception of Risk Related to Binge Drinking

1. Percentage who reported that people put themselves at great risk physically or in other ways when they have five or more drinks of an alcoholic beverage once or twice a week.

Social Norms Regarding Alcohol Use

1. Percentage who reported that it is wrong or very wrong for individuals under 18 years old to have one or two drinks (2012/2013 survey only).
2. Percentage who reported that it is wrong or very wrong for individuals 18 to 20 years old to have one or two drinks.
3. Percentage who reported that it is wrong or very wrong for individuals 21 and older to have one or two drinks (2010 survey only).
4. Percentage who reported that it is wrong or very wrong for individuals under 18 years old to get drunk ("have five or more drinks in one sitting" for a third of the population in 2012) (2012/2013 survey only).
5. Percentage who reported that it is wrong or very wrong for individuals 18 to 20 years old to get drunk ("have five or more drinks in one sitting" for a third of the population in 2012).
6. Percentage who reported that it is wrong or very wrong for individuals 21 and older to get drunk ("have five or more drinks in one sitting" for a third of the population in 2012).
7. Average percentage of peers believed to have had five or more drinks of alcohol in one setting.
8. Average percentage of peers believed to have driven shortly after consuming five or more drinks of alcohol within a couple of hours.

Attitudes, Experiences and Perceptions related to Providing Alcohol to Minors

1. Percentage who reported that it is wrong or very wrong for individuals 21 and older to provide alcohol for people under 21 years old.
2. Percentage who reported that it is somewhat likely or very likely that a person under 21 would be served a drink if they asked for one at a local bar or restaurant (2012/2013 survey only).
3. Percentage who reported that it is somewhat likely or very likely that a person under 21 would be served a drink if they asked for one at a local convenience store (2012/2013 survey only).
4. Percentage who reported that police are somewhat likely or very likely to arrest an adult who is believed to have provided alcohol for persons under 21.
5. Percentage who reported that their parents or caregivers allowed them to drink alcoholic beverages in their home when they were underage.

Attitudes, Perceptions, and Experiences related to Alcohol Service and Sales

1. Percentage who agree or strongly agree that bartenders and wait staff who work in restaurants and bars should be taught how to serve alcohol responsibly (not serving minors or drunken customers).
2. In 2012, percentage who agree or strongly agree that employees who work in stores that sell alcohol should be taught how to serve alcohol responsibly (not serving minors or drunken customers). In 2013, percentage who disagree or strongly disagree that employees who work in stores that sell alcohol should NOT be taught how to serve alcohol responsibly (not serving minors or drunken customers).
3. Percentage that agree or strongly agree that bars should stay open until 2 AM (2012/2013 survey only).
4. Percentage who reported that it is somewhat likely or very likely that that a drunken adult, 21 years of age or older, would be served a drink of alcohol if they asked for one in a local bar or restaurant.
5. Percentage who reported that it is somewhat likely or very likely that that a drunken adult, 21 years of age or older, would be sold an alcoholic beverage if they tried to buy it in a local convenience store.
6. Percentage who reported that their ID was not checked the last time they bought or tried to buy alcohol during the 30 days preceding the survey, among those who did not believe that the person selling them the alcohol personally knew if they were old enough to buy.
7. Percentage that are very supportive or somewhat supportive of additional taxes on alcohol purchases.

Attitudes and Perceptions related to Alcohol Enforcement

1. Percentage that agree or strongly agree that more police officers should patrol for driving under the influence of alcohol (e.g., DUI).
2. Percentage who agree or strongly agree that more sobriety checkpoints should be implemented (2012 survey only).
3. Percentage who agree or strongly agree that someone caught driving under the influence of alcohol should be arrested and

receive the maximum sentence.

4. Percentage who reported that it is somewhat likely or very likely that someone would be stopped by the police and arrested for driving under the influence of alcohol.
5. Percentage who reported that police are somewhat likely or very likely to break up parties where persons under age 21 are drinking.
6. Percentage that agree or strongly agree that alcohol should be allowed in state parks (2012/2013 survey only).

Sampling and Methodology

This section presents a detailed account of the methods used for collecting and reporting data for the 2010, 2012, 2013, 2016, and 2018 administrations of the Nebraska Young Adult Alcohol Opinion Survey. Survey administration and data collection was conducted by the Bureau of Sociological Research (BOSR) at the University of Nebraska-Lincoln.

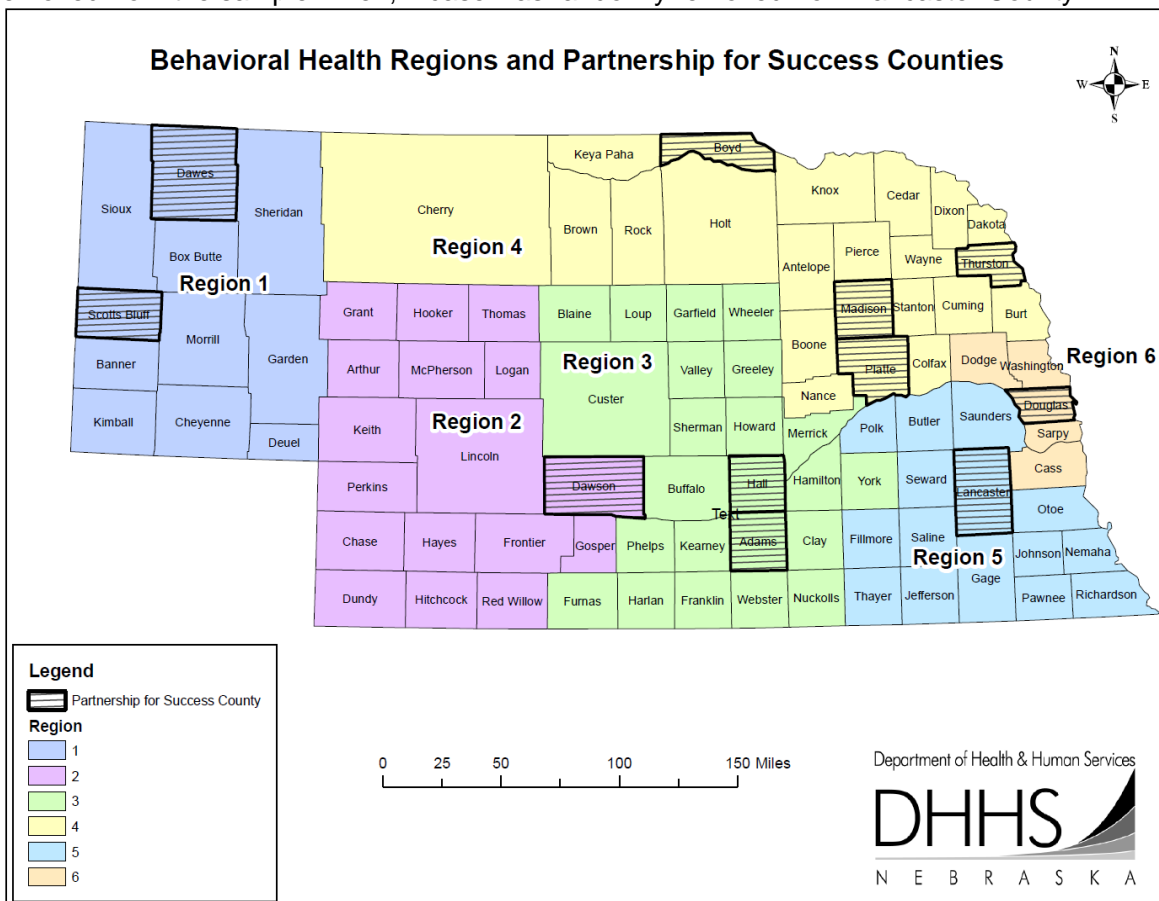
Survey Administration and Data Collection

The Sample

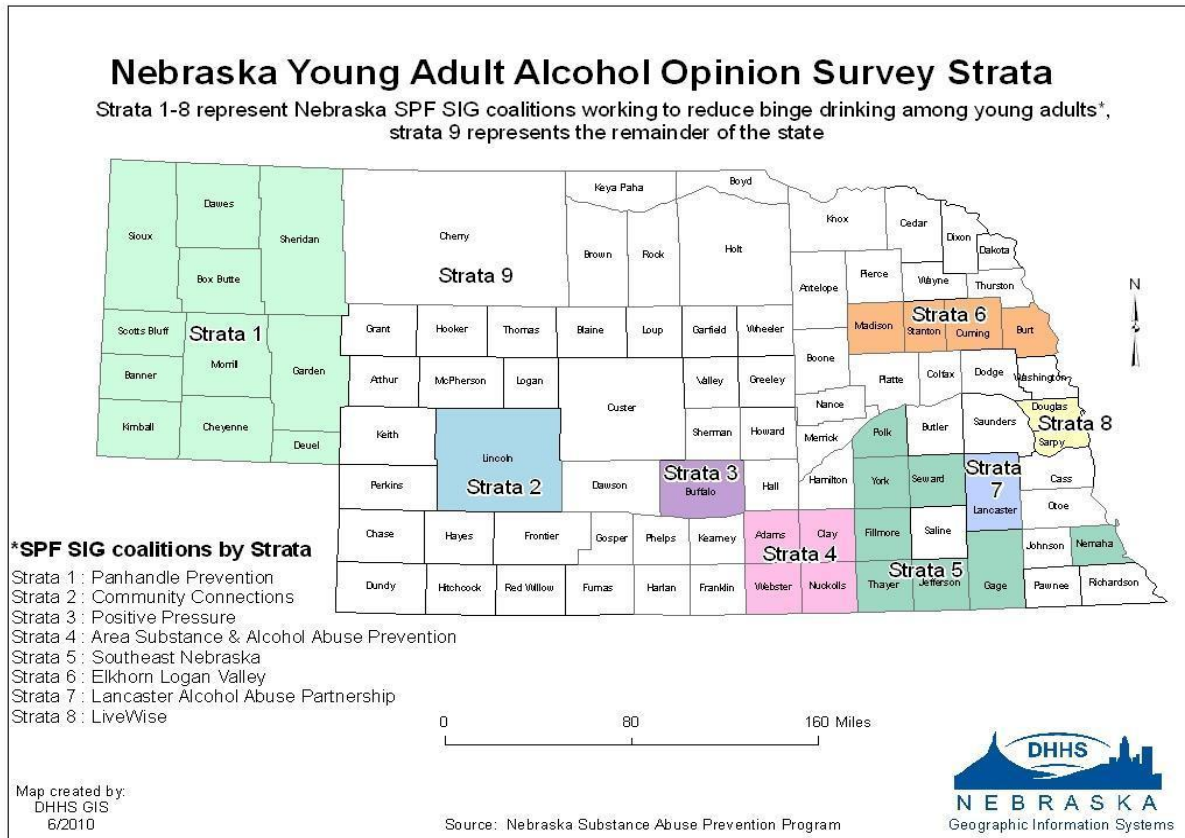
The samples for the 2010, 2012, 2013, 2016, and 2018 surveys were generated by the Nebraska Department of Motor Vehicles Driver Records Database. The sampling frame included young adults' ages 19 to 25 years with a Nebraska driver's license.

The sample was stratified in two ways. First, each of the 11 counties that are part of the Strategic Prevention Framework Partnership for Success (SPF-PFS) grant to reduce underage drinking counties was designated as its own stratum. (see shaded counties on map on next page) Then, in each Behavioral Health Region, the remaining counties for the behavioral health region made up an addition stratum. In doing so, there were 17 strata; 11 for the PFS counties and six for the remaining counties in each behavioral health region. Strata were sampled at differing rates to take into account the number of returns needed for each PFS county, and the population size of each stratum. Due to the small population a census was taken of young adults for Boyd County and Thurston County.

Before the first mailing, respondent mailing addresses were run through the National Change of Address Registry. This process revealed that 324 respondents were no longer living in Nebraska, 196 were flagged as "moved but no forwarding address on file" or "A PO Box was closed without a forwarding address", 3 with not usable addresses, so they were removed from the sample. Then, 1 case was randomly removed from Lancaster County.



For 2010, 2012 and 2013 surveys a total of 10,000 young adults were included in the sample for each year. For the 2010 survey the sample was stratified by nine Nebraska regions with approximately an equal number of respondents sampled in each region. For the 2012 survey, eight regions were sampled which consisted of the state SPF SIG coalition regions targeting the reduction of binge drinking among 18-25-year-olds, while the ninth region consisted of the remainder of the state. The following map provides a visual breakdown of the stratified regions targeted by the survey (see below). For the 2013 survey the state was stratified into the six behavioral health regions to provide regional estimates.



Demographic Characteristics of the Sample

For all four survey administrations, the demographics of the sample were very similar across the categories of age, gender, ethnicity (Hispanic), and race. There was an even distribution across each single year of age from 19-25. In all four survey administrations, females were more likely to respond to the survey than males. Less than 5% of the participants in all four years of the survey identified as Hispanic. Whites made up the vast majority of the survey sample in all four years of administration (90% or higher) (Tables 1-4).

Table 1. Age

	19	20	21	22	23	24	25
2010	415 (12.0%)	516 (14.9%)	542 (15.6%)	523 (15.1%)	479 (13.8%)	499 (14.4%)	492 (14.2%)
2012	357 (12.5%)	388 (14.4%)	420 (15.6%)	417 (15.5%)	353 (13.1%)	399 (14.8%)	382 (14.2%)
2013	453 (16.1%)	416 (14.8%)	395 (14.0%)	408 (14.5%)	414 (14.7%)	357 (12.7%)	373 (13.2%)
2016	410 (14.6%)	413 (14.7%)	406 (14.4%)	404 (14.4%)	421 (15.0%)	416 (14.8%)	342 (12.2%)
2018	329 (16.7%)	281 (14.3%)	273 (13.9%)	240 (12.2%)	244 (12.4%)	333 (16.9%)	266 (13.5%)

Table 2. Gender

	Male	Female
2010	1,478 (42.6%)	1,988 (57.4%)
2012	1,149 (42.6%)	1,547 (57.4%)
2013	1,213(43.1%)	1,603 (56.9%)
2016	1,214 (43.2%)	1,598 (56.8%)
2018	1,015 (51.6%)	952 (48.4%)

Table 3. Ethnicity (Hispanic)

	Hispanic	Non-Hispanic
2010	160 (4.6%)	3,285 (95.3%)
2012	129 (4.8%)	2,547 (95.0%)
2013	174 (4.8%)	2,550 (95.0%)
2016	275 (9.9%)	2,502 (90.1%)
2018	173 (8.9%)	1,771 (91.1%)

Table 4. Race (multiple responses allowed)

	White	Black or African American	American Indian	Native Hawaiian or Other Pacific Islander	Asian	Alaska Native	Other
2010	3,246 (94.1%)	59 (1.7%)	56 (1.6%)	9 (0.2%)	50 (1.5%)	2 (0.1%)	96 (2.7%)
2012	2,543	43	43	10	39	2	56

	(94.3%)	(1.6%)	(1.6%)	(0.4%)	(1.4%)	(0.1%)	(2.1%)
2013	2,584	57	49	16	67	2	59
	(91.2%)	(2.1%)	(1.8%)	(0.6%)	(2.5%)	(0.1%)	(2.2%)
2016	2,542	42	88	12	55	2	87
	(90.4%)	(1.5%)	(3.1%)	(0.4%)	(2.0%)	(0.1%)	(3.1%)
2018	1,723	50	31	10	118	0	62
	(87.6%)	(2.5%)	(1.6%)	(0.5%)	(6.0%)	(0.0%)	(3.1%)

The Data Collection Process

2018

Data were collected between April 27, 2018 and July 2, 2018. Respondents were mailed an initial survey packet between April 27, 2018 and May 3, 2018. Each survey packet contained a cover letter (Appendix A), a survey booklet (Appendix B), a cash incentive of \$1, and a small postage-paid business reply envelope. A reminder postcard (Appendix C) was sent to all non-responders about one week after the initial mailing (May 8, 2018). In addition to the reminder postcard, a second survey packet (same contents discussed above except the \$1 incentive) was sent to all remaining non-responders between May 22, 2018 and May 24, 2018. A total of 2,135 completed/partially completed surveys were received and processed by BOSR through July 2, 2018.

2016

Data were collected between July 11, 2016 and September 28, 2016. Respondents were mailed an initial survey packet on July 11, 2016. Each survey packet contained a cover letter (Appendix A), survey booklet (Appendix B), cash incentive of \$1, and large postage-paid business reply envelope. A reminder postcard (Appendix C) was sent to all non-responders about one week after the group's initial mailing (July 18, 2016). In addition to the reminder postcard, a second survey packet (contents discussed above omitting the \$1 incentive) was sent to all remaining non-responders on August 3, 2016. A total of 3,079 completed/partially completed surveys were received and processed by BOSR through September 28, 2016.

2010-2013

For the 2013 administration respondents were mailed an initial survey packet on May 1, 2013. This packet included a cover letter, survey, a \$1 bill incentive, and a postage paid return envelope to return the survey. In order to increase the response rate, non-responders were mailed a reminder postcard on May 10, 2013. In addition to the reminder postcard, a second paper survey and cover letter were mailed to non-responders on May 30, 2013. Data collection concluded June 30, 2013.

For the 2012 administration respondents were mailed an initial pre-notification letter on November 10, 2011. This mailing included a letter inviting the respondent to complete the survey online and a \$1 bill incentive. Respondents were then mailed a survey packet on November 18, 2011. This packet included a cover letter, survey, and a postage paid return envelope to return the survey. In order to increase the response rate, non-responders were mailed a reminder postcard on December 8, 2011. In addition to the reminder postcard, a second paper survey and cover letter were mailed to non-responders on December 23, 2011. Data collection

concluded February 20, 2012. The 2009-2010 administration followed a similar data collection with the exception that respondents were not initially invited to complete the survey online, but were invited later.

Using variations of sponsorship, scale ordering, and question wording, respondents were randomly assigned to one of three groups as part of a methodological experiment. This included one group where survey features indicate that the sponsor portrays alcohol use favorably (version 1), a more neutral group using some design elements to deter social desirability (version 2), and a third group where a respondent could infer negative connotations around alcohol use (version 3). Results from the methodological experiment are not presented in this report; however, more information about the methodological experiment can be obtained by calling David DeVries, DHHS Division of Behavioral Health at (402) 471-7793.

Response Rate

2018

A total of 1,967 eligible young adults completed the survey. 221 from the original sample, including 168 who completed the survey, were determined to be ineligible because either they were out of the age range or they resided out of state. The overall response rate for this survey, calculated using the American Association for Public Opinion **Bureau of Sociological Research 2018 Young Adult Alcohol Opinion Methodology Report 4**

Research's (AAPOR) standard definition for response rate 2 (which removes known ineligible cases from the total sample N), is 16.7%. It should be noted that due to the mode of data collection (mail), it is uncertain whether surveys had reached the entire sample. In fact, a total of 1,259 surveys (10.5%) were returned as undeliverable. The overall response rate, after adjusting for both known ineligible and undeliverable returns is 18.7%.

2016

A total of 2,812 eligible young adults completed a survey. 447 from the original sample, including 267 who completed a survey, were determined to be ineligible because either they were out of the age range or they resided out of state. The overall response rate for this survey, calculated using the American Association for Public Opinion Research's (AAPOR) standard definition for response rate 2 (which removes known ineligible cases from the total sample N), is 24.3%. It should be noted that due to the mode of data collection (mail), it is uncertain if surveys reached the entire sample. In fact, a total of 1,484 surveys (12.4%) were returned as undeliverable with no forwarding address available. The overall response rate, after adjusting for both known ineligible and undeliverable returns is 27.9%.

2010-2013

In 2013 A total of 2,816 eligible young adults completed a survey. 548 from the original sample, including 235 who completed a survey, were determined to be ineligible because either they were out of the age range or they resided out of state. The overall response rate for this survey, calculated using the American Association for Public Opinion Research's (AAPOR) standard definition for response rate 1 (which removes known ineligible cases from the total sample N), is 29.8%. It should be noted that due to the mode of data collection (mail), it is uncertain if surveys reached the entire sample. In fact, a total of 716 surveys were returned as undeliverable with no forwarding address available. The overall response rate, after adjusting for both known ineligible and undeliverable returns is 32.2%.

In 2010, a total of 3,466 eligible young adults completed the survey with the majority (95.9%) completing the survey via mail. In 2012, a total of 2,725 eligible young adults completed the survey with a smaller majority (63.7%) completing the survey via mail. From the original sample in 2012, a total of 515, including 246 who completed the survey, were determined to be ineligible either because they were out of the age range or they now resided out of state. A similar number of surveys were determined to be ineligible in 2010. The overall response rate for the survey, calculated using the American Association for Public Opinion Research's (AAPOR) standard definition for response rate 1 (which removes known ineligible cases from the total sample N)⁸, was 36.6% in 2010 and 28.7% in 2012. It

should be noted that due to the primary mode of data collection (mail), it is uncertain if surveys reached the entire sample. In fact, a total of 1,313 surveys in 2010 and 1,270 in 2012 were returned as undeliverable with no forwarding address available. The response rate, after removing both known ineligible and undeliverable returns, was 42.5% in 2010 and 36.9% in 2012.

Data Cleaning

2018

The data are recorded and stored on a secure server located within the Sociology Department at UNL. The Statistical Package for the Social Sciences (SPSS) software package was used to process and document the dataset. The first step in data cleaning was to run frequency distributions on each of the variables in the survey. The second step was to generate variable and value labels. The third step in data cleaning was to check for out-of-range values on all survey items.

In order to have complete demographic data for the weighting process, age and gender values from the DMV sample file were used in the cases where the respondent left the field blank and where respondents had chosen "Other" for the gender question as no population data is available for that category. A total of 10 responses for age were used from the sample and 24 responses for gender.

It should be noted that due to the nature of mail surveys, respondents do not always follow the instructions for skip patterns within the survey. Inconsistencies, which are common in mail surveys, will still exist in the data due to item non-response.

Since the data collected contains information specific to the topic, additional decisions related to cleaning and recoding of the data will be left to the client to ensure final data quality.

2016

The data are recorded and stored on a secure server located within the Sociology Department at UNL. The Statistical Package for the Social Sciences (SPSS) software package was used to process and document the dataset.

The first step in data cleaning was to run frequency distributions on each of the variables in the survey. The second step was to generate variable and value labels. The third step in data cleaning was to check for out-of-range values on all survey items.

In order to have complete demographic data for the weighting process, age and gender values from the DMV sample file were used in the cases where the respondent left the field blank and where respondents had chosen "Other" for the gender question as no population data is available for that category. A total of 18 responses for age were used from the sample and 33 responses for gender.

It should be noted that due to the nature of mail surveys, respondents do not always follow the instructions for skip patterns within the survey. Inconsistencies, which are common in mail surveys, will still exist in the data due to item non-response.

Since the data collected contains information specific to the topic, additional decisions related to cleaning and recoding of the data will be left to the client to ensure final data quality.

2010-2013

Recoding was done to correct the most obvious errors/inconsistencies in the data (i.e., respondent answered a question they should not have answered due to incorrectly following skip instructions). Furthermore, in order to have complete demographic data for the weighting process, age, gender and zip code values from the DMV sample file were used in the cases where the respondent left the field blank. In 2013 A total of 18 responses for gender were used from the sample and 12 responses for age. A total of 154 responses for zip codes were imported because the respondent left the zip code field blank.

Due to the mobile nature of a young adult population and the fact the DMV provided address was not always the address of respondent residence (but rather often the residence of a parent or other permanent address) the region variable was recalculated to reflect the zip code the respondent provided on the questionnaire. 18.3% (n=516) of respondents were assigned regions different from the original region in the DMV sample.

In 2012 a total of 28 responses for gender were used from the sample and 39 responses for age across both administrations of the survey. A total of 203 sample zip codes were imported because the respondent left the zip code field blank across both administrations of the survey.

Due to the mobile nature of young adults and the fact that the DMV provided an address that was not always the address of respondent residence (but rather often the residence of a parent or other permanent address), the region variable was recalculated to reflect the zip code the respondent provided on the questionnaire (i.e., where they live most of the year). A total of 21.3% (n=737) of respondents in 2010 and 22.4% (n=608) in 2012 were assigned regions different from the original region in the DMV sample.

Inconsistencies in survey response (i.e., failure to follow skip instructions and providing inconsistent answers across different survey questions) are common in mail surveys. To avoid eliminating survey respondents completely as well as survey item responses from the analysis for this report, inconsistencies in survey responses were left in the database. Two examples of these inconsistencies included (but were not limited to): (1) an individual reporting that they did not drink 4 or more drinks within a couple of hours in the past month but also reporting driving after binge drinking in the past month and (2) an individual reporting that they drove after binge drinking during the past month but also reporting that they did not drive under the influence of alcohol during the past year. Inconsistent responses were ignored in instances where the analysis did not cross-tabulate or combine variables that were known to be inconsistent with one another. In instances where two or more variables known to be inconsistent with one another were cross-tabulated or combined, the response to the first question in the sequence trumped all subsequent responses that were known to be inconsistent. Note that inconsistent responding was rare (involving less than 2% of all respondents) and that such responses had a minimal effect on the overall results.

Data Weights

2018

In order to account for the sample design and make the data statistically representative of the state-wide population, weights were created for the data. First, data were weighted to account for the sample design through probability of selection weighting. Next, nonresponse weights were calculated by Nebraska Behavioral Health Region. The data was then weighted by gender, age, and Nebraska Behavioral Health Region using data from the 2010 US Census population as this is the only population data available that provides estimates by age rather than by larger age groups including more than this survey's target population.

Since a disproportionate regionally stratified sample was used, larger weights were expected and applied for region. As is common in many surveys, response among females was higher, resulting in lower weights for female respondents. Minimal weighting was required to account for age, as respondents were similar to the Census population with regard to age.

2016

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2010-2013

In order to make the data statistically representative of the statewide population, weights were created for the data. The data was weighted by gender, age, and region to the 2010 US Census population. Since a disproportionate regionally-stratified sample was used, larger weights were expected and applied for region. As is common in many surveys, response among females was higher, resulting in lower weights for female respondents. Minimal weighting was required to account for age, as respondents were similar to the Census population with regard to age.

Non-response and Coverage Concerns

2018

Nonresponse bias is a concern for all surveys. Since nonresponse bias is calculated on responses to specific variables of concern by comparing nonrespondents' responses to respondents' responses, it is difficult to calculate in most cases. However, other surveys with young adults have found similar levels of binge drinking, which indicates that nonresponse bias may be limited in this data.

Since the DMV data set included some information about respondents in the sample, limited analysis comparing responders to non-responders is possible.

The majority of those that completed the survey were 21 years of age or older (70.8%). Similarly, 71.4% of non-responders were age 21 or older. Female respondents comprised 59.6% of those that completed the study and 46.0% of non-responders, respectively. Data was weighted to 2010 Census data to adjust for both age and gender.

In addition to nonresponse concerns, coverage error should also be considered. It is not known how many young adults do not have driver's licenses in the state of Nebraska (and therefore would have been excluded from the sampling frame), but according to the DMV, it is believed to be a very small proportion of the 19 to 25 year old population in this state.

Overall, the Nebraska DMV sample appeared to be an effective way to reach this traditionally hard-to-reach population. A total of 1,259 surveys (10.5% of the total sample) were returned undeliverable without a forwarding address by the US Postal Service. There was anticipated concern that addresses would be less reliable for ages not commonly associated with license renewal (all ages other than 21); however, response rates were steady across all ages suggesting that this was not an issue.

2016

Nonresponse bias is a concern for all surveys. Since nonresponse bias is calculated on responses to specific variables of concern by comparing non-respondents' responses to respondents' responses, it is difficult to calculate in most cases. However, other surveys with young adults have found similar levels of binge drinking, which indicates that nonresponse bias may be limited in this data.

Since the DMV data set included some information about respondents in the sample, limited analysis comparing responders to non-responders is possible.

The majority of those that completed the survey were 21 years of age or older (73.8%). Similarly, 72.0% of non-responders were age 21 or older. Female respondents comprised 56.5% of those that completed the study and 44.7% of non-responders, respectively. Data was weighted to 2010 Census data to adjust for both age and gender.

In addition to nonresponse concerns, coverage error should also be considered. It is not known how many young adults do not have driver's licenses in the state of Nebraska (and therefore would have been excluded from the sampling frame), but according to the DMV, it is believed to be a very small proportion of the 19 to 25 year old population in this state.

Overall, the Nebraska DMV sample appeared to be an effective way to reach this traditionally hard-to-reach population. A total of 1,132 surveys (9.4% of the total sample) were returned undeliverable without a forwarding address by the US Postal Service. There was anticipated concern that addresses would be less reliable for ages not commonly associated with license renewal (all ages other than 21); however, response rates were steady across all ages suggesting that this was not an issue.

2010-2013

The majority of those that completed the survey were 21 years of age or older (73.2% in 2010, 73.0% in 2012 and 70.9% in 2013). Similarly, 70.2% of non-respondents were age 21 or older in 2010, 74.0% in 2012 and 73.5% in 2013. Female respondents comprised 57.3% of those that completed the study in both 2010 and 2012 and 57.4% in 2013. 44.9% of non-respondents in 2010, 46.0% of non-respondents in 2012 and 44.5% of non-respondents in 2013. While no weights were applied to adjust for the differences in DUI rates, the 2010 NYAAOS data were weighted to 2000 Census data and 2012 NYAAOS data were weighted to 2010 Census data to adjust for both age and gender.

In addition to non-response concerns, coverage error should also be considered. It is not known how many young adults do not have driver's licenses in the State of Nebraska (and therefore would have been excluded from the sampling frame), but, according to the Nebraska DMV, it is believed to be a very small proportion of the 19 to 25 year old population in this state.

The Nebraska DMV sample appeared to be an effective way to reach this traditionally hard-to-reach population. A total of 1,313 surveys in 2010 (13.1% of the total sample), 1,270 in 2012 (12.7% of the total sample) and 716 surveys in 2013 (7.2% of the total sample) were returned undeliverable without a forwarding address. In addition to these known address differences from the DMV list, an unknown number of surveys were forwarded to respondents' new/temporary addresses by parents, old roommates, etc. There was anticipated concern that addresses would be less reliable for ages not commonly associated with license renewal (all ages other than 21); however, response rates were fairly even across all ages suggesting that this was not an issue.

Data Analysis and Reporting

Statistical Analysis Software

Analyses of 2018 survey data were conducted using SPSS, Version 23.0. Analyses of 2016 data were done using SPSS. Analyses of 2013 survey data were conducted using SPSS, Version 18.0. Analyses of 2010 and 2012 data presented in this report were conducted using SPSS, Version 17.0. In 2010, in order to obtain reliable estimates of 95% confidence intervals for weighted percentages in the summary tables, SAS-callable SUDAAN, Version 10.0.1, was used. For 2012 and 2013 survey analysis, the standard error of the unweighted data was applied to the weighted data to calculate 95% confidence intervals. This method, while unconventional, was tested on the 2010 data and yielded 95% confidence intervals that were remarkably close to those calculated using SAS-callable SUDAAN Version 10.0.1 (within a half to one percent different).

A Note on Statistical Significance (p values)

Data that are statistically significant are indicated with the notation "p<.05". Unless it is noted, one may assume that the data discussed in the narrative portion of the report are not statistically significant.

Data Indicators

For this report, 34 data indicators were developed from either single survey questions or the combination of two or more survey questions. These data indicators cover a variety of survey constructs, including alcohol use, alcohol-impaired driving, and perceptions and attitudes related to alcohol. See the above Summary Table of this report for a list of the 34 indicators, corresponding data, and their definitions.

A Note on confidence intervals

For the 2018 report due to the more complex sampling and weighting the a different formula was used for calculating the confidence intervals for proportions in order more accurately account for n-size:

```
CONCATENATE("(" ,TEXT(100*(percent-TINV(0.05,N)*SQRT(percent*(1-percent)/N)), "0.0"), "-  
",TEXT(100*(percent+TINV(0.05,N)*SQRT(percent*(1-percent)/N)), "0.0"), ")")
```

Where **percent** is the weighted proportion and where **N** is the weighted sample size

For questions involving percentages the following formula was used:

```
CONCATENATE("(",TEXT(100*(percent-TINV(0.05,N)*(StDev/100)/SQRT(N)), "0.0"), "-  
",TEXT(100*(percent+TINV(0.05,N)*(StDev/100)/SQRT(N)), "0.0"),")")
```

Where **percent** is the *Weighted Mean/100* for the variable and where **N** is the weighted sample size and where **StDev** is the *weighted standard deviation of the mean*.

Demographic Comparisons

There was enough variability in respondent gender, age, urbanicity, and college enrollment status to make comparisons among respective groups. The vast majority of respondents, however, were non-Hispanic White and thus comparisons are not made among racial groups. In the 2018 survey there was enough response from Hispanics to make Hispanic and Non-Hispanic comparisons.

Student Status Analysis

Although the student enrollment status information was not collected in 2018, this report distinguishes between full-time student and non-full-time students in order to provide an overview of the role of student status in young adult alcohol use, attitudes, and perceptions. Full-time students include respondents reporting that they are currently in school full-time at a 2/4 year college or university. Non-full-time students include respondents reporting that they are in school part-time as well as those who did not indicate that they are in school full-time or part-time. For this report, analysis and reporting of student status was restricted to 19-22-year-olds, or the ages most commonly enrolled in four-year undergraduate as well as two-year degree and technical training programs. Within this survey, stark differences in alcohol use were found by age for those just under the legal drinking age (19-20-year-olds) and those at or above the legal drinking age (21 and older). As a result, to minimize the impact of age on survey findings by student status, results for student status were presented separately for 19-20-year-olds and 21-22-year-olds. Within the 23-25 year old age category, a much smaller number of respondents reported full-time student status and among the non-full-time students within this age group, the level of education varied from less than high school to professional degree, which confounded the comparison between full-time and non-full-time students within this age group.

Urbanicity Analysis

Rural-Urban Commuting Area Codes (RUCAs) are a census tract-based classification scheme that utilizes population and work commuting information from the U.S. Census Bureau to characterize all of the nation's census tracts regarding their rural and urban status and relationships.⁹ Because zip code is often the smallest geographic identifier available in health data sets, a zip code approximation was developed for RUCA. More information on RUCAs can be found at the following website: <http://depts.washington.edu/uwruca/>. For this report, RUCA version 2.0, categorization B, was applied to the data presented within this report to create three urban/rural categories based on the zip code where respondents reported living for most of the year. The three urban/rural categories include:

- *Urban* – includes a primary commute flow within an urbanized area of 50,000 people or more and a secondary commute flow of 30 to 49 percent to an urbanized area.
- *Large Rural* – includes a primary commute flow within a large urban cluster of 10,000 to 49,999 people and a secondary commute flow of 10 to 29 percent to an urbanized area.
- *Small Rural* – includes a primary commute flow within a small urban cluster of 2,500 to 9,999 people and a secondary commute flow of 10 to 29 percent to an urbanized area or 10 to 49 percent to a large urban cluster. In addition, small rural also includes a primary commute flow outside an urbanized area or urban cluster (i.e., less than 2,500 people) and rural areas with a secondary commute flow of 10 to 29 percent to an urbanized area or flow of 10 to 49 percent to either large urban clusters or small urban clusters.

Conclusions

The findings in this report further strengthen the notion that alcohol misuse continues to be a widespread public health problem in Nebraska. Alcohol use among young adults in Nebraska is common, with estimates for past month alcohol use and past month binge drinking greater than or equal to estimates from other state surveys.

The first three years of NYAAOS administration (2010, 2012, 2013) the past month binge drinking rate has been at or around 45% for young adults ages 19 to 25. For the 2018 administration there was a significant drop to 33% of young adults ages 19 to 25 reporting past month binge drinking.

Among just those who used alcohol in the past month the binge drinking rate has been around 65% or higher in the first three administrations, indicating that the majority of young adult alcohol users are not being fully responsible. There is a significant improvement since the 2016 administration where approximately 56% reported past month binge drinking among those who had reported they had used alcohol in the past month and in 2018, this rate further declined to 52%.

Another positive note is the reduction in alcohol-impaired driving. Past year driving under the influence has declined in each year of the survey from 30.3% in 2010 down to 17.2% in 2016, and increased a little to 19.8% (2018). Nevertheless, the fact that nearly one-fifth of young adults ages 19 to 25 drove under the influence of alcohol in the past year is very concerning. In addition, a continued decreasing trend is found for past month driving after binge drinking, in 2018 the rate went down from 4.3% in 2016 to 4.0%.

While the data suggest that there is a need to improve behaviors related to alcohol, the majority of young adults appear to be supportive of responsible alcohol service and alcohol enforcement, unsupportive of adults 21 and older providing alcohol to non-legal age drinking persons, and perceive underage drinking as far less acceptable than legal age drinking.

The information in this report can be used to help inform policy makers, state and local alcohol prevention practitioners, colleges and universities, law enforcement, parents, and the general public about alcohol use, alcohol-impaired driving, and attitudes and perceptions related to alcohol among young adults in Nebraska. Because much of the information presented in this report has not previously been available in Nebraska, it provides an opportunity to further refine and target programs and policies to address the needs of young adults.

A variety of evidence-based prevention strategies exist to address alcohol use among young adults. The following is a list of some of the resources containing information related to evidence-based programs, policies, and practices for addressing underage drinking, binge drinking and alcohol-impaired driving:

- Higher Education Center, U.S. Department of Education
<http://www.higheredcenter.org/>
- National Highway Traffic Safety Administration
<http://www.stopimpaireddriving.org/>
- National Institute for Alcohol Abuse and Alcoholism (NIAAA)
<http://www.niaaa.nih.gov/>
- National Registry of Evidence Based Programs and Practices
<http://www.nrepp.samhsa.gov/>
- Reducing Underage Drinking: A Collective Responsibility, Institute of Medicine
<http://www.iom.edu/Reports/2003/Reducing-Underage-Drinking-A-Collective-Responsibility.aspx>
- The Guide to Community and Preventive Services
<http://www.thecommunityguide.org/index.html>

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Nebraska Young Adult Alcohol Opinion Survey Summary Report

Report Released: April 2019

This report contains a summary of the findings from the 2010 - 2018 Nebraska Young Adult Alcohol Opinion Survey.

An electronic version of this report along with supplemental data tables, a copy of the survey questionnaire, and additional information about the Division of Behavioral Health Prevention System are located on the following website:

http://dhhs.ne.gov/behavioral_health/Pages/sua_suaindex.aspx

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