

ALCOHOL

In early 2021, the Colorado State Epidemiological Outcomes Workgroup (SEOW) published this five-part document as an overview of opioid, marijuana, alcohol, and tobacco use and related harms in Colorado. Each substance is presented in its own profile, with a demographics profile provided for additional state context. The profiles were designed to be readily usable to all people working in fields related to substance use. They include many data sources and aim to present the most current and actionable findings.

This profile is a snapshot of alcohol consumption and health effects among Coloradans. Data are presented for adults and youth, with a special section on youth protective factors against alcohol use.

Certain considerations were taken into account in compiling these data, including time frame and the intended audience. First, the profiles contain all publicly available data. This ensures that anyone can access the original source for more information on any data point in the profile. It was also important to use a timespan in which the most complete data could be found within and across substances. Lag-time for data to become publicly available can vary widely. While the profiles were in development during the summer and fall of 2020, the most complete data were found and used for calendar year 2019. Exceptions include figures/charts featuring trend data prior to 2019, data collected biennially for which 2018 was the most recent year, and aggregate data when no single year yields a large enough sample size to make definitive statements. All Healthy Kids Colorado Survey (HKCS) data presented are for high school students, grades 9th - 12th. Each page includes data sources and years. For

more detailed information on references, please see our [references page](#).

The SEOW compiled the profiles with deliberate attention to our intended audience. They were designed to be practical and useful for all Coloradans who are interested in talking to others in their communities about substance use and related harms. This includes anyone from youth groups and community organizations to school superintendents and state legislators. The five profiles can be used as stand-alone products or in conjunction with each other, as hard copy hand-outs or as a part of presentations.

WE STRONGLY RECOMMEND REVIEWING AND USING THE **DEMOGRAPHICS PROFILE** TO PROVIDE IMPORTANT CONTEXT TO DATA PRESENTED IN THE SUBSTANCE PROFILES.

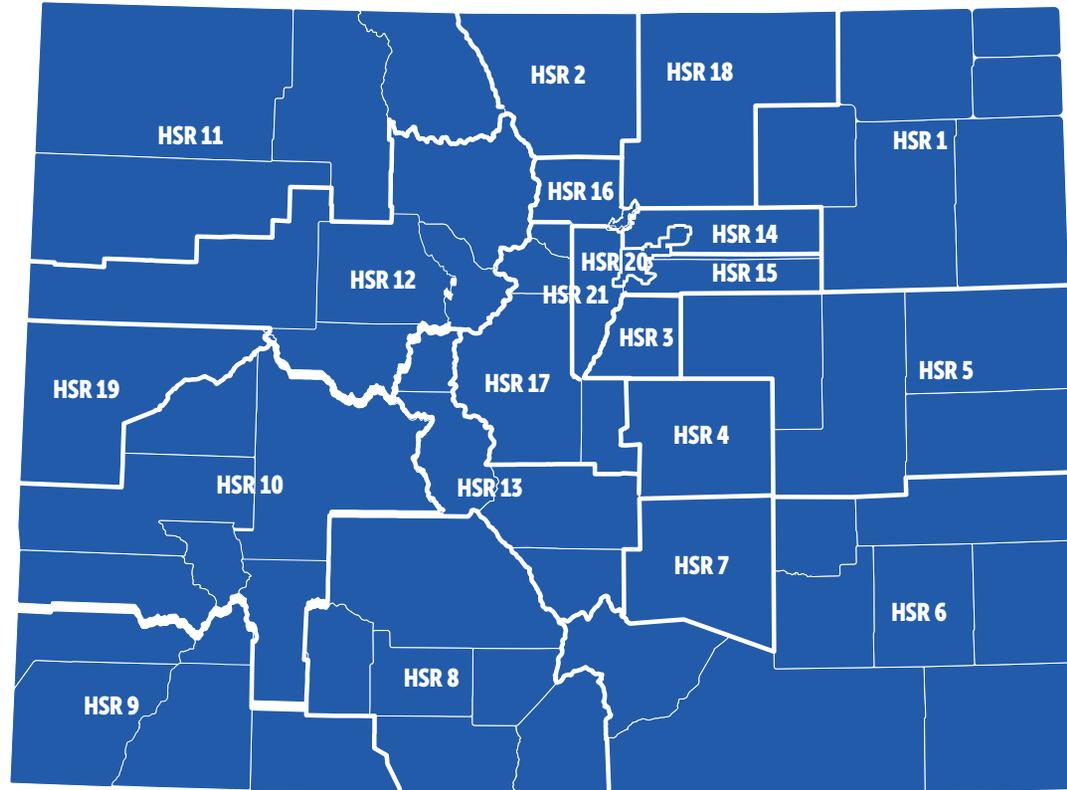
We hope the profiles facilitate conversation among Coloradans about the state of our state. For this reason, the profiles feature data from a variety of sources, include regional data when available, and introduce easily relatable use of benchmarks, such as national comparisons.

The SEOW partnered with The Evaluation Center – University of Colorado Denver on the development of the profiles, including the interpretation and visualization of data.

For more information, contact SEOW representative Sharon Liu (sharon.liu1@state.co.us) at the Colorado Department of Human Services, Office of Behavioral Health.

Colorado is divided into 21 Health Statistics Regions (HSR)

The boundaries of these regions were developed by the Colorado Department of Public Health and Environment and local public health professionals and agencies based on demographic and statistical criteria. Data within Colorado are frequently collected and presented at the HSR level.



HSR Key

HSR 1: Logan, Morgan, Phillips, Sedgwick, Washington, Yuma

HSR 2: Larimer

HSR 3: Douglas

HSR 4: El Paso

HSR 5: Cheyenne, Elbert, Kit Carson, Lincoln

HSR 6: Baca, Bent, Crowley, Huerfano, Kiowa, Las Animas, Otero, Prowers

HSR 7: Pueblo

HSR 8: Alamosa, Conejos, Costilla, Mineral, Rio Grande, Saguache

HSR 9: Archuleta, Dolores, La Plata, Montezuma, San Juan

HSR 10: Delta, Gunnison, Hinsdale, Montrose, Ouray, San Miguel

HSR 11: Jackson, Moffat, Rio Blanco, Routt

HSR 12: Eagle, Garfield, Grand, Pitkin, Summit

HSR 13: Chaffee, Custer, Fremont, Lake

HSR 14: Adams

HSR 15: Arapahoe

HSR 16: Boulder, Broomfield

HSR 17: Clear Creek, Gilpin, Park, Teller

HSR 18: Weld

HSR 19: Mesa

HSR 20: Denver

HSR 21: Jefferson

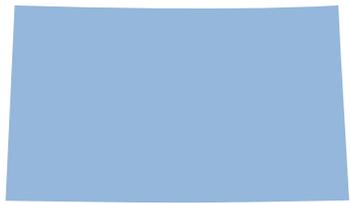
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ADULT CONSUMPTION

Colorado per capita alcohol consumption is higher than the National average.



629

standard drinks per person/per year

Colorado



517

standard drinks per person/per year

United States

Representative of the population over the age of 14.

WHAT IS A STANDARD DRINK?



12 fl oz

REGULAR BEER

@ approx. 4.7% alcohol



5 fl oz

TABLE WINE

@ approx. 11.5% alcohol



1.5 fl oz

DISTILLED SPIRITS

@ approx. 36.9% alcohol

Each beverage portrayed above represents one standard drink of "pure" alcohol, defined in the United States as 0.6 fl oz or 14 grams of alcohol. The percent of pure alcohol, expressed here as alcohol by volume (alc/vol), varies within and across beverage types. Although the standard drink amounts are helpful for following health guidelines, they may not reflect customary serving sizes.

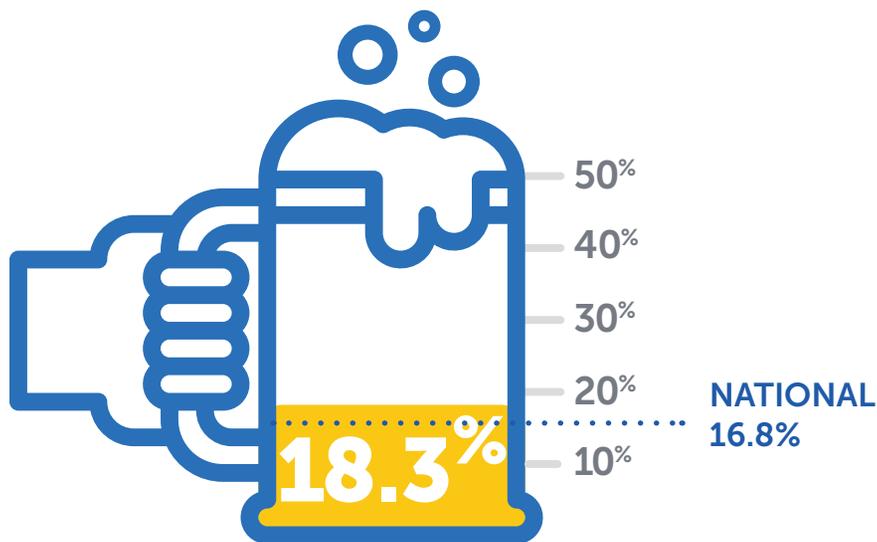
38% of COLORADO ADULTS report NOT DRINKING in the past 30 days.

47% of ADULTS NATIONALLY report NOT DRINKING in the past 30 days.

18.3% of Colorado adults report

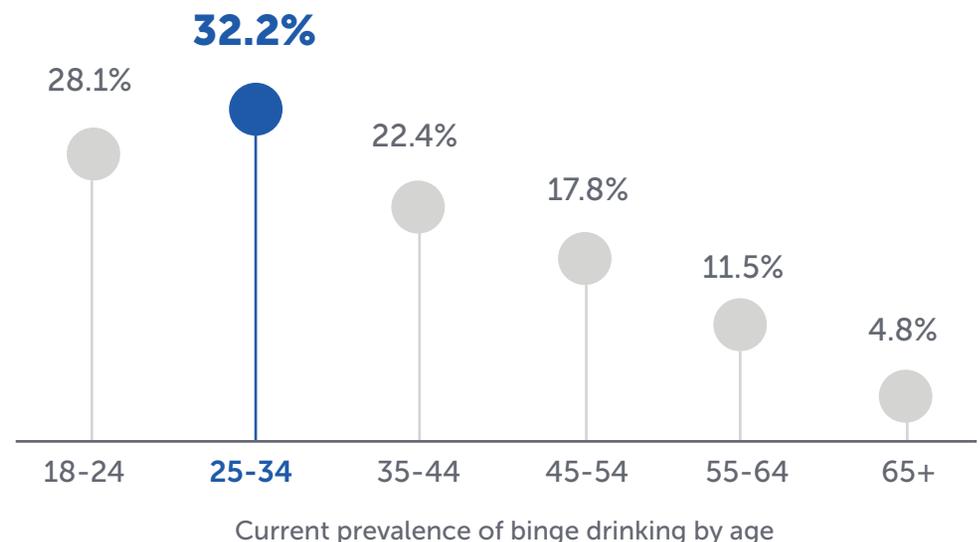
BINGE DRINKING

during the past 30 days.



Binge drinking is most common among 25-34 year olds.

Almost one third of Coloradans in this age group report binge drinking in the past 30 days. A trend consistent with past years.



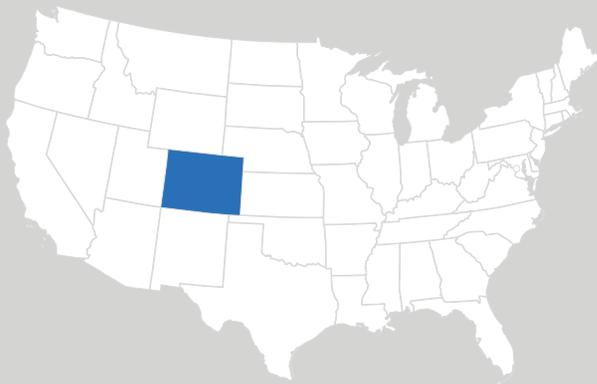
In Colorado, **MEN ARE MORE LIKELY TO BINGE DRINK** than women.

25% of **men**

14% of **women**

BINGE DRINKING IS DEFINED AS HAVING 4 OR MORE DRINKS IN A ROW FOR WOMEN AND 5 OR MORE DRINKS IN A ROW FOR MEN.

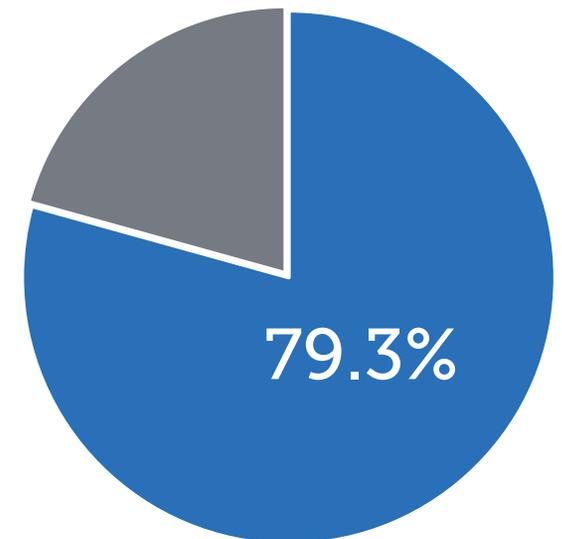
Colorado has the
8TH
HIGHEST RATE



of
EXCESSIVE DRINKING.

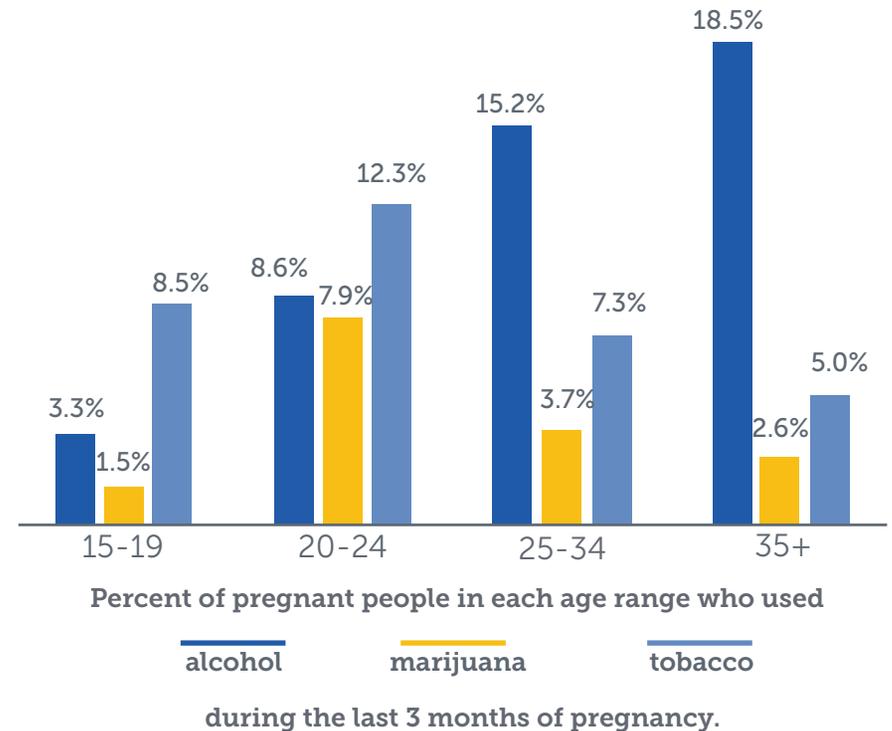
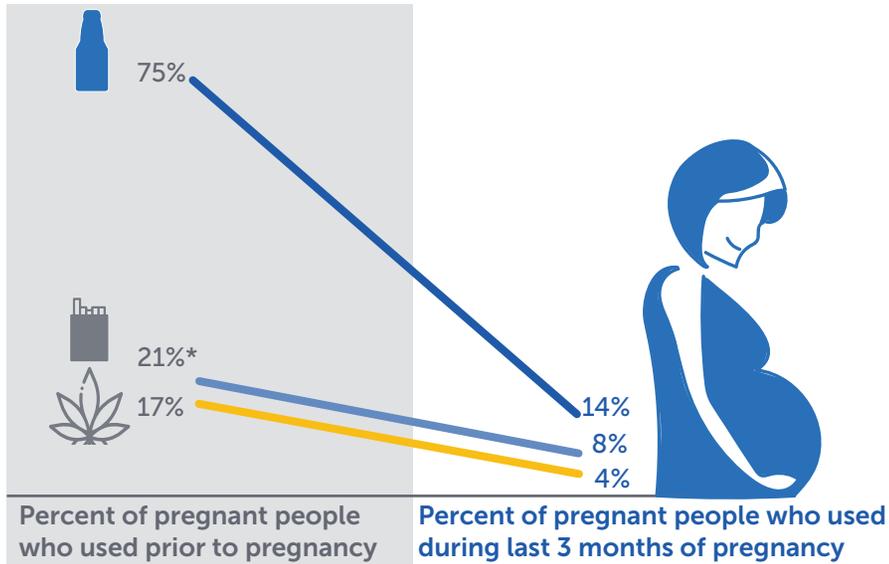
Excessive drinking includes either **HEAVY DRINKING** (eight or more drinks per week for women or 15 or more drinks per week for men), or **BINGE DRINKING** (four or more drinks for women or five or more drinks for men, on one or more occasions in the past 30 days).

INDIVIDUALS WHO BINGE DRINK
ARE MORE LIKELY TO DRINK AND DRIVE
THAN THOSE WHO DON'T BINGE DRINK.

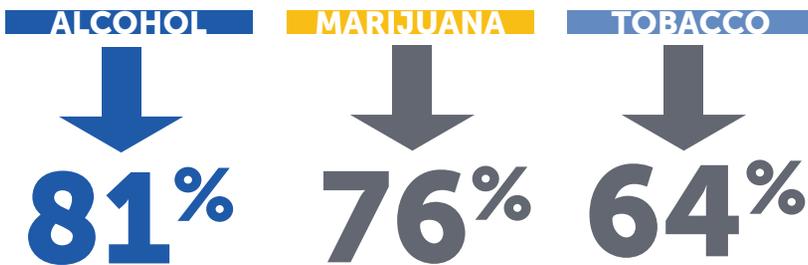


In Colorado, of the people who reported drinking and driving, **79.3%** of them **ALSO REPORTED BINGE DRINKING.**

Most pregnant people in Colorado did not use any substance during the last 3 months of pregnancy.



Alcohol use decreased the most from prior to pregnancy to during the last 3 months of pregnancy.



According to the Health eMoms survey, PEOPLE WHO ARE 12-14 MONTHS POSTPARTUM **BINGE DRINK** AT A HIGHER RATE THAN THE AVERAGE RATE FOR ALL WOMEN OF CHILDBEARING AGE.

*TOBACCO USE INCLUDES CIGARETTES OR E-CIGARETTES.

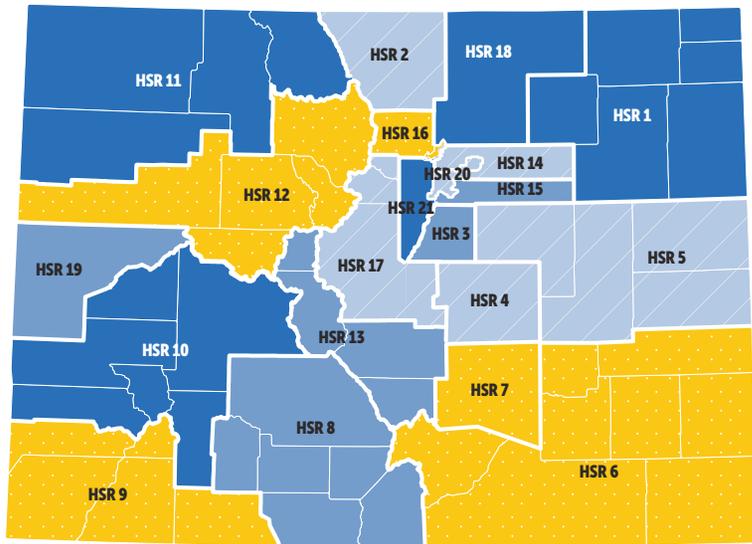


YOUTH CONSUMPTION

TWO OUT OF THREE high school age youth in Colorado DID NOT consume alcohol in the past 30 days.

30%

OF YOUTH CURRENTLY USE ALCOHOL.



QUARTILE 1:	QUARTILE 2:	QUARTILE 3:	QUARTILE 4:
24.8%–27.9%	28.0%–29.9%	30.0%–33.3%	33.4%–36.6%

Current use of alcohol among youth in each Colorado HSR

CURRENT USE IS DEFINED AS HAVING AT LEAST 1 DRINK OF ALCOHOL IN THE PAST 30 DAYS.

Of youth who report having at least 1 drink of alcohol in the past 30 days, over half of them,

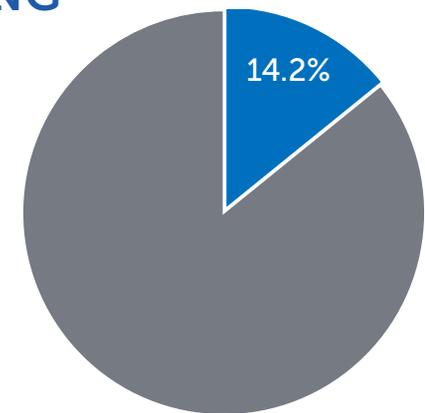
62.4%

report having

3 OR MORE DRINKS WITHIN A FEW HOURS.

14.2% of youth report BINGE DRINKING

in the past 30 days.



BINGE DRINKING IS DEFINED AS HAVING 4 OR MORE DRINKS IN A ROW FOR WOMEN AND 5 OR MORE DRINKS IN A ROW FOR MEN.

Early initiation

USE BEFORE 13:

17.6%

of Colorado students had their first drink of alcohol before age 13.

According to the National Institute on Drug Abuse, research suggests that adolescence (at about age 13) is a risky period for drug abuse due to the challenges youth face at this age, coupled with the greater exposure to drugs.

Access

EASY TO GET ALCOHOL:

59%

of Colorado students report that it would be "sort of easy" or "very easy" to get alcohol if they wanted.



SOMEONE GAVE IT TO ME:

40%

students who drink alcohol report they drank alcohol from someone who gave it to them in the last 30 days.

Perception of peer use

INACCURATE PERCEPTIONS:

85%

of Colorado students overestimate how many of their peers drink.

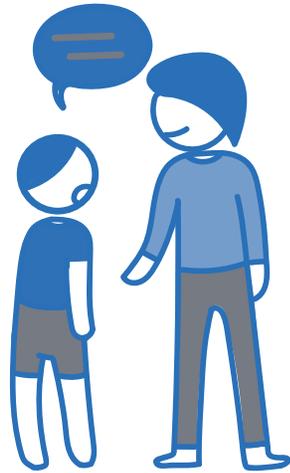
Students who overestimate how many of their peers drink are significantly less likely to consider limited drinking risky and more likely to drink themselves.



*I bought it in a liquor store/supermarket, restaurant/bar/club, or at a concert/sporting event.

82%

OF COLORADO STUDENTS
**THINK THEIR PARENT
OR GUARDIAN WOULD
FEEL IT IS WRONG**
IF THEY DRANK ALCOHOL REGULARLY.



70%

OF COLORADO STUDENTS
**THINK PEOPLE WHO
HAVE ONE OR TWO
DRINKS NEARLY
EVERY DAY**
HAVE MODERATE OR GREAT
RISK OF HARM.

62%

OF COLORADO STUDENTS
**THINK IT IS WRONG
FOR SOMEONE THEIR
AGE TO DRINK**
ALCOHOL REGULARLY.

USE OF ALCOHOL DIFFERS AMONG COLORADO YOUTH WHO REPORT THE PRESENCE OF PROTECTIVE FACTORS IN THEIR LIFE.

AMONG STUDENTS WHO:

have an adult to go to for help with a serious problem,



COMPARED TO



who do not report this protective factor.



think family has clear rules about alcohol and drug use,



COMPARED TO



who do not report this protective factor.



when not home, their parents/guardians know where they are and who they are with



COMPARED TO



who do not report this protective factor.



participate in extracurricular activities,



COMPARED TO



who do not report this protective factor.

feel safe at school,



COMPARED TO



who do not report this protective factor.

think their teacher notices when they're doing a good job and lets them know,



COMPARED TO



who do not report this protective factor.

HARMFUL EFFECTS



6% of Colorado adults report they DROVE AFTER HAVING TOO MUCH TO DRINK

one or more times in the past 30 days.



In 2019 there were

596

MOTOR VEHICLE FATALITIES

in Colorado. Out of this total,

27%

WERE CAUSED BY ALCOHOL IMPAIRED DRIVERS.



COLORADO 2018:

3,744

SERIOUS INJURIES AND FATALITIES CAUSED BY MOTOR VEHICLE CRASHES.

21.4%

WERE CAUSED BY DRIVERS UNDER THE INFLUENCE OF ALCOHOL AND/OR OTHER DRUGS.

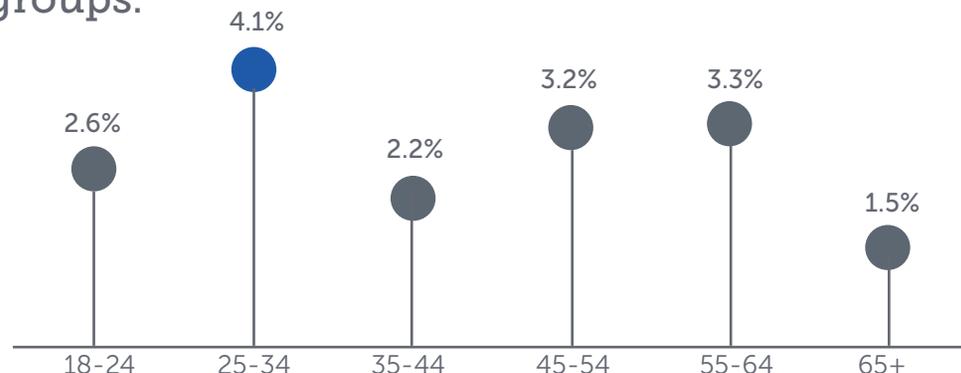
In 2018 there were 15,152 people charged with DUI where the driver was tested for alcohol.

Out of those, **95.6% tested positive for alcohol only or alcohol and other substances.**

In 2019 there were 196,898 adult ARRESTS in Colorado.

Out of those, **10.6% were for driving under the influence.**

25-34 YEAR OLDS HAVE THE HIGHEST PREVALENCE of drinking and driving in Colorado compared to all other age groups.



Prevalence of drinking and driving reported within the past 30 days in each age group

COLORADO 2019:

21,328

TOTAL JUVENILE ARRESTS



210 JUVENILE ARRESTS FOR DRIVING UNDER THE INFLUENCE
Amounting to

1% of total arrests.

1,044 JUVENILE ARRESTS FOR LIQUOR LAW VIOLATIONS

Amounting to

4.9% of total arrests.

16.3% of Colorado students who report current alcohol use **DRANK AND DROVE ONE OR MORE TIMES** in the past 30 days.



Less than one out of three

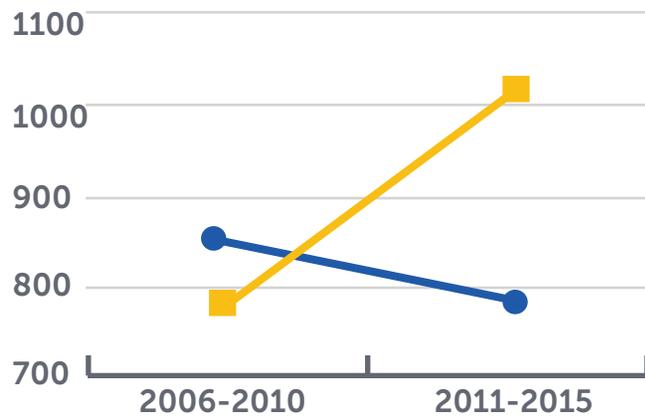
Colorado students think **POLICE WOULD CATCH KIDS DRINKING ALCOHOL IN THE NEIGHBORHOOD.**

Less than half

of Colorado students said **PARENTS OR GUARDIANS WOULD CATCH THEM IF THEY DRANK ALCOHOL WITHOUT PERMISSION.**

From 2006-2015 in Colorado,
ALCOHOL-ATTRIBUTABLE DEATHS FROM CHRONIC CAUSES INCREASED BY 24%.

Overall alcohol attributable deaths increased by 10%.



● ACUTE CAUSES

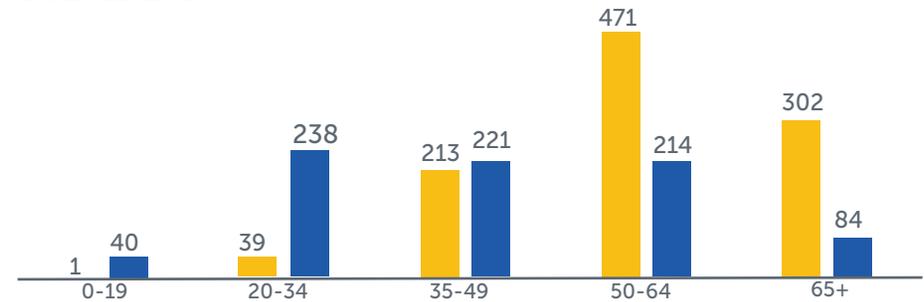
causes (i.e., illness or injury) with a very short duration from the time of onset to the time of death such as alcohol poisoning, motor-vehicle traffic crashes, and suicide.

■ CHRONIC CAUSES

causes with a longer duration from the time of onset to the time of death such as alcohol abuse, alcoholic liver disease, and chronic pancreatitis.

50-64 year olds had the most CHRONIC ALCOHOL ATTRIBUTABLE DEATHS

from 2011-2015.



Number of chronic and acute alcohol attributable deaths from 2011-2015 by age

From 2011-2015,

MORE THAN 2X AS MANY MALES as females died from alcohol-attributable causes, which is consistent with national trends.



1,248
men

574
women

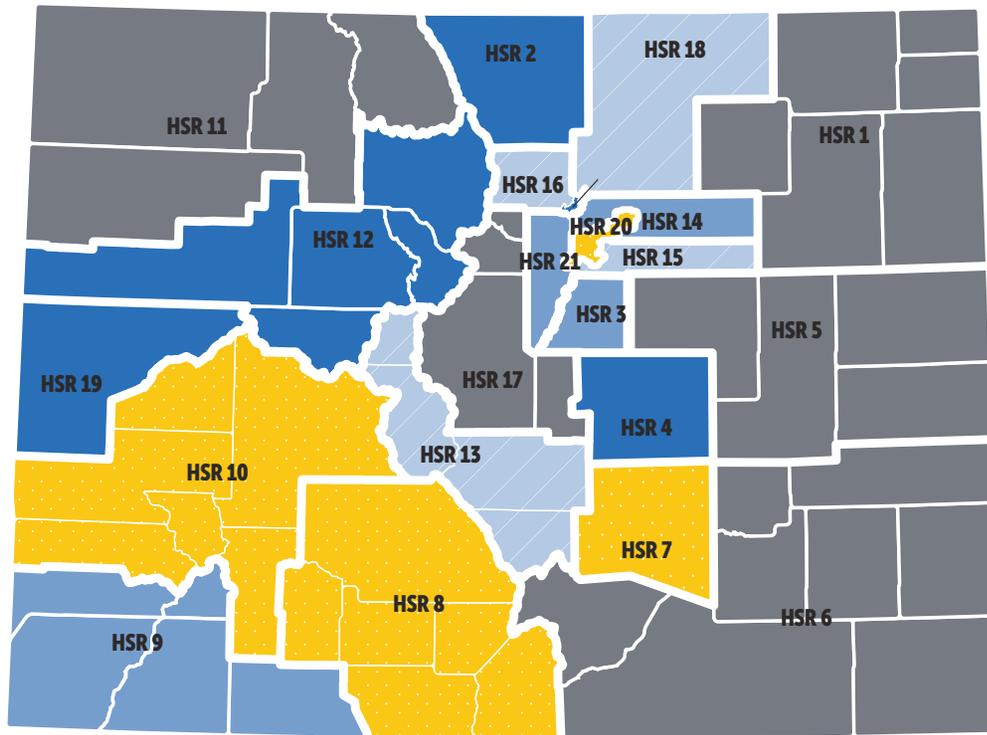


67,943
men

27,215
women

The state average rate of EMERGENCY DEPARTMENT VISITS DUE TO ALCOHOL POISONING

was 3.3 visits
per 100,000 people in 2019.



From 2016-2019, **HSRs 8 AND 10 HAD THE HIGHEST RATES OF EMERGENCY DEPARTMENT VISITS DUE TO ALCOHOL POISONING**, at 13.3 and 9.1 respectively. The State average over the same period was 4.5 per 100,000 people.

QUARTILE 1:
2.1%–3.9%

QUARTILE 2:
4.0%–4.5%

QUARTILE 3:
4.6%–5.6%

QUARTILE 4:
5.7%–13.3%

DATA
SUPPRESSED

The prevalence of **alcohol use disorder** among Colorado residents is **higher than the national average** and the Healthy People 2030 target.



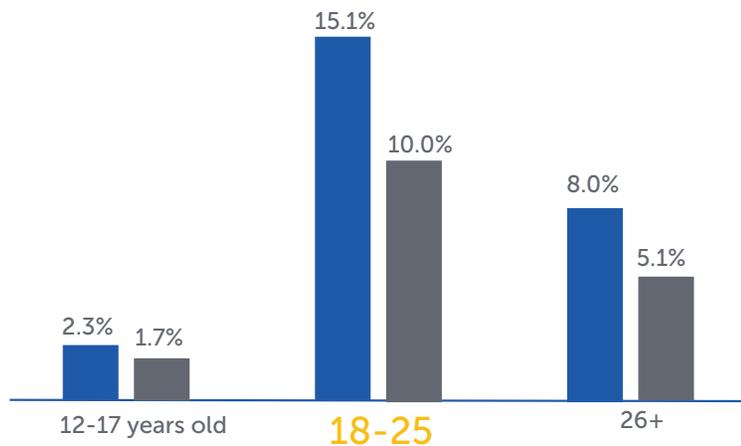
8.3% OF THE POPULATION HAVE ALCOHOL USE DISORDER.

5.4% OF THE POPULATION HAVE ALCOHOL USE DISORDER.

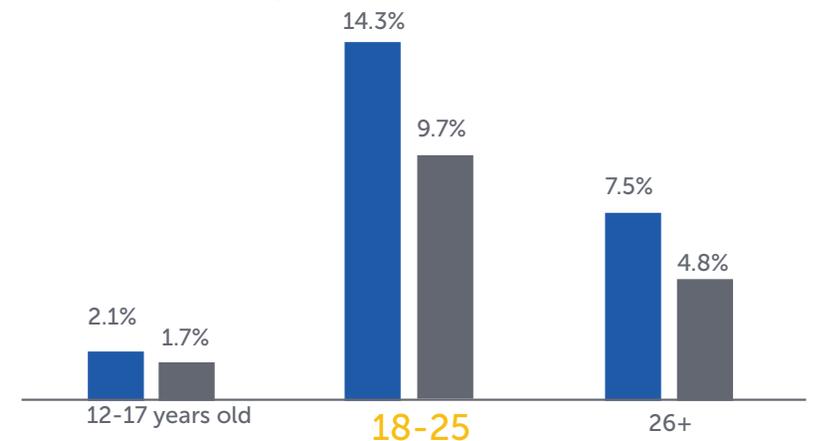
THE TARGET GOAL IS TO REDUCE THE RATE OF ALCOHOL USE DISORDER IN THE UNITED STATES TO **3.9%**.

Alcohol Use Disorder is defined as meeting criteria for alcohol dependence or abuse. Dependence or abuse is based on definitions found in the 4th edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM-IV). This includes respondents who used alcohol on six or more days in the past 12 months and were defined as having dependence and/or abuse.

18-25 year olds have the highest prevalence of alcohol use disorder.



18-25 year olds have the highest prevalence of needing but not receiving treatment for alcohol use disorder.

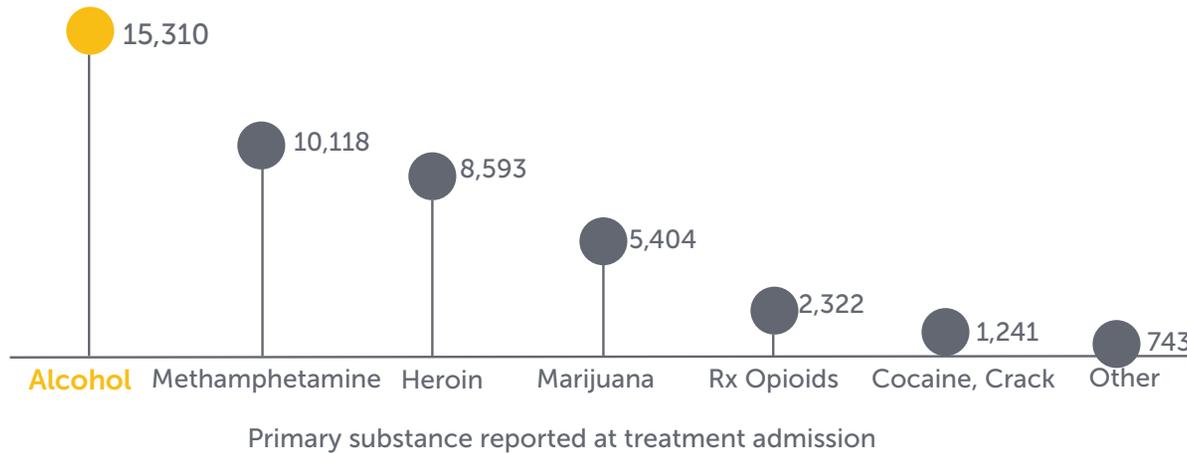


COLORADO has a higher prevalence than the **NATIONAL AVERAGE** among each age range for both of these indicators.



Prevalence rates reflect everyone 12 years and older.

MORE COLORADANS SEEK TREATMENT FOR ALCOHOL
than for any other substance.

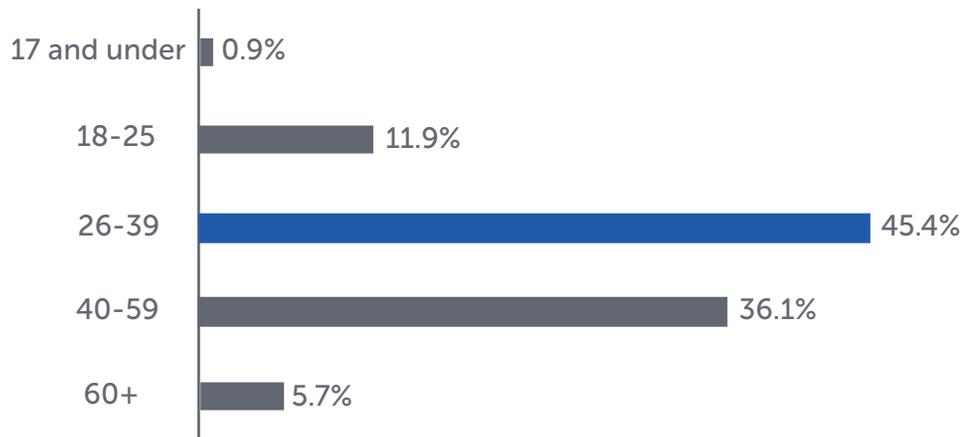


From 2015 to 2019
the number of people in our
state seeking treatment for
ALCOHOL USE DISORDER
increased by 8.7%.



26-39 YEAR OLDS

ARE THE LARGEST AGE GROUP OF COLORADANS SEEKING
TREATMENT FOR ALCOHOL USE DISORDER.



The average age of people
seeking treatment for
alcohol use disorder is 38.7
years old.

Among these people, on
average they started using
alcohol at age 15.

Treatment admissions refer to the 594 facilities licensed by the Colorado Department of Human Services, Office of Behavioral Health (OBH), and do not include clients who received service through private pay or third party insurance providers, or non-OBH licensed facilities.

KEY TERMS

Acute causes of alcohol-related deaths	Acute causes include but are not limited to alcohol poisoning, fall injuries, motor-vehicle crashes, and firearm injuries. For a full list see the Centers for Disease Control and Prevention: Alcohol-Related Disease Impact (ARDI) .
Alcohol impaired driving	Drivers who tested at Blood Alcohol Content (BAC) at greater than or equal to .08
Alcohol Use Disorder	Defined as meeting criteria for alcohol dependence and abuse. In 2016, dependence and abuse was based on definitions found in the 4th edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM-IV). This included respondents who used alcohol on 6 or more days in the past 12 months and were defined as having dependence and/or abuse.
Average	A calculated central value of a set of numbers
Binge drinking	The Behavioral Risk Factors Surveillance System (BRFSS) defines binge drinking as 4 or more drinks for a woman or 5 or more drinks for a man on an occasion during the past 30 days.
Chronic causes of alcohol related deaths	Chronic causes include but are not limited to alcoholic liver disease, chronic hepatitis, fetal alcohol syndrome, and liver cirrhosis. For a full list see the Centers for Disease Control and Prevention: Alcohol-Related Disease Impact (ARDI) .
Excessive Drinking	America's Health Ranking defines excessive drinking as engaging in either binge drinking (four or more [women] or five or more [men] drinks on one occasion in the past 30 days) OR chronic drinking (eight or more [women] or 15 or more [men] drinks per week).
Health Statistics Region	A geographic grouping based on demographic profiles and statistical criteria. Colorado has 21 Health Statistics Regions which correspond with existing county boundaries.
Healthy People 2030	Created by the U.S. Department of Health and Human Services, Healthy People 2030 provides data-driven national objectives to improve health and well-being over the next decade.
Liquor Law Violations	Can include sale to minors, sale to intoxicated persons, and minor in possession. Liquor enforcement laws, rules, and regulations are published by the Office of the Secretary of State in the Colorado Code of Regulations.
Per capita	Per unit of population
Prevalence	The proportion of a population who have specific characteristics in a given time period. Prevalence may be reported as a percentage (5%, or 5 people out of 100), or as the number of cases per 10,000 or 100,000 people.
Proportion	Two ratios that have been set equal to each other
Protective Factors	Characteristics within the individual or conditions in the family, school or community that help someone cope successfully with life challenges.
Quartile	A group that contains 25% of the data set
Ranking	Relative position
Rate	The ratio between two related quantities
Risk Factors	Characteristics within the individual or conditions in the family, school, or community that increase the likelihood someone will engage in unhealthy behaviors.
Significance	The probability is less than .05 that the difference or relationship happened by chance



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