Minimum Drinking-Age Laws Are Effective


Underage drinking is a serious national problem with substantial social and economic consequences. Alexander C. Wagenaar and Traci L. Toomey argue in the following viewpoint that the establishment of a minimum legal drinking age (MLDA) of twenty-one represents the single most effective approach to curbing underage drinking. They maintain that the age-21 MLDA has saved over seventeen thousand lives since 1975 and could be even more beneficial if it was strictly enforced. Alexander C. Wagenaar and Traci L. Toomey are researchers in the division of epidemiology of the School of Public Health at the University of Minnesota.

As you read, consider the following questions:

1. According to the authors, when did most states establish an MLDA of twenty-one?
2. What penalty did states suffer if they did not raise their MLDA to twenty-one when the federal government enacted the Uniform Drinking Age Act in 1984, according to Wagenaar and Toomey?

The minimum legal drinking age (MLDA) is the most well-studied alcohol control policy in the United States. The intention of this policy is to lower alcohol use and its associated problems among youth. Following Prohibition, most states established an age 21 MLDA. During the early 1970s, a trend toward lowering the MLDA to age 18, 19 or 20 began in the United States, providing many natural experiments. As a result of research evidence indicating that traffic crashes among youth increased following lowering of the legal age, a citizens' effort began urging states to raise the MLDA back to age 21. In 1984, the federal government enacted the Uniform Drinking Age Act, which provided for the withholding of federal highway funds from states that failed to increase their MLDA. By 1988, all states had established an age-21 MLDA. The increase in MLDA across multiple states again provided researchers with many natural experiments to assess effects of these policy changes on alcohol consumption and related problems among youth....

Compared with a wide range of other programs and efforts to reduce drinking among teenagers, increasing the legal age for purchase and consumption of alcohol to 21 appears to have been the most successful effort to date.... The magnitude of effects of the age-21 policy may appear small, particularly in studies using weak research designs and having low levels of statistical power. However, even modest effects applied to the entire population of youth result in very large societal benefits. For example, the National Highway Traffic Safety Administration, using an average estimated reduction in traffic fatalities due to the legal drinking age of 13%, calculates that the age-21 policy prevented 846 deaths in 1997 and prevented a total of 17,359 deaths since 1975.

A large proportion of studies of the MLDA found a statistically significant, inverse relationship between the MLDA and alcohol consumption and alcohol-related problems (48%
of the higher quality studies). Only a small number of studies found a statistically significant, positive relationship between the MLDA and various outcomes (1% of the higher quality studies). A large number of studies found no statistically significant relationship. In addition to differences in quality of research design and analyses, several other factors may account for variability in results across studies, including size of sample and extent of change in policy. The power to detect a statistically significant effect is directly influenced by the size of the sample. In some states, the MLDA was raised only 1 year, from age 20 to age 21; in other states it was raised from age 18 to 21. Studies of policy changes that affect smaller segments of the population may be less likely to detect effects simply because of reduced statistical power when analyzing fewer data. Given potential design and analysis limitations in any single study, the large proportion of MLDA studies that found a significant inverse relationship with various outcomes gives strong support for the effectiveness of the MLDA.

**Strict Enforcement of the MLDA Would Save More Lives**

It is difficult to estimate accurately the effects of the drinking age specifically on college students. Unfortunately, most studies focusing on college students have been based on weaker cross-sectional designs or limited nonprobability samples. Only 9% of the college-specific studies (6 of 64) used a higher quality research design. Of these higher quality studies, none found a statistically significant inverse relationship between the MLDA and consumption or alcohol-related problems. In addition, of these 6 analyses, 4 included a sample of students at only one university. Although it is possible that the age-21 policy has been less effective on college campuses than among the general youth population, existing research clearly does not suggest that the age-21 MLDA has increased problems among college students. However, more studies that use robust research designs would be needed to assess accurately the effect of the MLDA specifically on college campuses. In addition, studies of potential mediating factors on campuses are also needed. For example, how well are MLDA laws enforced on college campuses? How easily can underage students obtain alcohol on and around campus? If one assumes that the MLDA is less effective on college campuses, perhaps it is due to lax enforcement and particularly easy access to alcohol by underage youth in such settings.

Finally, despite progress in recent decades, most youth continue to have access to alcohol, most drink at least occasionally, and a substantial fraction regularly become intoxicated. The social costs from injuries, deaths and damage associated with underage drinking remain high. The benefits of the legal drinking age of 21 have occurred with little or no active enforcement in most areas. Simply by increasing enforcement levels and deterring adults from selling or providing alcohol to minors, even more injuries and deaths related to alcohol use among youth are likely to be prevented each year.

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