Number 2026-04

New York State Behavioral Risk Factor Surveillance System Brief

The Behavioral Risk Factor Surveillance System is an annual telephone survey of adults developed by the Centers for Disease Control and Prevention conducted in all 50 States, the District of Columbia, and several United States Territories. The New York Behavioral Risk Factor Surveillance System is administered by the New York State Department of Health to provide statewide and regional information on behaviors, risk factors, and use of preventive health services related to the leading causes of chronic and infectious diseases, disability, injury, and death.

Binge and Heavy Drinking

New York State Adults, 2024

Introduction

Excessive alcohol use is associated with short-term health outcomes such as unintentional injuries and violence, long-term health outcomes including cancer and other chronic diseases, and learning and mental health concerns like anxiety, depression, and memory problems. Binge drinking and heavy drinking are two patterns of excessive alcohol use. Excessive alcohol use also includes any kind of drinking by pregnant people or people under age 21.[1] Binge drinking is defined as consuming 4 or more drinks for women and 5 or more drinks for men on a single occasion. Heavy drinking is defined as consuming 8 or more drinks per week for women and 15 or more drinks per week for men.[1]

Excessive alcohol use is one of the leading causes of preventable and premature death in the United States (US), responsible for 178,000 preventable deaths attributable to excessive alcohol use each year.[2-4] In New York State (NYS), excessive alcohol use causes over 8,000 deaths annually, resulting in an average of 22 years of potential life lost per death.[3] Excessive alcohol use also results in economic costs and costs NYS an estimated $16.3 billion, or approximately $2.28 per excessive drink consumed.[5] Economic costs due to excessive drinking include losses in workplace productivity, health care expenses, criminal justice expenses, and motor vehicle crash costs.

Excessive alcohol use, both in the form of heavy drinking or binge drinking, is also associated with an increased risk for several chronic diseases and conditions. Alcohol consumption has been linked to an increased risk for various types of cancer including those of the oral cavity and pharynx, larynx, esophagus, liver, colon, rectum, and female breast.[6] Research indicates the more alcohol a person drinks regularly over time, the higher their risk of developing an alcohol-associated cancer. An estimated 4.8% of cancer cases and 3.2% of all cancer deaths in NYS are attributable to alcohol consumption.[7] Excessive alcohol use over time also increases the risk for hypertension, cardiovascular disease, stroke, liver disease, and digestive diseases.[1]

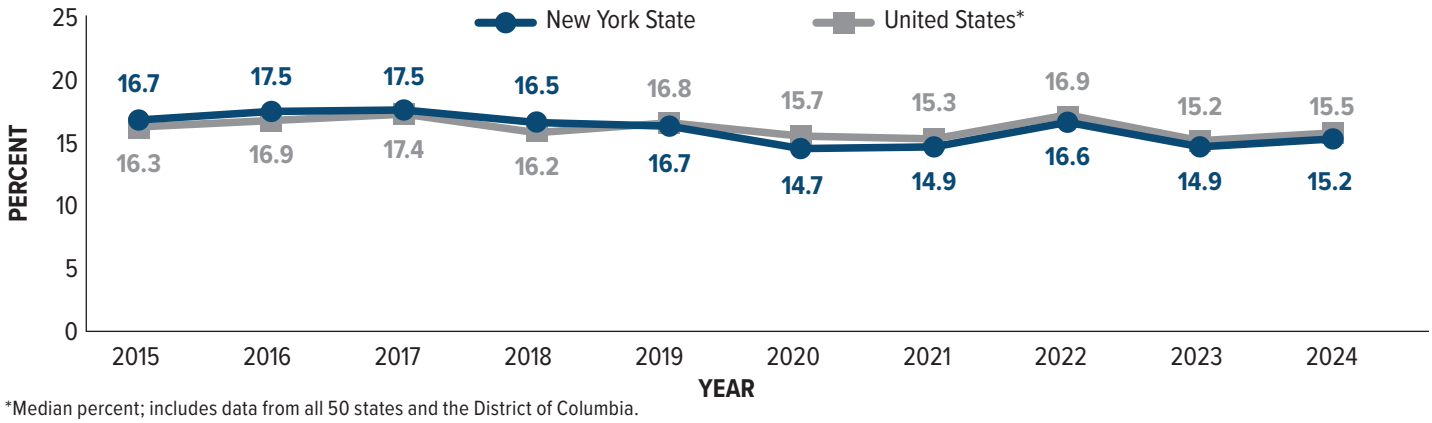
Health Equity

The New York State Department of Health acknowledges that social, economic, and environmental inequities result in adverse health outcomes and can have a greater impact on health than individual choices.[8] Alcohol consumption and its related harms vary across population groups and certain groups face a disproportionate burden of alcohol-related harms. Despite historically reporting lower binge and heavy drinking prevalence than non-Hispanic White adults, non-Hispanic Black adults and Hispanic adults experience greater alcohol-related harms.[9-11] Social determinants of health such as greater alcohol retailer density, increased availability of alcohol products, and increased marketing of alcohol products to specific population groups, especially when fueled by structural racism, contribute to disparities in the burden of excessive alcohol use and its associated outcomes. Similarly, adults with lower socioeconomic status have higher alcohol-attributable risk even with similar levels of alcohol consumption as other higher socioeconomic groups.[12] To advance health equity in communities, we need to ensure that every community benefits from policies and approaches that reduce excessive alcohol use and prevent the harm that it can cause.

Key Findings

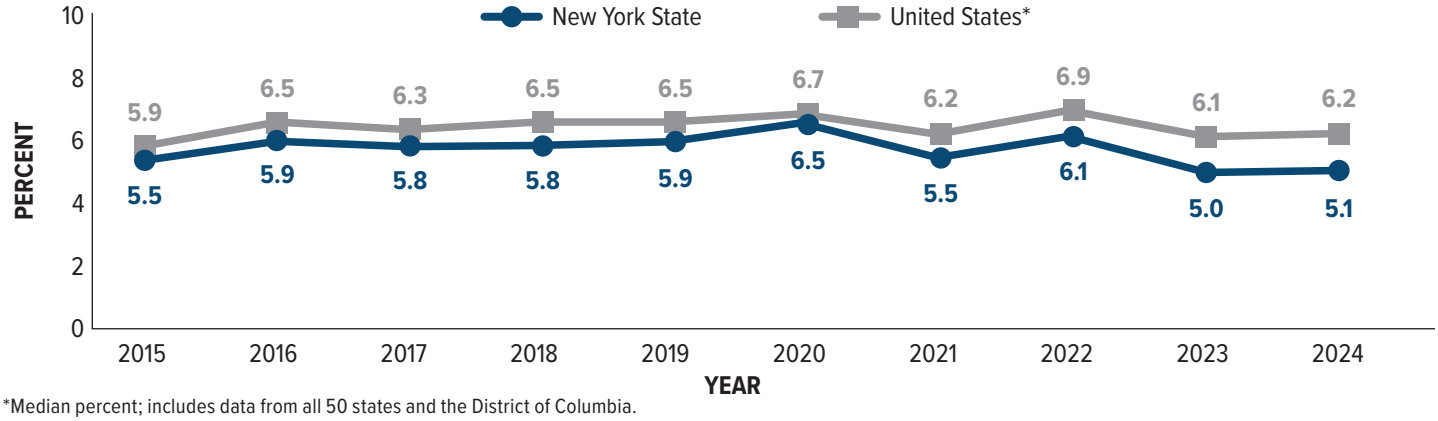
- Nearly 1 in 6 adults in NYS (16.4%) reported excessive alcohol use in the form of either binge or heavy drinking.
- Binge drinking was reported by 15.2% and heavy drinking was reported by 5.1% of adults.
- Adults who binge drink reported an average of 4.0 binge drinking occasions per month (median = 1.6 occasions) and an average of 7.1 drinks per binge drinking episode (median = 5.3 drinks) (data not shown).
- The prevalence of binge drinking was significantly higher in males (19.0%) compared to females (11.5%), adults who were less than 35 years of age compared to older adults ages 45 and up, and adults with an annual household income of $75,000 or more (20.0%) compared to those with lower incomes (16.4% or less).
- Respondents who identified as Multiracial non-Hispanic, White non-Hispanic, or Hispanic reported higher rates binge drinking (20.1%, 16.9% and 16.1%, respectively) than those who identified as Black non-Hispanic (12.0%), or Asian/Native Hawaiian/Pacific Islander (9.5%).
- The prevalence of both binge and heavy drinking was significantly higher in adults who reported frequent mental distress (19.5% and 7.1%, respectively) than those who did not (14.6% and 4.8%, respectively), and adults who were covered by private health insurance (binge: 19.9% and heavy: 6.0%) compared with adults with Medicaid (binge: 12.% and heavy 3.8%) or Medicare 6.9% and 3.8% respectively).
- The prevalence of binge drinking among adults who reported current smoking (27.7%) was more than two times the prevalence reported among those who did not currently smoke (13.9%), and the prevalence of heavy drinking (13.7%) was more than three times the prevalence reported among those who did not currently smoke (4.2%).
- The prevalence of both binge and heavy drinking among adults who currently use cannabis was three times the prevalence reported by adults who currently do not use cannabis (binge: 35.1% vs 11.7%, heavy: 12.6% vs 4.0%)

Figure 1. Prevalence of binge drinking among adults by survey year, United States and New York State, Behavioral Risk Factor Surveillance System, 2015-2024



*Median percent; includes data from all 50 states and the District of Columbia.

Figure 2. Prevalence of heavy drinking among adults by survey year, United States and New York State, Behavioral Risk Factor Surveillance System, 2015-2024



*Median percent; includes data from all 50 states and the District of Columbia.

Figure 3. Prevalence of binge or heavy drinking among New York State adults by sex, race/ethnicity, and age, Behavioral Risk Factor Surveillance System, 2024

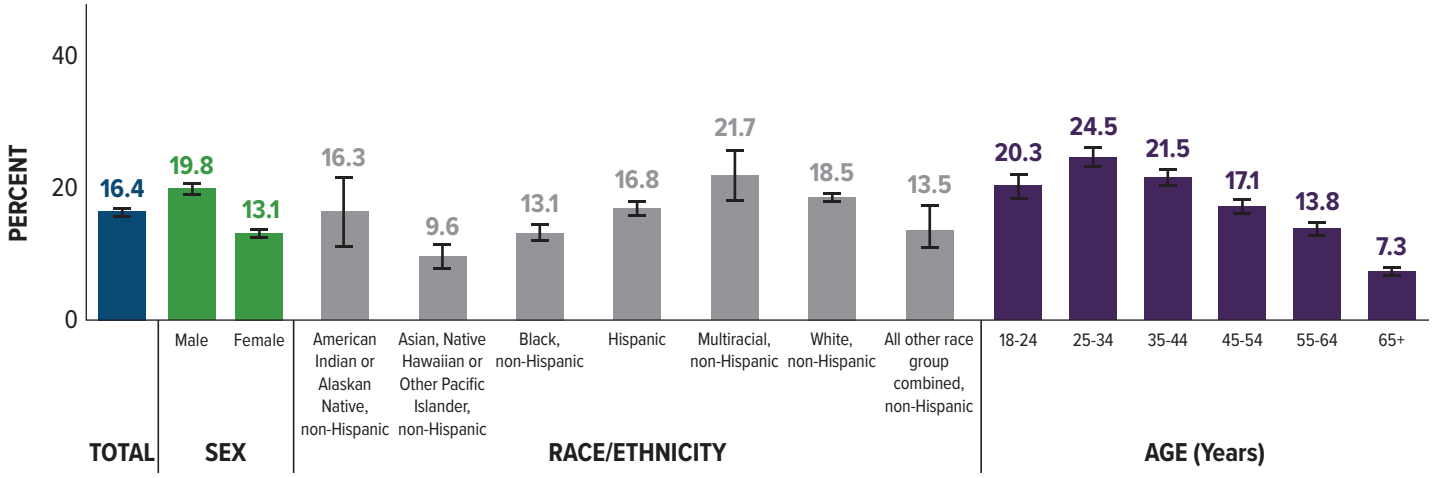


Table 1. Prevalence of binge or heavy drinking by select demographic groups in New York State, Behavioral Risk Factor Surveillance System, 2024

	Binge or Heavy Drinking[a]		Binge Drinking		Heavy Drinking	
	%[b]	95% CI[b]	%[b]	95% CI[b]	%[b]	95% CI[b]
New York State [N=43,913]	**16.4**	**15.8-16.9**	**15.2**	**14.6-15.7**	**5.1**	**4.8-5.4**
Region						
New York State excluding New York City	16.8	16.1-17.5	15.5	14.8-16.1	5.9	5.5-6.3
New York City	15.8	14.8-16.8	14.8	13.8-15.7	4.0	3.5-4.5
Sex[c]						
Female	13.1	12.4-13.8	11.5	10.8-12.2	5.3	4.9-5.8
Male	19.8	18.9-20.6	19.0	18.1-19.9	4.8	4.4-5.3
Race/Ethnicity[d]						
American Indian or Alaskan Native, non-Hispanic	16.3	10.8-21.8	15.9	10.4-21.3	5.3	2.1-8.4
Asian, Native Hawaiian or other Pacific Islander, non-Hispanic	9.6	7.7-11.6	9.5	7.6-11.4	1.9	1.0-2.7
Black, non-Hispanic	13.1	11.6-14.6	12.0	10.6-13.5	3.7	3.0-4.5
Hispanic	16.8	15.5-18.2	16.1	14.8-17.4	4.1	3.3-4.9
Multiracial, non-Hispanic[e]	21.7	17.3-26.1	20.1	15.9-24.4	6.9	4.2-9.5
White, non-Hispanic	18.5	17.8-19.3	16.9	16.2-17.7	6.5	6.0-6.0
All Other race groups combined, non-Hispanic	13.5	9.3-17.7	12.1	8.1-16.2	4.4	2.2-6.6
Age (Years)						
18-24	20.3	18.3-22.2	19.6	17.7-21.6	4.3	3.4-5.2
25-34	24.5	22.9-26.1	23.7	22.1-25.3	5.8	5.0-6.6
35-44	21.5	19.9-23.0	20.1	18.6-21.7	6.4	5.5-7.3
45-54	17.1	15.6-18.6	15.8	14.4-17.2	6.1	5.2-7.0
55-64	13.8	12.5-15.1	12.8	11.5-14.1	5.3	4.5-6.1
65+	7.3	6.5-8.1	5.5	4.9-6.2	3.6	3.1-4.1
Educational Attainment						
Less than high school	14.1	12.2-16.0	13.1	11.3-15.0	4.3	3.3-5.4
High school or GED	15.4	14.3-16.5	14.4	13.3-15.5	4.9	4.3-5.5
Some post-high school	16.1	15.0-17.2	14.9	13.8-15.9	5.2	4.6-5.8
College graduate	18.1	17.2-19.0	16.6	15.8-17.5	5.4	4.9-5.9

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	Binge or Heavy Drinking[a]		Binge Drinking		Heavy Drinking	
	%[b]	95% CI[b]	%[b]	95% CI[b]	%[b]	95% CI[b]
New York State [N=43,913]	**16.4**	**15.8-16.9**	**15.2**	**14.6-15.7**	**5.1**	**4.8-5.4**
Annual Household Income						
Less than $25,000	12.1	10.8-13.4	11.4	10.1-12.6	3.9	3.2-4.6
$25,000-$34,999	14.6	12.9-16.3	13.5	11.8-15.2	4.8	3.7-5.9
$35,000-$49,999	13.4	11.7-15.1	12.4	10.7-14.0	4.3	3.4-5.1
$50,000-$74,999	17.7	16.0-19.4	16.4	14.7-18.0	5.8	4.9-6.7
$75,000 or more	21.6	20.6-22.6	20.0	19.0-21.0	6.7	6.1-7.2
Missing[f]	10.7	9.6-11.9	9.8	8.7-10.9	3.0	2.4-3.6
Employment Status						
Employed/self-employed	20.4	19.6-21.2	19.3	18.5-20.0	5.8	5.4-6.3
Unemployed	17.9	15.6-20.3	17.3	14.9-19.6	5.5	4.2-6.9
Not in labor force	10.0	9.2-10.8	8.6	7.8-9.3	3.9	3.4-4.4
Health Care Coverage						
Private insurance	21.1	20.2-22.1	19.9	18.9-20.8	6.0	5.5-6.6
Medicare	8.6	7.7-9.5	6.9	6.0-7.7	3.8	3.3-4.4
Medicaid	13.2	11.8-14.5	12.6	11.2-13.9	3.8	3.1-4.6
Other insurance[g]	16.5	14.7-18.4	15.5	13.7-17.3	5.7	4.5-6.8
No insurance	20.5	18.0-23.1	19.3	16.8-21.8	6.6	5.1-8.1
Disability[h]						
Yes	13.9	12.9-15.0	12.9	11.9-13.9	4.9	4.3-5.5
No	17.3	16.6-18.0	16.1	15.4-16.7	5.2	4.8-5.5
Frequent Mental Distress[i]						
Yes	20.9	19.2-22.6	19.5	17.8-21.1	7.1	6.1-8.1
No	15.8	15.2-16.4	14.6	14.1-15.2	4.8	4.5-5.2
Current Smoking[j]						
Yes	29.6	27.3-31.9	27.7	25.4-30.0	13.7	12.0-15.4
No	15.0	14.4-15.6	13.9	13.3-14.4	4.2	3.9-4.5
Current Cannabis Use[k]						
Yes	36.3	33.2-39.4	35.1	32/0-38.2	12.9	10.7-15.1
No	12.9	11.9-13.9	11.7	10.8-12.6	4.0	3.5-4.5

Notes: [a]Respondents who reported either binge or heavy drinking. [b]%=Weighted percentage; 95% CI= 95% confidence interval. [c]Based on respondent's sex at birth or current gender identity at time of interview if sex at birth is missing. [d]The data collected pursuant to the different collection categories and tabulations described in subdivision one of this section shall be included in every demographic report on ancestry or ethnic origins of residents of the state of New York by the state agency, board, department, or commission published or released on or after July first, two thousand twenty-two. [e]Respondents who reported they are more than one race group and not of Hispanic origin. [f]"Missing" category included because more than 10% of the sample did not report income. [g]Includes TRICARE, VA/Military, and Indian Health Services. [h]Respondents who reported at least one type of disability (cognitive, self-care, independent living, vision, mobility, or hearing). [i]Frequent mental distress is defined as yes if respondents reported problems with stress, depression, or emotions on at least 14 of the previous 30 days. [j]Current smoker is an adult over age 18 who has smoked at least 100 cigarettes in their lifetime and currently smokes on at least some days. [k]Respondents who reported using cannabis or marijuana at least once in the past 30 days.

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Behavioral Risk Factor Surveillance System Questions

Binge and Heavy Drinking

1. During the past 30 days, how many days per week or per month did you have at least one drink of any alcoholic beverage such as beer, wine, a malt beverage, or liquor?
2. One drink is equivalent to a 12-ounce beer, a 5-ounce glass of wine, or a drink with one shot of liquor. During the past 30 days, on the days when you drank, about how many drinks did you drink on the average?
3. Considering all types of alcoholic beverages, how many times during the past 30 days did you have 5 or more drinks for men or 4 or more drinks for women on an occasion?
4. During the past 30 days, what is the largest number of drinks you had on any occasion?

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Program Contributions

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Bureau of Cancer Prevention and Control

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