Information for Action #2026-14
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Prevalence of Binge and Heavy Drinking among New York State Adults by County, BRFSS 2024

Excessive alcohol use is an important public health issue in New York State (NYS) with 1 in 6 New Yorkers reporting excessive alcohol use in the form of either binge* or heavy drinking*.[1] Excessive alcohol use can cause injuries, violence, and chronic diseases, including cancer.[2,3] Approximately 6,700 New Yorkers die each year due to excessive alcohol use.[4] Moreover, the economic impact is staggering, costing the state's economy a substantial $16.3 billion, as of 2010.[5] The harmful effects of alcohol have disproportionate impacts in low-income communities and communities of color. [6]

This report summarizes county-level data on binge and heavy drinking from the 2024 NYS Behavioral Risk Factor Surveillance System. The NYS Prevention Agenda focuses on preventing underage drinking and excessive alcohol use by adults. County-level estimates of binge and heavy drinking prevalence are essential for informing efforts to prevent and reduce excessive alcohol use and mitigate the adverse effects of alcohol use in communities. These data can be used to support decision-making and program planning, evaluate the effectiveness of programs and policies, educate decision-makers, and enhance community engagement.

Public Health Opportunity

State and local public health professionals can promote effective interventions to reduce excessive alcohol use and to mitigate the effects of its related harms in communities including increasing alcohol taxes, regulating alcohol outlet density, holding retailers accountable for harms that result from illegally serving or selling alcohol, maintaining existing government controls over alcohol sales, maintaining limits on the days and hours when alcohol can be sold, enforcing laws that prohibit alcohol sales to minors, and restricting alcohol advertising especially to reduce the impact of alcohol marketing on young people

Healthcare providers can make Alcohol Screening and Brief Intervention (ASBI) efforts a routine part of health care in primary care settings. ASBI is an evidence-based preventive service like blood pressure or cholesterol screening, which can occur as part of a patient's wellness visit to identify and help individuals who are drinking more than the recommended amounts. Electronic screening and brief intervention (e-SBI) is also recommended and uses electronic devices (e.g., computers, telephones, mobile devices) to facilitate delivery of key elements of traditional SBI.

Resources

- For more information on evidence-based prevention strategies, visit the Community Preventive Services Task Force.
- The CDC provides fact sheets, publications, and other online resources to support states and communities in the prevention of excessive drinking.
- More information on preventive and treatment services is available from the NYS Office of Addiction Support and Services.

For more information about this report or other alcohol-related data and resources in NYS, visit the NYS Department of Health's Alcohol Surveillance and Epidemiology Program or contact AlcoholData@health.ny.gov.

References

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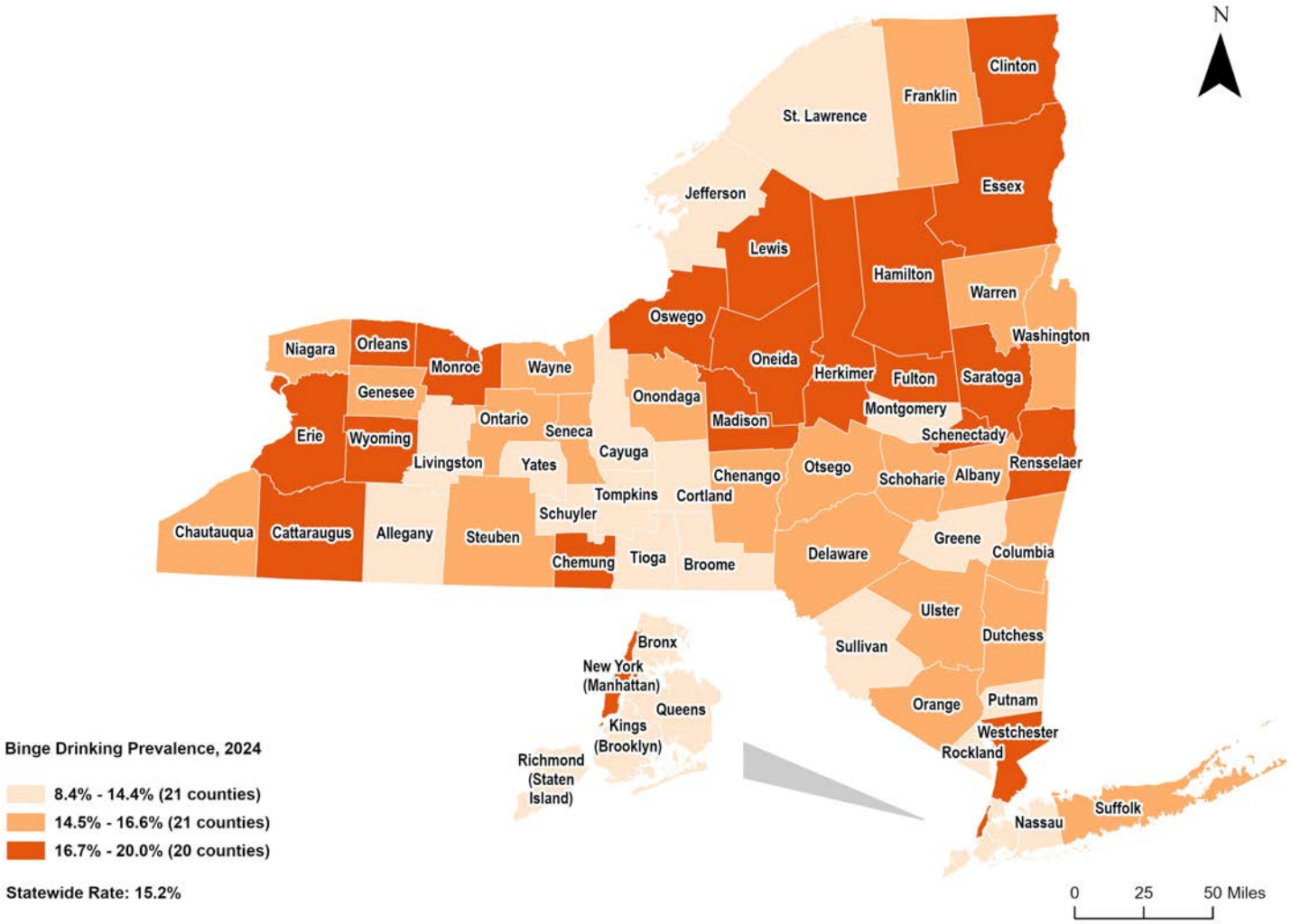
*** Binge drinking is defined as consuming 4 or more drinks for women and 5 or more drinks for men on a single occasion. Heavy drinking is defined as consuming 8 or more drinks per week for women and 15 or more drinks per week for men.**

Prevalence of Binge Drinking Among New York State Adults, BRFSS 2024

In 2024, 15.2% of adults in New York State reported binge drinking, and the prevalence varied by county from 8.4%-20.0% (Table 1).

- Counties outside of New York City with the highest rate of adult binge drinking were Chemung (20.1%), Hamilton (19.7%) and Oswego (19.6%) counties.
- Counties outside New York City with the lowest rate of adult binge drinking were Sullivan (8.4%), Greene (8.7%) and Rockland (9.0%) counties.
- Among the New York City Boroughs, the highest adult binge drinking rate was reported in New York (Manhattan) (18.6%) and the lowest adult binge drinking rate was reported in the Bronx (13.0%).



Prevalence of Heavy Drinking Among New York State Adults, BRFSS 2024

In 2024, 5.1 % of adults in New York State reported heavy drinking, and the prevalence varied by county from 2.4%-11.0% (Table 2).

- Counties outside of New York City with the highest rate of adult heavy drinking were Rensselaer (11.0%), Essex (10.7%) and St. Lawrence (10.3%) counties.
- Counties outside New York City with the lowest rate of adult heavy drinking were Montgomery (2.9%), Rockland (2.9%) and Tioga (3.3%) counties.
- Among the New York City boroughs, the highest adult heavy drinking rate was reported in New York (Manhattan) (5.6%) and the lowest adult heavy drinking rate was reported in Queens (2.4%).

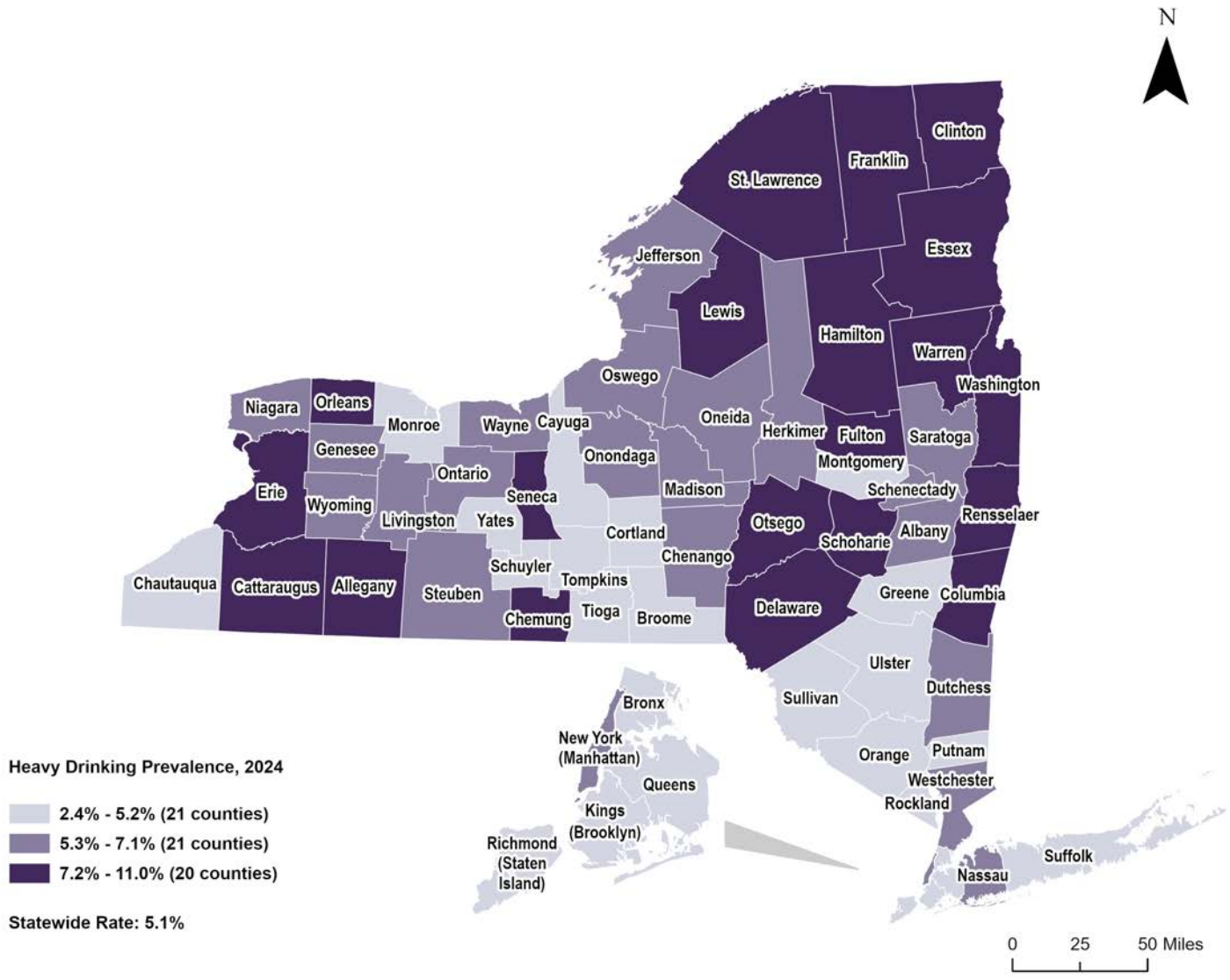


Table 1. Binge Drinking among New York State Adults by County, BRFSS 2024

County	(%)	[95%CI] *	County	(%)	[95%CI] *
Albany	15.4	[11.9-18.9]	Niagara	16.6	[13.0-20.2]
Allegany	13.5	[7.8-19.3]	Oneida	16.9	[11.6-22.3]
Bronx	13.0	[11.0-14.9]	Onondaga	15.7	[12.5-18.9]
Broome	13.4	[8.9-17.8]	Ontario	15.2	[10.5-19.8]
Cattaraugus	17.0	[12.6-21.5]	Orange	14.7	[11.3-18.1]
Cayuga	13.8	[8.7-18.9]	Orleans	19.4	[11.9-26.8]
Chautauqua	14.5	[10.6-18.4]	Oswego	19.6	[15.2-24.1]
Chemung	20.0	[12.8-27.2]	Otsego	16.5	[9.8-23.2]
Chenango	14.9	[9.7-20.1]	Putnam	10.1	[5.8-14.3]
Clinton	16.8	[12.1-21.4]	Queens	13.3	[11.4-15.2]
Columbia	15.5	[11.4-19.6]	Rensselaer	17.1	[12.7-21.5]
Cortland	12.3	[7.3-17.3]	Richmond	14.3	[10.3-18.2]
Delaware	15.7	[9.1-22.2]	Rockland	9.0	[6.1-12.0]
Dutchess	14.8	[10.8-18.8]	Saratoga	18.3	[13.0-23.6]
Erie	19.1	[16.8-21.5]	Schenectady	16.7	[12.8-20.6]
Essex	18.5	[13.4-23.6]	Schoharie	14.6	[9.6-19.6]
Franklin	14.6	[10.1-19.0]	Schuyler	12.7	[8.6-16.9]
Fulton	17.6	[12.6-22.6]	Seneca	16.4	[9.1-23.7]
Genesee	15.4	[10.2-20.7]	St Lawrence	10.7	[7.3-14.1]
Greene	8.7	[5.6-11.9]	Steuben	14.9	[10.1-19.6]
Hamilton**	19.7	[6.9-32.5]	Suffolk	15.1	[12.9-17.3]
Herkimer	16.8	[11.4-22.1]	Sullivan	8.4	[5.3-11.6]
Jefferson	14.4	[10.1-18.7]	Tioga	9.5	[6.1-12.9]
Kings	14.4	[12.5-16.2]	Tompkins	13.6	[9.2-18.0]
Lewis	17.0	[9.9-24.1]	Ulster	16.0	[11.2-20.8]
Livingston	14.1	[8.9-19.2]	Warren	14.7	[10.0-19.3]
Madison	17.1	[10.5-23.7]	Washington	15.5	[10.7-20.4]
Monroe	17.0	[11.6-16.7]	Wayne	14.6	[10.2-19.1]
Montgomery	12.1	[7.2-17.0]	Westchester	17.1	[14.5-19.7]
Nassau	13.5	[11.3-15.6]	Wyoming	16.8	[11.7-21.9]
New York (Manhattan)	18.6	[16.4-20.8]	Yates	12.2	[5.6-18.8]

Note: The prevalence estimates for binge and heavy drinking available in the data tables and used for the map are crude rates. Partners interested in accessing county-specific age-adjusted rates for binge and heavy drinking rates can find them on Health Data NY and the New York State Prevention Agenda Dashboard.

*The 95% confidence interval (95% CI) provides the statistical range containing the true population rate with a 95% probability.

**Estimates with a confidence interval of a half-width of greater than 10 are unstable and should be used with caution.

Table 2. Heavy Drinking among New York State Adults by County, BRFSS 2024

County	(%)	[95%CI]*	County	(%)	[95%CI]*
Albany	5.4	[3.6-7.2]	Niagara	7.1	[4.7-9.5]
Allegany	7.6	[3.5-11.7]	Oneida	5.8	[3.0-8.6]
Bronx	3.4	[2.3-4.4]	Onondaga	7.1	[4.6-9.5]
Broome	5.1	[2.3-4.4]	Ontario	5.8	[3.2-8.4]
Cattaraugus	9.1	[5.7-12.5]	Orange	4.1	[2.4-5.9]
Cayuga	4.4	[2.3-6.5]	Orleans	8.0	[2.7-13.3]
Chautauqua	5.0	[2.7-7.2]	Oswego	6.5	[3.7-9.3]
Chemung	7.4	[3.5-11.3]	Otsego	7.2	[1.9-12.6]
Chenango	5.7	[3.1-8.3]	Putnam	4.0	[1.7-6.2]
Clinton	7.3	[3.9-10.8]	Queens	2.4	[1.7-3.2]
Columbia	7.2	[4.1-10.3]	Rensselaer	11.0	[7.2-14.9]
Cortland	5.2	[2.3-8.2]	Richmond	3.2	[1.6-4.9]
Delaware	7.2	[2.8-11.7]	Rockland	2.9	[1.4-4.5]
Dutchess	6.4	[3.8-9.0]	Saratoga	6.4	[3.4-9.4]
Erie	7.6	[6.0-9.2]	Schenectady	6.7	[4.4-9.1]
Essex	10.7	[6.0-15.3]	Schoharie	7.1	[3.4-10.7]
Franklin	7.2	[4.0-10.3]	Schuyler	5.1	[2.1-8.1]
Fulton	8.8	[4.4-13.2]	Seneca	7.2	[3.1-11.3]
Genesee	7.0	[3.6-10.3]	St Lawrence	10.3	[2.6-17.9]
Greene	3.4	[1.6-5.1]	Steuben	6.6	[3.0-10.1]
Hamilton	8.1	[2.9-13.4]	Suffolk	4.9	[3.6-6.1]
Herkimer	5.7	[3.4-8.1]	Sullivan	3.4	[1.3-5.6]
Jefferson	6.2	[3.3-9.0]	Tioga	3.3	[1.7-4.9]
Kings	4.7	[3.7-5.8]	Tompkins	4.7	[2.3-7.1]
Lewis	9.1	[3.1-15.0]	Ulster	5.1	[2.6-7.5]
Livingston	7.1	[2.7-11.4]	Warren	8.7	[4.7-12.8]
Madison	6.9	[2.8-11.0]	Washington	7.7	[4.9-10.5]
Monroe	4.8	[3.6-6.0]	Wayne	6.3	[3.5-9.1]
Montgomery	2.9	[1.4-4.5]	Westchester	5.3	[3.8-6.7]
Nassau	5.6	[4.2-7.0]	Wyoming	6.7	[3.5-9.8]
New York (Manhattan)	5.6	[4.3-7.0]	Yates	4.4	[1.5-7.4]

Note: The prevalence estimates for binge and heavy drinking available in the data tables and used for the map are crude rates. Partners interested in accessing county-specific age-adjusted rates for binge and heavy drinking rates can find them on Health Data NY and the New York State Prevention Agenda Dashboard.

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