

Introduction

- According to 2024 data from the National Survey on Drug Use and Health (NSDUH), alcohol was the most commonly used substance in the past year among individuals aged 12 and older in the United States. Alcohol use disorder was also the most prevalent form of substance use disorder.^[1]
- In Massachusetts, an average of 56.2% of adults aged 18 and older reported consuming alcohol in the past 30 days between 2023 and 2024.^[11]
- The Behavioral Risk Factor Surveillance System (BRFSS), a CDC-sponsored telephone survey, collects data on chronic health conditions, use of preventive services, and health-related risk behaviors—including binge and heavy drinking, which remain significant public health concerns.
- Using Massachusetts BRFSS data from 2015 to 2024, this data brief presents prevalence¹ of binge drinking* and heavy drinking** by key demographic factors—age group, sex, and race/ethnicity—among the Massachusetts adult population.

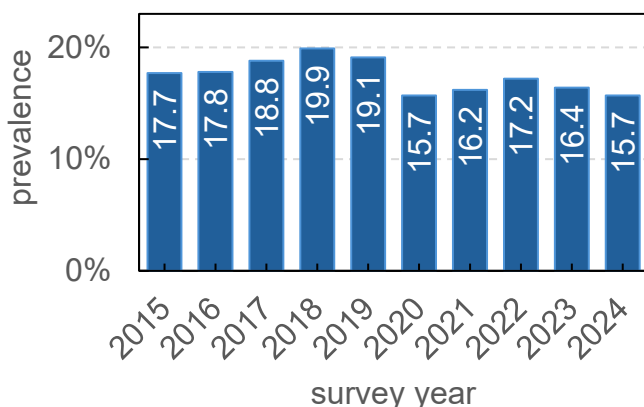
* Binge drinking: having 5 or more drinks for males and 4 or more drinks for females on one occasion in the past 30 days

**Heavy drinking: having 15 or more drinks for males and 8 or more drinks for females per week in the past 30 days

1. This report presents results from a weighted data analysis to ensure the findings reflect the population distribution of Massachusetts (See endnotes for more details)
2. Comparisons across groups are descriptive in nature, no statistical tests for differences were conducted

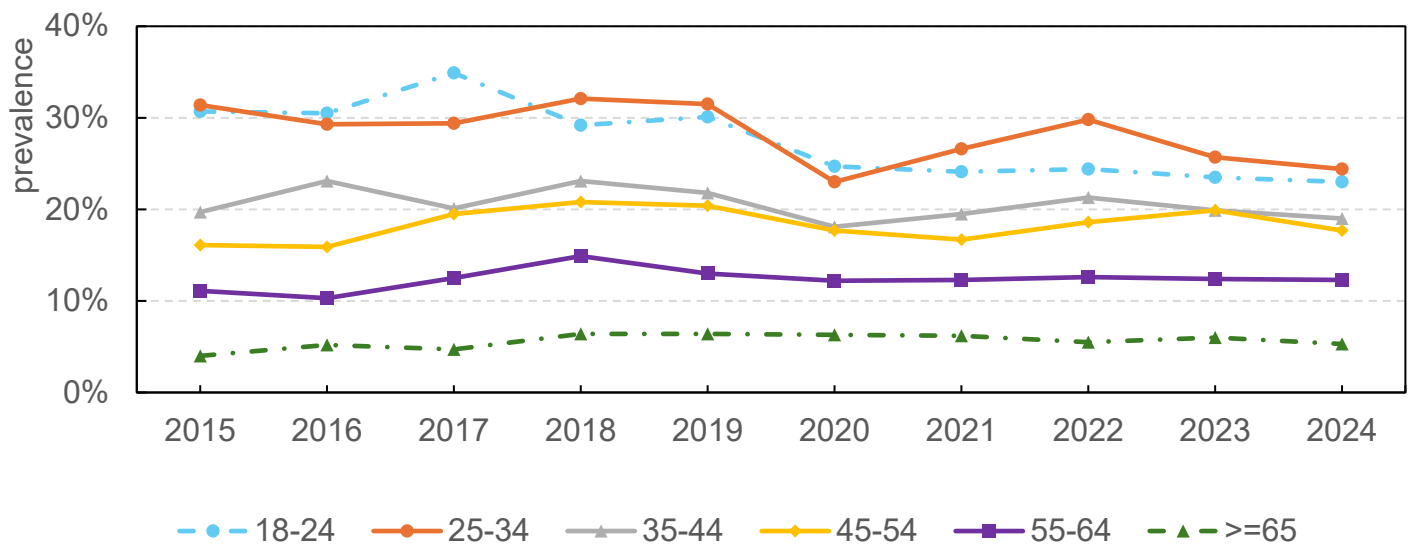
Binge Drinking

Prevalence of Binge Drinking by Survey Year, 2015 - 2024



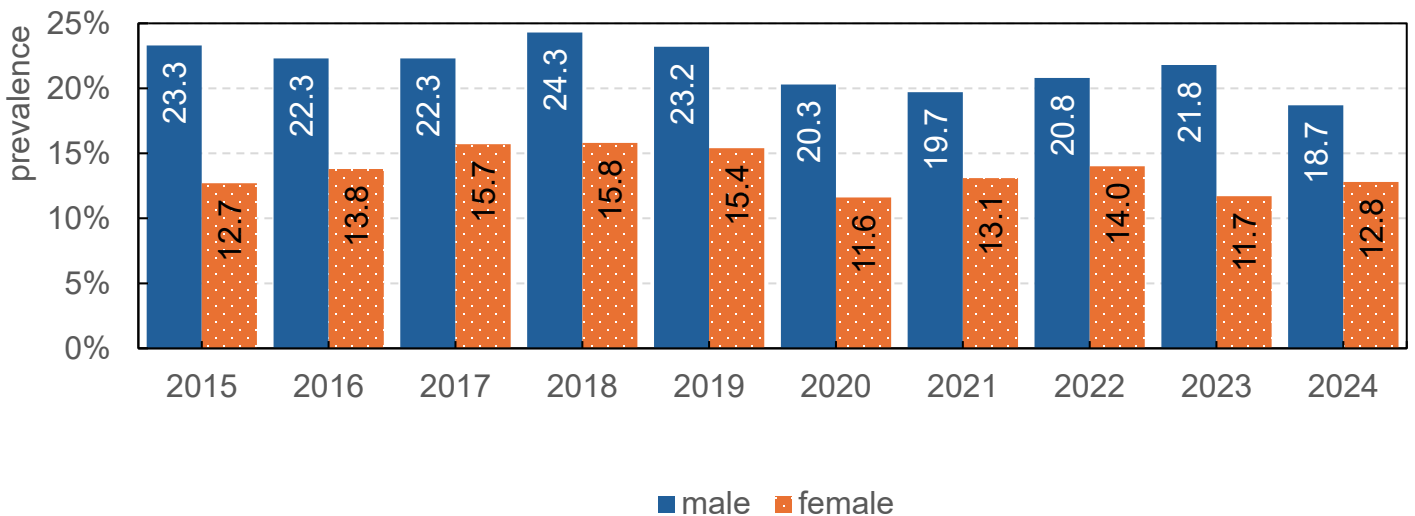
- From 2015 to 2018, the estimated prevalence of binge drinking gradually increased from 17.7% to 19.9%
- In 2020, there was a notable decline in the estimated prevalence of binge drinking (15.7%), coinciding with the onset of the COVID-19 pandemic²
- The estimated prevalence remained below pre-pandemic levels in subsequent years²

Prevalence of Binge Drinking by Age, 2015 - 2024



- Overall, there was an inverse relationship between binge drinking prevalence and the age (group): the older the age group, the lower the prevalence. 23.0% - 34.9% of individuals aged 18-34 and 4.0% - 6.4% of those age 65 and older reported binge drinking¹

Prevalence of Binge Drinking by Sex, 2015 - 2024



- Between 2015 and 2024, the estimated percentage of males reported binge drinking were between 19.7% - 24.3%. The estimated percentage for females were between 11.6% and 15.8%.

1. Comparisons across groups and survey years are descriptive in nature, and no statistical tests for differences were conducted

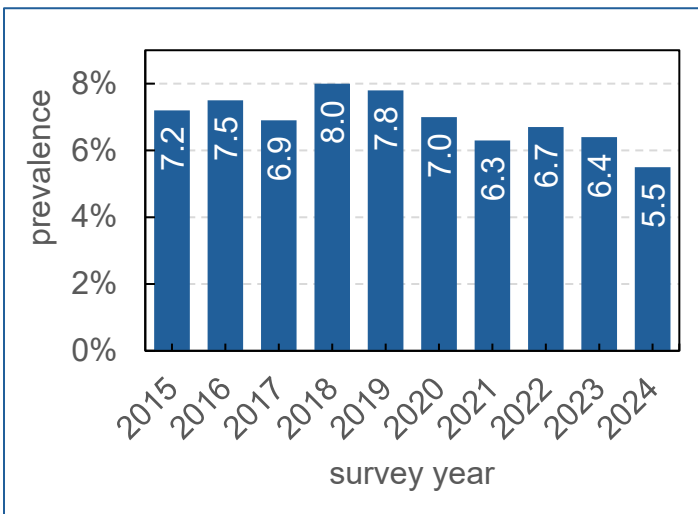
Prevalence of Binge Drinking by Race / Ethnicity, 2015 - 2024

Survey Year	White NH	Black NH	Hispanic	Asian NH	Multi or Other, NH
2015	19.5%	13.6%	11.7%	12.7%	13.0%
2016	19.1%	13.5%	14.8%	13.9%	24.0%
2017	21.0%	10.7%	14.2%	14.7%	10.2%
2018	21.0%	16.3%	20.6%	14.1%	23.2%
2019	21.1%	13.7%	15.9%	11.0%	19.6%
2020	16.1%	12.6%	17.8%	12.6%	NA
2021	17.7%	12.5%	13.1%	8.1%	24.2%
2022	17.7%	15.0%	21.8%	9.0%	18.9%
2023	18.8%	7.4%	15.4%	6.9%	14.6%
2024	17.6%	9.3%	14.3%	7.0%	15.0%

- Between 2015 and 2024, 16.1% - 21.1% of Non-Hispanic White, 7.4% - 16.3% of Non-Hispanic Black, 11.7% - 21.8% of Hispanics, 6.9% - 14.7% of Non-Hispanic Asians and 10.2% - 24.2% of Multiracial or other groups reported binge drinking
- Among the Non-Hispanic Whites, the estimated prevalences of binge drinking increased from 2015 (19.5%) to 2019 (21.1%). In 2020, there was a notable decline in the prevalence, coinciding with the onset of COVID-19.¹
- This temporal trend was not observed among Hispanics, non-Hispanic Blacks, and Multiracial or others racial ethnic groups

Heavy Drinking

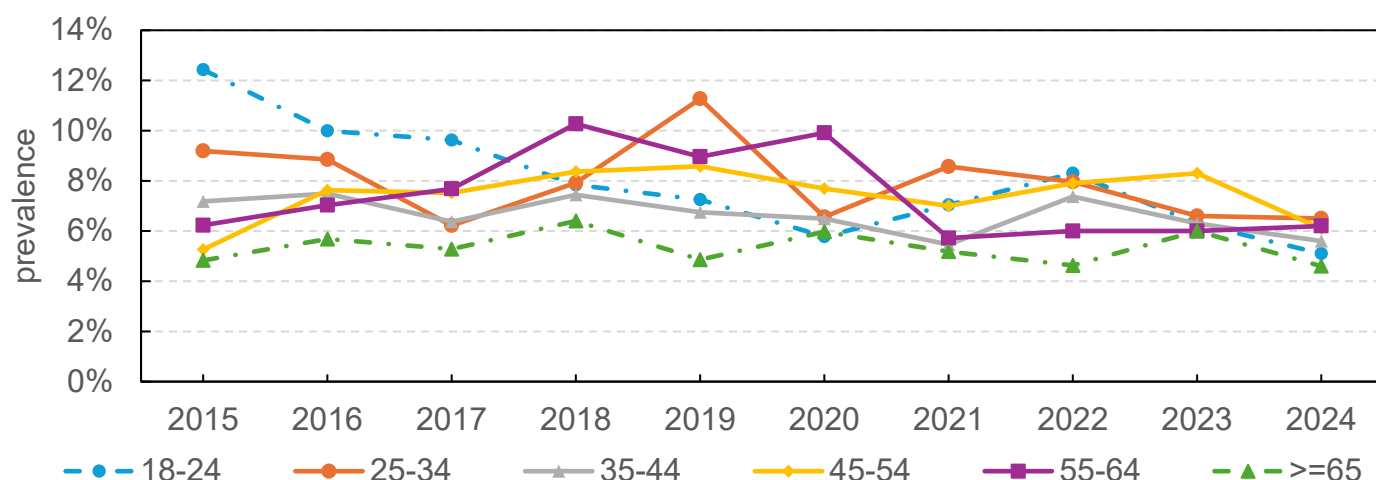
Prevalence of Heavy Drinking by Survey Year, 2015 - 2024



- From 2015 to 2018, the estimated prevalence of heavy drinking increased from 7.2% to 8.0%¹
- In 2020, it declined, coinciding with the onset of the COVID-19 pandemic¹
- Prevalence remained below pre-pandemic levels through 2024¹

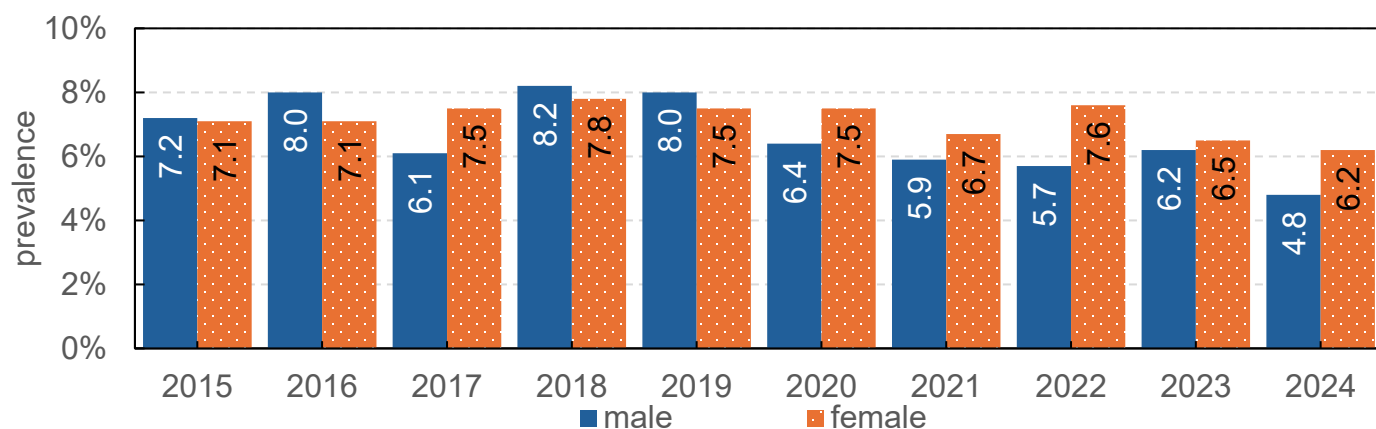
1. Comparisons across groups and survey years are descriptive in nature, and no statistical tests for differences were conducted

Prevalence of Heavy Drinking by Age, 2015 - 2024



- In 2015, the estimated prevalence of heavy drinking among the 18-24 age group was 12.4%. It steadily declined over the next five years, reaching a low of 6.0% in 2020 – effectively halving – before rising and peaked in 2022. But in 2024, the prevalence decreased to 5.1%.
- Throughout the time period, 4.6% - 6.4% of adults aged 65 and older reported heavy drinking. Other age groups showed fluctuations in estimated prevalences across different survey years.¹

Prevalence of Heavy Drinking by Sex, 2015 - 2024



- Between 2015 and 2019, with the exception of 2017, 7.2% - 8.2% of males and 7.1% - 7.8% of females reported heavy drinking¹
- However, following the onset of the COVID-19 pandemic, from 2020 to 2024, 5.7% - 6.4% of males and 6.2% - 7.6% of females reported heavy drinking¹

1. Comparisons across groups and survey years are descriptive in nature, and no statistical tests for differences were conducted

Prevalence of Heavy Drinking by Race / Ethnicity, 2015 - 2024

Survey Year	White NH	Black NH	Hispanic
2015	8.2%	NA	3.8%
2016	8.3%	NA	5.9%
2017	7.9%	NA	5.4%
2018	9.3%	NA	4.5%
2019	9.0%	5.3%	6.1%
2020	8.1%	NA	4.9%
2021	7.5%	NA	3.5%
2022	8.0%	3.6%	5.1%
2023	7.6%	NA	4.0%
2024	6.7%	3.0%	4.0%

- Between 2014 and 2023, 7.5% - 9.3% of non-Hispanic Whites reported heavy drinking. In the same years, 3.5% - 6.1% of Hispanics reported heavy drinking.
- Due to substantial data variations or small sample sizes, most prevalence estimates for non-Hispanic Blacks and all estimates for non-Hispanic Asians and multiracial or other groups – were suppressed (indicated by *)

Key Findings

Binge Drinking:

- From 2015 to 2018, the estimated prevalence of binge drinking increased from 17.7% to 19.9%. In 2020, the prevalence noticeably decreased to 15.7%, coinciding with the onset of the COVID-19 pandemic. After 2020, the prevalence of binge drinking remained lower than pre-pandemic level.
- From 2015 to 2024, estimated binge drinking prevalence generally showed an inverse relationship with age. Individuals aged 18-34 reported the highest prevalence, while those aged 65 and older reported the lowest.¹
- Between 2015 and 2024, males consistently reported higher prevalence of binge drinking than females during this period.¹
- Estimated overall binge drinking prevalence was higher among Non-Hispanic White and Multiracial/Other adults compared to other racial and ethnic groups.¹

Heavy Drinking:

- Between 2015 and 2019, the estimated prevalence of heavy drinking ranged from 7% to 8%. Since 2020 through 2023, it declined to a range of 6% to 7%.
- Adults aged 18-24 reported the highest prevalence of heavy drinking in 2015 at 12.4%, which then decreased to the lowest among all age groups in 2020 at 5.8%. For other years, adults aged 65 or older reported the lowest prevalence. The prevalence among the remaining age groups fluctuated between 2015 and 2024.¹
- Between 2015 and 2019, male in general reported higher prevalence of heavy drinking compared to female. From 2020 onward, females consistently reported higher prevalence.¹
- Between 2015 and 2024, Non-Hispanic Whites consistently reported a higher prevalence of heavy drinking compared to Hispanics.¹

1. Comparisons across groups and survey years are descriptive in nature, and no statistical tests for differences were conducted

Reference

- I. Substance Abuse Center for Behavioral Health Statistics and Quality. [Results from the Key Substance Use and Mental Health Indicators in the United States: Results from the 2024 National Survey on Drug Use and Health \(NSDUH\), SAMHSA](#). Accessed in June 2025.
 - II. National Survey on Drug Use and Health. 2023-2024 National Surveys on Drug Use and Health: Model-Based Prevalence Estimates (50 States and the District of Columbia). Available on: <https://www.samhsa.gov/data/sites/default/files/reports/rpt56957/2024-nsduh-sae-tables-percent-csvs/2024-nsduh-sae-tables-percent.pdf> . Last accessed on May 1st, 2025
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Endnotes:

Weighting makes the sample representative in two ways:

1. It adjusts for differences in the probability of selection due to the telephone number, the number of telephones in a household, and the number of adults in a household.
2. Adjustments are also made to reduce bias from non-response, non-coverage of households without landline telephones or cell phones, and differential participation by sex, age, race/ethnicity, marital status, education, and owner/renter status.