

18 or 21:
The Minimum Legal
Drinking Age Debate

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Index

3...Abstract

3...Introduction

5...Literature/Approach

7...Historical Perspective

16...Evaluation of the Arguments For and Against the MLDA 21

16...Pro MLDA 21

19...Anti MLDA 21

24...Sociologists

25...Conclusion

Abstract

Over the past thirty years, our nation has criminalized alcohol use by eighteen to twenty year olds. There is now a debate about whether to lower the minimum legal drinking age from twenty-one. Pro-21 claims makers argue, among other things, that teenage traffic fatalities will increase if we lower the drinking age. Anti 21 claims makers argue, among other things, that lowering the drinking age will reduce binge drinking. Examining the issue from a sociological perspective leads to the conclusion that lowering the legal drinking age, along with other reforms, such as increased education and zero tolerance laws will both reduce drunk driving and encourage healthy alcohol consumption by eighteen to twenty year olds.

Introduction

The Amethyst Initiative, a nonprofit organization, was launched in the summer of 2008, in an attempt to open the discussion concerning the minimum legal drinking age (MLDA) in the United States. The initiative has gained the support of many college presidents around the country, acquiring over one hundred and thirty signatories since its inception. College presidents, able to observe and communicate with the eighteen to twenty-one population, as well as professors and counselors, have become aware of an underground drinking culture, seemingly a new phenomenon. In response to these observations, college presidents are asking if the 21 MLDA is helping or hurting us. In this controversial and heated debate, it is important to reevaluate the context in which the 21 MLDA was endorsed and enacted, as well as the wisdom of its existence today.

Both sides are deeply entrenched in this debate. Mothers Against Drunk Driving (MADD), the powerful lobbying group, has zealously advocated the institution of the 21 MLDA nationwide. Organizations that want to discuss other options, such as Choose Responsibility, believe that the 21 MLDA is problematic causing a growing binge drinking culture among young people. (Goff 2002) Such organizations, which are pushing to open up the debate, argue that organizations such as MADD attempt to

suppress new ideas, based on their assertion that the 21 MLDA works. In a recent article in U.S. News and World Report, Laura Dean Mooney, the current president of Mothers Against Drunk Driving was quoted: “The simple fact is that the 21 law saves lives and is, therefore, nonnegotiable.” (2008) Anti-21 MLDA organizations believe that the law is out of step with our cultural attitudes toward alcohol and personal safety and that we are in a different era, in need of a new perspective and a new approach. As reported by Bresnahan, even Candy Lightner, the woman who started MADD, was quoted as saying, “MADD has become far more neo-prohibitionist than I had ever wanted or envisioned...I didn’t start MADD to deal with alcohol. I started MADD to deal with the issue of drunk driving.” (2002:2)

As part of the crackdown on drunk driving in the 1980’s, the 21 MLDA law was enacted to prohibit underage drinking. People were dying in drunk-driving accidents and it was no longer a situation of unconnected, episodic tragedies, but a social problem in need of immediate attention. (Reinarman, 1988) Twenty-five years later we live in a different society, in a different world. Our society has become much more health conscious, and concerned with personal safety. We have safer cars, equipped with many safety measures that did not exist thirty years ago. Today there is evidence that the 21 MLDA may be hurting us as individuals and as a society, more than it is helping us. There is evidence that eighteen to twenty year olds are still drinking, to a large extent, despite the law, and in a more dangerous and clandestine way.

In this paper, I will examine the arguments for and against the 21 MLDA, as well as their historical underpinnings and the relevant sociological literature, and discuss the reasons the law should now be changed.

Drinking and driving is still dangerous and is still a social problem, but are there better ways to deal with the problem than prohibiting eighteen to twenty year old men and women from drinking. From the perspective of MADD, as modern prohibitionists, the availability of alcohol is the cause of all drinking problems. Supporters of the 21 MLDA do not consider the environment and culture (for example, time frame within which drinking occurs, and purpose of drinking) in examining drinking problems and the best way to deal with them. Examining the social context in which drinking occurs rather than just its availability makes it evident that the 21 MLDA now causes serious problems that must be addressed by lowering the MLDA and instituting new reforms such as increased education about moderate healthy alcohol consumption and universal zero tolerance laws (outlawing driving with any level of alcohol).

Literature/Approach

Traditional thinking maintains that sociology is a tool to address and potentially solve social problems. Conventional sociology supports the effectiveness of public agencies and social problem professionals (for example drug and alcohol counselors) in implementing public action to attempt to solve social problems. (Schneider 1984) Social scientists can provide theoretical paradigms to help us define dynamic processes such as the under age drinking age issue. Sociologists can contribute research to provide quantitative data for the claims making process.

On the other hand, in order to sift through the plethora of research accumulated from an array of sociologists providing their input to this debate, the Constructivist approach is very useful. This approach, also known as the sociology of detachment, moves the sociologist away from a supportive position. The target of change and the

object of critique now becomes the social problems industry itself. Through the constructivist approach, sociologists can report on qualitative research in order to make claims on the claims-makers themselves. According to Schneider, rather than attempting to define the deviant, the sociologist from a Social Constructivist perspective examines not only the claims makers, but perhaps more importantly, the claims making activities through which groups define phenomena as social problems. (Schneider 1984)

From the Constructivist approach, the sociologists' concern is not the problem itself but how and why a phenomenon has come to be defined as a social problem. As involved parties (claims-makers) argue about the "reality" of the conditions, the sociologist can take a step back and look at the debated issue from an objective perspective. The sociologist, as a detached entity, realizes that the issue is not necessarily, and not usually, based on factual, natural evidence, but is open to interpretation, as a matter of choice. For instance, Schneider (1984) states what is evident in this debate from the Constructivist approach:

It is difficult not to find almost every proposition about alcohol stated in popular communication or by alcohol professionals to be either false, or so much a matter of choice among alternative interpretations as to lose the ring of certainty from which it is projected at the public. For example, '50% of all automobile deaths are attributable to drunken drivers.' (p. 44)

Clearly, data alone cannot provide solutions to the problems.

Through the theory of Social Constructivism, the sociologist studies the language and actions through which conditions become interpreted as social problems. Through this process of analyzing the language and actions of claims-makers, the differing social constructions of reality are apparent. Claims-makers see the problem in different ways depending on their differing constructions of reality. Schneider compares this to reading

Shakespeare: “In analyzing two seemingly opposed interpretations of the Shakespearian tragedies they are really reconcilable rather than opposed; each is attending to different subject matter...one to poetry and one to drama.” (1984:37)

Historical Perspective

As a nation, we have tried alcohol prohibition in different ways: state prohibition starting in the 1850’s, national prohibition in the 1920’s, and age specific prohibition continuing until today. Each time, a large proportion of society ignored the law, and continued to drink. Prohibition is unenforceable, or at least cannot be enforced well enough to be an effective law. There are also always unintended consequences of prohibition.

In the Colonial era, alcohol consumption was universal and drunkenness common practice. (Reinarman 1988) According to Reinarman, the Puritans deemed alcohol “the good creature of God.” (1988:92) In 1673, Minister Increase Mather praised alcohol: “Drink is in itself a creature of God, and to be received with thankfulness.” (Reinarman, 1988:1) A brewery was one of Harvard’s’ first construction projects so that a steady supply of beer could be served in the student-dining hall. (Hanson 2007)

In the 1830’s, the temperance movement consisted of members of the elite and middle class. Advocates of temperance blamed alcohol for the ills of American society and claimed that alcohol was addictive. According to Reinarman, temperance groups of the time believed that “mothers and children” were innocent victims of the drink. (1988:93) As time went on, the temperance movement worked to bring the lower classes into the movement. In the early 20th century, with the onset of the industrial revolution, the class of small businessmen felt displaced by the emergence of corporate society, and

of trusts and the institution of a permanent working class. (Reinarman 1988) They grew to support prohibition as they saw this as an attack on corporate capitalist society.

(Reinarman 1988) The saloon became un-American and drinking was equated with immorality and political evils. The saloon became the place where unions and communists were bred.

By 1915, the captains of industry backed prohibition, as they believed that it would support a more productive labor force. To the corporate elite it was better that alcohol, rather than big business, was the villain. From their perspective, prohibition would discourage workers from spending their wages on alcohol. Therefore there would be fewer wage demands, unions, strikes and industrial accidents. With backing from more and more constituents in society, in 1919 the temperance movement was victorious, establishing prohibition in the United States. Ten years, later with the onset of the great depression, in 1929, the corporate elite changed its political position once again and pushed for a legalized liquor industry because they believed it would increase employment and tax revenues in an attempt to stabilize the nation economically.

With the introduction of the 21st amendment in 1933, prohibition was repealed due to lack of effectiveness, change in public opinion, and unintended negative consequences. During prohibition, many people became scofflaws, disregarding prohibition. A profession of illegal alcohol distributors, called bootleggers became rampant, underground drinking was pervasive and tainted alcohol was served due to the clandestine way it had to be produced. When prohibition ended, the states were able to set the legal drinking age. Many states set it at twenty-one. Following repeal almost all states passed legislation that required a person to be at least twenty-one to purchase

alcohol. The 21st amendment was a compromise with the temperance movement establishing the modern drinking age. This focused the issue on who should and should not drink rather than on the social context in which people drink, regardless of age. Males (1996) states that,

The political failure of general prohibition meant that American adults would increasingly focus justifications for alcohol policy less on the perils of drunkenness and more on the tenuous concept that adults can drink properly but youths cannot or should not. (p. 190)

In the 1930's, after prohibition was repealed, society had redefined the problem with alcohol. What had been a problem with the substance became a problem with the person. In the 1930's, along with repeal, American society saw the establishment of Alcoholics Anonymous. Before and during prohibition, alcohol was a substance breeding immorality and communism, but after repeal, in a break with temperance thought, people who were alcoholics now had a disease that could be cured with abstinence. According to Reinerman, the disease paradigm allowed alcohol consumption to be "re-normalized" in American society. (1988:111) The shift from condemnation and the call for will power and reform, to viewing the alcoholic no longer as an object of moral disapproval remained normative for the twenty years after the repeal of prohibition. Repeal made drinking acceptable and people who had "alcohol problems" were no longer punished or stigmatized. (Schneider 36) The medical, rather than moral conception of alcohol, created only victims, rather than villains. (Reinerman 95)

The shift to a disease model minimized the problems believed to be alcohol related. According to Schneider, Robin Room's "governing image" of alcohol studies

from repeal to the late seventies, explains that certain deviant people could not control their consumption of alcohol as most “normal” people could. (1984:42)

The 1970’s would be the last decade, since repeal, before this conception of alcohol would no longer be applied. The shift towards the alcoholic, or more specifically, the drunken driver, as an immoral deviant, rather than a victim of disease occurred in the decade after the legal minimum drinking age was changed to coincide with the age of majority. During the Vietnam War, the youth exercised their political muscle through protest in order to gain some liberty. Congress was pressured by the youths’ argument that if people were required to fight and die in a foreign war then they should be allowed to drink. In 1971, the 26th amendment provided eighteen year olds the right to vote consistent with the constitutional recognition of eighteen as the legal age of majority. The federal government cannot constitutionally force a legal drinking age upon the states, as anything that is not explicitly under federal jurisdiction is under the states’ jurisdiction. Therefore, from 1970 to 1975, twenty-nine states lowered their drinking age. Thirteen states kept the age at twenty-one.

1970 to 1975 was a social experiment, just as was prohibition. By 1975, evidence accumulated that the lowered drinking age resulted in increased alcohol related problems in the eighteen to twenty year old population. Statistics showed that between 1970 and 1975 when the drinking age was lowered to eighteen in some states there was an increase in alcohol related traffic fatalities and accidents among teenagers.

In the late 1970’s, American society saw a shift toward lighter drinking, as the baby-boom generation became more health conscious. (Hilton, Williams, Yi 2005) The problem of drunk driving which had been considered an unfortunate fact of modern life

became a social problem of public outrage in the 1980's. (Choose Responsibility 2008) By 1980, the disease concept no longer applied. A range of problems became alcohol related (as was the case before prohibition), most importantly, drunk driving. In 1981, a new temperance movement centered against drunk driving arose into the public policy spotlight. According to Reinerman, by 1984, the media framed the "new prohibitionists" and the "new temperance" the hot topic of the day. (1988:69) As American society continued to evolve and continued the social experiment of alcohol legislation, the protest group that had rallied for youth rights in the seventies no longer existed, leaving an opening for a modern prohibitionist movement.

The modern prohibitionist movement, led forcefully by MADD, had a swift and powerful effect on the country, the public and lawmakers. The 21 MLDA was passed in an election year, very quickly, without a significant push for alternative ideas and options to address the social problem of drunk driving. The lobbyists wanted to see change. MADD was mad; angry that their loved ones had tragically died and blamed it on the lower drinking age. The woman who started MADD, Candy Lightner, lost her daughter in a drunk driving accident. The mentality existed that people who drove drunk were immoral, evil and selfish, not regular people driving under the influence as people had been doing for decades, going unnoticed, their victims' families arguably mute. The drunk driver was no longer deemed a victim of disease, but a criminal who was no longer going to go unnoticed. Drunk driving became defined as social problem in need of great attention. Unfortunately, the process by which the 21 MLDA passed did not embrace thoughtful consideration but, instead, reflected the passionate fervor that swept from Candy Lightner through the nation.

In 1982, only fourteen states retained a 21 MLDA while the MLDA in the other thirty-six states was eighteen, nineteen or twenty. MADD emerged on the scene as a nonprofit in 1980, at the beginning of Ronald Reagan's presidency. A central pillar of Reagan's presidency was the "War on Drugs." This era was characterized by its emphasis on stricter social control. Policies of the age included greater discipline in schools, corporal punishment, adult trials for juvenile offenders, drug searches, dress codes, curfew laws, and the inhibition of the flow of birth control and abortion information to young people. In the 1980's, the notion that intervention in other people's lives was legitimate gained support. Though the traditional right despises government intervention in the economic sphere, the Reagan administration in the 1980's advanced the right's platform of intervention in the private moral sphere. (Reinarman 1988)

MADD received money from the National Highway Traffic and Safety Association (NHTSA) and from many wealthy donors who had lost loved ones in drunk driving accidents. These people were no longer mute and were making their voices heard. As a smart political move, MADD blamed the individual deviant rather than the alcohol industry. MADD accepted financial contributions from the alcohol industry, based on Lightner's argument that it is not alcohol but irresponsible users of alcohol (regardless of age) who are the problem.

In 1984, MADD had 300,000 members in forty-four states. By 1985, MADD consisted of 600,000 members and donors, 360 chapters and a ten million dollar budget. In 1978 and 1979, there were a handful of articles about MADD. According to Loue, Lloyd and O'Shea, by 1983 and 1984, there were several hundred articles about MADD

as the media found the movement “instantly graspable and without opposition.”
(2003:88)

In 1984, there was a strong endorsement for the anti-drunk driving movement in the Republican Presidential Platform. Along with allying with the alcohol industry, MADD allied itself with Christian constituencies. The National Association of Evangelicals, along with MADD, pushed for stiffer punishments for drinking and driving in the 1984 Republican Presidential Campaign Platform.

MADD’s punishment oriented efforts and its stance on less judicial discretion fit in perfectly with the war on drugs approach of the new right. The media attention on the MADD movement enveloped the country, the congress and eventually the president. On April 14, 1982, Reagan established the Presidential Commission Against Drunk Driving (PCDD), which included thirty-nine recommendations to reduce alcohol related deaths on highways. Recommendation number eight was the Minimum legal Purchasing Age compelling all states to raise the drinking age to twenty-one or lose a certain percentage of their federal highway dollars. The target was drunk driving but there was more attention paid to the drinking age, shifting focus to young people’s drinking. As reported by professor David J. Hanson Ph.D, Professor Emeritus of Sociology at the State University of New York at Potsdam, “the youngest group is...chosen as a symbolic gesture because of its political impotence and because there have been no political consequences; young people tend not to vote or otherwise hold politicians accountable for their actions.” (2007)

Congressional democrats originally proposed the 21 MLDA bill in 1985.
(Reinarman 1988) Along with MADD, supporters of the 21 MLDA bill included the

American Medical Association (AMA), Parent Teachers Association, National Council on Alcoholism, Insurance Industry lobbies, and the National Safety Council. (Reinarman 1988) Senator Frank R. Lautenberg, a democrat from New Jersey, proposed the drinking age amendment. Senator Gordon J. Humphrey, a republican from New Hampshire, proposed an opposing amendment to Lautenberg's. Humphrey recommended offering benefits to states that complied with the 21 MLDA rather than penalties to those that did not. Representative Howard offered legislation that set a nationwide speed limit of 55 mph. (Perlez 1984) Lightner soon gained the support of Representative Howard, who proposed an amendment to the transportation bill HR 5504. Representative Anderson, a democrat from California, proposed HR 4616, as a vehicle for the drinking age amendment which would allocate funds for highway and road projects. (Koroknay-Palicz 2002) 575 million dollars was added onto HR 5504. It was soon cut down to 106 million due to controversy surrounding the bill because of the pet projects that were added on.

Senator Lowell Weicker Jr., a republican from Connecticut, held up senate action because he felt that raising the drinking age was not doing enough to solve the problem of drunk driving. (Koroknay-Palicz 2002) According to Reinarman, some conservatives threatened to block the bill, stating that it was "social engineering" and "unwarranted federal intervention into states' rights." (1988:100) Opponents of the legislation maintained that any attempt to impose a drinking age was age discrimination. Koroknay-Palicz reports that senator Patrick Leahy, a democrat from Vermont asked, "Why the magic of 21... Why not 25, 30, 35, 40?" (1984:3) According to Koroknay-Palicz, those opposing the bill stated that, "the pending Lautenberg amendment... which would coerce states into establishing a twenty-one year old drinking age, should be rejected because it

would result in federal encroachment into areas that have been reserved to the states under the constitution.” (2002:3) Koroknay-Palicz recounts that though some in the senate claimed that “this practice, as embodied by this amendment, is nothing short of blackmail by the federal government,” Humphrey’s amendment (offering positive incentives) lost by a margin of 35-62 and Lautenberg’s amendment passed by a margin of 81-16. (2002:3) After the senate’s approval, the bill was sent to the House where it silently passed with no objections to the senate version of the bill. In June 1984, the House voted 297-73 in favor of the amended highway bill.

Dissenters argued that nowhere in the constitution has the power to regulate the sale and consumption of alcoholic beverages been delegated to the federal government. (Koroknay-Palicz 2002) Even President Reagan threatened to veto the bill, stating that provisions that punished states that did not comply were an infringement upon states’ rights. (Koroknay-Palicz 2002) But on June 13, 1984, Reagan, upon advisors’ pressure, decided that he could not afford to oppose a “sleeping giant” of an “apple-pie issue,” according to Reinerman (1988:100), and after two years of MADD lobbying, signed into law the National Minimum Drinking Age law. “The twenty-one year old minimum drinking age is now seen as good public policy, one you can’t lose on, and this is an election year.” (Koroknay-Palicz, 1984:10)

Interestingly, the woman who struck her daughter while driving drunk was middle-aged, not an underage drinking driver. Though Lightner’s daughter was killed by a middle aged repeat drunk driving offender, the law that MADD supported was aimed mainly at the majority of young people who were not in college, and allegedly drove drunk more often than others. (The Christian Science Monitor 2008:1) MADD’s impact

included laws that increased police ability to retrieve driving records, no more plea bargaining for DUI offenses, zero tolerance laws for drivers under twenty-one, mandatory jail sentences, higher fines, server liability laws, sobriety checkpoints, and of course the 21 MLDA. MADD, and the anti-drunk driving movement altered the alcohol arena, relatively easily, in a short period of time partly due to changes in the alcohol arena but mostly due to politics of the time.

When the 21 MLDA was challenged in Louisiana's state supreme court, in Manvel v. State of Louisiana in 1996, the court upheld the law, ruling that "statutes establishing the minimum drinking age at a higher level than the age of majority are not arbitrary because they substantially further the appropriate governmental purpose of improving highway safety, and thus are constitutional." (Manuel v. State of Louisiana 1996) In 1985, the MLDA 21 covered 30% of the U.S. sixteen to twenty population. By 1987, 90% were covered and all were covered by 1988.

By the late 1990's zero tolerance laws were established in every state. In the National Highway Systems Designation Act of 1995, congress declared that states failing to enact a zero tolerance law by 1999, at a blood alcohol content of 0.02 or lower, covering all persons under twenty-one, would lose a portion of their federal highway funds by 1998.

Evaluation of the Arguments For and Against the 21 MLDA

Pro MLDA 21

Those supporting the 21 MLDA, led by MADD, claim that the 21 MLDA works and saves lives by preventing alcohol related traffic fatalities; that drinking alcohol harms the adolescent brain; that those who postpone drinking alcohol until twenty-one have a

lower risk of alcohol problems later in life; and that a lower minimum legal drinking age would permit younger adolescents to have access to alcohol.

MADD's strongest argument in the mid 1980's was based on statistics which showed that alcohol related traffic fatalities were increasing in states where the MLDA was 18, and its strongest argument today is that the decrease of alcohol related traffic fatalities has been the direct result of the 21 MLDA. According to the National Institute of Health (NIH) statistics for alcohol related traffic fatalities from 1982 to 2004, a steady decline appears among the sixteen to twenty age group. NIH reports that in 1982, there were 5,244 alcohol related traffic fatalities among the age group and 2,115 alcohol related traffic fatalities in 2004. The National Institute of Alcohol and Alcohol Abuse, (NIAAA) an equally credible source, reports that in 1982 there were 3,603 alcohol-related traffic fatalities and 1,504 in 2003.

A 1987 study, by the United States General Accounting Office (USGAO) which reviewed and synthesized results from all forty-nine states that had opted for 21 MLDA by 1986 found that,

Raising the drinking age has a direct effect on reducing alcohol related traffic accidents among youth affected by the laws on average across the state and the 21 MLDA results in decline in alcohol consumption and in driving after drinking for the age group affected by the law. (U.S. Department of Transportation n.d.: 2)

A 1991 study used the Financial Accounting Research System (FARS) and Monitoring the Future data to investigate how the 21 MLDA affects youth drinking and youth drinking and driving. The study compared states with the 21 MLDA to those with a lower MLDA. The study found that high school seniors drank more in states with a lower MLDA as compared to those states with a 21 MLDA.

The NIH supports the U.S. Department of Transportation's estimate that 21 MLDA prevents one thousand traffic deaths each year. (National Institutes of Health n.d.):

- 1) The National Highway Traffic Safety Association (NHTSA) found that drunk drivers under twenty-one involved in fatal crashes decreased 61% from 1982 to 1998 and that 22,798 lives had been saved from 1975 to 2003. (Belluck 2005) The NIAAA reports that in 1979, there were 4,510 alcohol related traffic fatalities in the sixteen to twenty age group. In 1987, there were 3,130. In 1993, there were 1,728.

In a 2002 analyses of high quality studies on the effects of the 21 MLDA, a University of Minnesota research team found that all but one study showed that the 21 MLDA resulted in lower rates of alcohol consumption and traffic fatalities. (Roan 2008)

The decline in alcohol related traffic fatalities and accidents is evident and cannot be disputed. The questions to be answered are whether the decline is attributed primarily to the 21 MLDA or to other factors and whether any harm caused by the 21 MLDA is outweighed by its benefits.

Along with the assertion that the decline in alcohol related traffic fatalities in the youth population is a direct result of the 21 MLDA, MADD, with the support of health agencies such as NIH, report that one is four times more likely to develop alcohol dependence later in life if drinking alcohol begins before age fifteen as opposed to twenty-one. (National Institute of Health n.d.) According to the AMA, the hippocampus handles memory and learning and is the area of the brain that suffers the worst from alcohol related damage in adolescents. The AMA claims that those drinking more and for longer have smaller hippocampus by ten percent. (Choose Responsibility 2008) In addition, the American Medical Association, in a 2002 report, cites numerous studies

concluding that alcohol use during adolescence and young adulthood causes damage to memory and learning capabilities. (Roan 2008) Some health agencies claim that of those who begin drinking at eighteen, 16.6% are classified with alcohol dependence and 7.8 % with alcohol abuse. If one waits until twenty-one before taking a drink, these risks decrease by more than 15%. In agreement, a study conducted in 2006 from the Archives of Pediatrics and Adolescent Medicine, found that teens who began drinking before age fourteen had a lifetime risk of alcohol dependence of 47% compared with 9% for those who began drinking at age twenty-one. (Roan 2008) MADD proponents cite studies that show that while some youth may consume alcohol, they consume less and suffer fewer secondary effects when the MLDA is twenty-one.

Anti MLDA 21

Those who wish to change the law believe that the 21 MLDA has created an environment of underage binge drinking; that though alcohol related traffic fatalities have decreased gradually over the years, alcohol related fatalities off the roads have steadily increased; that those young men and women who do drink, do so out of social rebellion, leading to alcohol problems; that factors other than the 21 MLDA such as safer cars and seat belts may be the primary reason for the decline in alcohol related traffic fatalities and accidents; that evidence shows that there is a large proportion of high school aged youth who drink despite the law; that with a lower drinking age as well as youth alcohol education, alcohol consumption would be conducted in a healthier and safer environment; that the 21 MLDA is breeding a generation of youth that disregard, hold contempt for, and devalue the law; and that drunk driving has increased in the youth population under twenty-one due to the increase in binge drinking. Choose Responsibility, an organization

against the 21 MLDA, cites NIAAA statistics showing that starting in 1993 alcohol related traffic fatalities have leveled off at about 1000 per year among the sixteen to twenty population. In 1993 the number of alcohol related traffic fatalities for the age group was 1,830 and in 2004 it was 1,820 with very little fluctuation in the years between. (n.d.)

Choose Responsibility claims that the argument that raising the drinking age has been primarily responsible for the decline in traffic fatalities is underwhelming and cites sociologists and research claiming that the decline as a direct result of the 21 MLDA is impossible to prove. Choose Responsibility references statistics showing that the decline in alcohol related traffic fatalities went down in both the twenty-one to twenty-nine year old population as well as the sixteen to twenty population. According to NIAAA data, in 1982 the number of alcohol related traffic fatalities for drivers twenty-one and older was 17,783 and in 2004 it was 12,269. Choose Responsibility argues that since both age groups, one directly affected by the 21 MLDA and the other not affected, show a decline in alcohol related traffic fatalities, the decline must have been caused by other factors. In support of this claim, the NHTSA reports that safety belts and airbags combined to save 206,287 lives between 1975 and 2004. (Choose Responsibility 2008)

Eleven states have had the 21 MLDA law, consistently, since the repeal of prohibition. These states also saw substantial reductions in youth drinking and driving after the 21 MLDA law was established in the 1980's. Choose Responsibility uses this as additional evidence that other factors have contributed to the decline in alcohol related traffic fatalities, and perhaps these other factors were primary reasons for the decline, separate from the 21 MLDA law.

Those who question the effectiveness of the 21 MLDA believe that educational efforts should promote healthy alcohol consumption, since statistics show that youth continue to drink despite the law. They suggest that the status quo is promoting what we, as a country, fear rather than addressing the problem of drunk driving. They claim that in an attempt to secure the safety of the youth and address the problem of drunk driving through criminalization we have forced a culture into dangerous and clandestine drinking behavior.

It is difficult to deny that a large proportion of youth continue to consume alcohol, despite the law. Statistics show that 55% of fifteen to seventeen year olds are current users of alcohol, 92% of high school seniors consumed alcohol at some point, 64% are current drinkers, and 35% are intoxicated regularly, drinking five or more drinks in a sitting. (Wagenaar and Wolfson 1994))

Choose Responsibility claims that the 21 MLDA has created an environment conducive to dangerous binge drinking, meaning consumption of unhealthy quantities of liquor and beer in a short period of time. The five/four definition of binge drinking prevails as the most used by researchers from health agencies such as NIAAA. The five/four definition is five drinks for a man and four for a woman in one sitting.

The NIAAA claims that there are one million high school students nationwide who are defined as frequent binge drinkers. Choose Responsibility promotes the public's awareness of statistics showing that eight out of ten college students drink and four in ten are binge drinkers. (Sack 2008) According to recent research from 1982 to 1987, 46% of college students reported "vomiting after drinking," and that this jumped to more than 50% after 1987 as did "cutting class after drinking," "missing class because of

hangover,” “getting lower grades because of drinking,” and “been in fight after drinking,” reports Clifford Eng. (1999:2) College alcohol research statistics show that one fifth of all male freshmen say they regularly drink more than ten drinks at a time. (Ewers 2008) Binge drinking is what college presidents have noticed to be dangerous, underground, fast consumption of alcohol, especially hard liquor. Choose Responsibility claims that students drink heavily in private at the beginning of the evening, rather than gradually in public throughout the evening, a direct result of the 21 MLDA. (Hanson 2007)

From the perspective of MADD, as modern prohibitionists, alcohol is the cause of all drinking problems. Supporters of the 21 MLDA argue that the availability of alcohol determines the extent to which it will be consumed. This logic supports the idea that it is the quantity of alcohol consumed, rather than the speed, purpose, or environment that determines the extent of drinking problems.

From a social context perspective, in direct opposition to MADD and its proponents, Choose Responsibility claims that the problem with alcohol consumption is not availability but the speed and environment in which one drinks. Choose Responsibility asserts that, as a result of the 21 MLDA, college-age students are drinking faster to reduce risk of being caught and drinking to intoxication whenever an opportunity arises. (Hanson 2007) The Substance Abuse and Mental Health Administration (SAMHSA), a division of the U.S. department of Health and Human Services, reveals that 1/5 of teenagers have experienced black out spells. (Hanson 2007)

An advocate of Choose Responsibility and an Amethyst Initiative signatory, President Liebowitz of Middlebury college notes the culture change: “Before the age was

increased we had a very different environment...you had kids drinking beer, but you didn't have gross alcohol poisoning and binge drinking," reports Belluck. (2005:3)

Choose Responsibility focuses its argument for the safety of college students and the negative repercussions of the 21 MLDA on the claim that college students die of alcohol related fatalities off the highway more often than they do on the highway. A recent government study showed that 1,700 college students die each year of alcohol related incidents, 599,000 are injured and 97,000 are victims of alcohol-fueled sexual assault. (Sack 2008) According to NIAAA data, used by Choose Responsibility, of the five thousand Americans under twenty-one who die of alcohol related fatalities annually, only 1900 are drunk driving accidents; 3,100 die off the highways. John McCardell, the president of Choose Responsibility, states that "drunk teens behind the wheel are less of a problem than those drinking in private." (2008:2)

A 1995 study found that zero tolerance laws reduce youth drinking and driving crashes. Twelve states lowered their Blood Alcohol Content (BAC) limit for some young drivers before 1991. The study found a 22% reduction in single nighttime alcohol related traffic fatalities in states with zero tolerance law. (U.S. Department of Transportation n.d.)

Statistics claiming the number of alcohol related fatalities in young people may be overly attributed to the use of alcohol, where alcohol as well as narcotics may be involved. According to the NHTSA, 18 to 20 percent of injured drivers are using drugs. It proposes that while drinking is on the decline, drugging may be on the increase. (Hanson 2008) If people are prohibited from drinking, they may rely on narcotics instead of

alcohol. Some college students admit that it may be easier to hide marijuana in their dorm rooms than a six-pack of beer.

Sociologists

Sociological researchers are joining this debate along with those with vested interests, such as Choose Responsibility and MADD. Professor of Sociology, Dr. David J. Hanson, manages a website devoted to telling the truth about the realities of alcohol, its use, effects, and updates on the current debate. Its position is that both Choose Responsibility and MADD are inaccurately addressing the problem. This website claims that Choose Responsibility's position is exaggerating the binge drinking problem and that MADD incorrectly promotes abstinence over moderate alcohol consumption education.

Dr. Wagenaar, a social epidemiologist with expertise in evaluation of public policy changes, weighs in on the effects of the 21 MLDA and alcohol policy in the U.S. (Wagenaar 1981) He, in accord with Dr. Hanson, brings attention to the headlines paid to alcohol related tragedies among youth on college campuses. With the influx of attention on the eighteen to twenty-five age group in the news in the 1980's and today, he claims that we must ask whether they are really at higher risk.

In addition to Dr. Hanson and Dr. Wagenaar, other sociologists and researchers separating themselves from claims-makers' argue that the 21 MLDA is unenforceable. There are 18 million sixteen to twenty year olds in the U.S. Based on a survey of 956 students nationwide, two thirds of seventh to twelfth graders who drink alcohol reportedly purchased it on their own by means of false identification, buying from stores that are known to sell to underage men and women, and from young clerks. (Wagenaar 1994) Police write endless citations in an almost futile effort to reduce underage

drinking. These researchers question the effectiveness of increasing youth arrests in an attempt to deter youth from drinking. Statistics show that only two out of every one hundred thousand occasions of youth drinking result in an arrest. (Wagenaar 1994))

It is reported that law enforcement officers often perceive a lack of support from their communities and from their own agencies for increased efforts to enforce the minimum drinking age. (Wagenaar 1994) Officers reported that MLDA enforcement is not a community priority; there is a general acceptance of youth drinking in their communities. One study found that underage youth were refused alcohol sales in only one-third of one hundred establishments tested at eight sites around the U.S. (Wagenaar 1994) When youth were arrested, officers felt that penalties were light and applied unevenly. Officers reported that drinking and driving by youth had decreased in their communities over the past decade but that drinking by youth had not. (U.S. Department of Transportation n.d.)

Conclusion

Over the past thirty years, our nation has addressed alcohol and other problems through criminalization rather than education. Rather than educating our youth about alcohol and its use, allowing our youth to experiment in safe environments, demystifying its effects, and advocating moderate, healthy consumption, we have criminalized alcohol use and made the problems worse. The forbidden fruit theory is evident in this situation. If we tell our youth that they are not responsible or smart enough to consume alcohol we are encouraging unhealthy consumption of alcohol.

Over the thirty years our society has also become more health conscious and more concerned with personal safety. For instance, most women no longer smoke or drink

alcohol when they are pregnant, all cars are equipped with seat belts and air bags, and people avoid eating too much tuna due to high levels of mercury. The designated driver is a new phenomenon. People do not drink as they did thirty years ago as the environment of our culture has changed. Young people drink in a different way today than they did before the passage of the 21 MLDA. The solutions to today's drinking problems must reflect the changes in society.

The problems of drunk driving as well as unhealthy consumption must be addressed. They are equally important: the life of a young man or woman is not better lost in a drunk driving accident than from alcohol poisoning after an episode of binge drinking. Both issues are and will be affected by the age at which the MLDA is set.

Claims-makers such as MADD have claimed that twenty-one should be the MLDA because it works and saves lives. Claims-makers such as Choose Responsibility claim that eighteen should be the MLDA because it will discourage unhealthy drinking behavior and therefore save lives.

Some sociologists argue that the claims-makers on both sides of the debate are overstating their positions and missing the point. All participants on both sides of the debate use statistics (sometimes the same ones) to support their positions.

Statistics show that alcohol related traffic fatalities have decreased, but is that the result of the 21 MLDA? Will lowering the 21 MLDA reduce binge drinking without increasing alcohol related fatalities? Statistics cannot answer the questions.

What does appear clear is that if we look at the problems in a social context, the alcohol related problems of college age men and women are serious and getting worse. We need to try a new policy. We need a change. I believe that the following changes will

reduce the tragedies caused by drunk driving among young people while encouraging young people to drink responsibly and safely: 1) eighteen MLDA 2) graduated licensing system, like Drivers Ed. 3) increased education about moderate and healthy use of alcohol 4) zero tolerance laws for eighteen to twenty-one year olds and 5) mandatory interlock devices for eighteen to twenty-one year olds.

As the saying goes, “you can’t stop the rain.” You cannot change human nature. Prohibition has not and will not stop eighteen to twenty-one year olds from drinking alcohol. Legislation addressing problems caused by drinking must reflect reality. If a comprehensive legislation package as suggested here is instituted a safer and healthier environment will result. We need laws that will give people the chance to be as safe as possible in what they do. We can rely on technology, such as breathalyzer ignition locks in every car and alcohol education instituted at an early age, from the home, to the school, and eventually as an education course much like Drivers Ed. We may be surprised at the way our society evolves.

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