

The Gender Gap in Alcohol Deaths is Much Larger in Some States than Others

Erin Bisesti

Men die at younger ages than women, due in large part to behavioral health factors including diet, tobacco use, and drug and alcohol use.¹ In 2017, alcohol was the third leading preventable cause of death in the U.S., resulting in 88,000 deaths.² Rates of alcohol-related deaths are highest among males and ages 45-64 (due largely to alcoholic liver disease and cirrhosis of the liver), but the largest annual increase from 1999-2017 was among both males and females ages 25-34.³

This brief presents state-level differences in alcohol-related death rates for working-age (ages 25-64) males and females for 2013-2017. The working-age population is the age group where alcohol-related mortality rates are highest and growing fastest. Findings show that the five states with the highest alcohol-related death among working-age males were: New Mexico, Wyoming, South Dakota, Arizona, and Alaska. For working-age females, the top five states were: Alaska, New Mexico, South Dakota, Wyoming, and Montana (see Figures 1a and 1b). Rates are lowest among males and females in Maryland, Mississippi, and Virginia.

Men Have Higher Alcohol-Related Mortality Rates than Women in every U.S. State, but Gender Gaps are Largest in the South and West

In every state, men have higher alcohol-related deaths rates than women (See Figure 2). However, the gender difference varies by region and state. Absolute differences in alcohol-related mortality rates between men and women are higher in western and southern states than in northeastern and Midwestern states. In New Mexico - the state with the largest gender gap - the rate is 19.6 for women and 41.7 per 100,000 for men. This amounts to a difference of 22.1 deaths per 100,000. Other states with the largest gender differences include: Arizona, Oklahoma, and California. In contrast, Alaska has the smallest gender gap in mortality, due to relatively high rates among both men and women. Other states with the smallest gender gaps include Pennsylvania, Maryland, and Hawaii.

These findings suggest that there may be something unique about the political, social, and/or economic environments of the Southern and Western regions. Deaths from drugs, alcohol, and suicide have been on the rise in the Western region of the US since the early 2000s.¹ One possible explanation for these mortality differences is social isolation. Social isolation is associated with an increased risk for substance-related mortality.⁴ The states with the highest alcohol-related mortality rates (e.g., Alaska) have very low population density. In addition, the states with some of the highest mortality rates for men and women have comparatively large American Indian/Alaska Native population (e.g., New Mexico, South

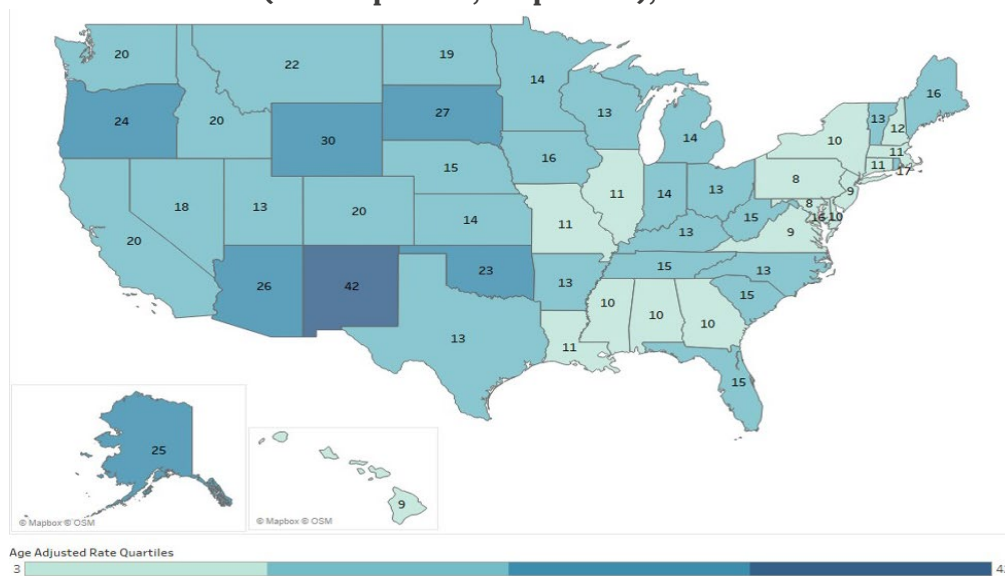
KEY FINDINGS

- Men have higher alcohol-related death rates than women in every U.S. state.
- In 2013-17, alcohol-related death rates among working-aged men were highest in New Mexico, Wyoming, and South Dakota. Among women, rates were highest in Alaska, New Mexico, and South Dakota.
- The gender gap in alcohol-related death rates is highest in states in the western and southern regions of the U.S.

Dakota, and Wyoming). Prior research has found a significantly higher alcohol-related mortality rate for this group in comparison to other racial-ethnic groups in the United States.^{3,5} This pattern of increased mortality may be due, in part, to the trauma, violence, and discrimination inflicted upon the American Indian/Alaska Native population in the U.S.

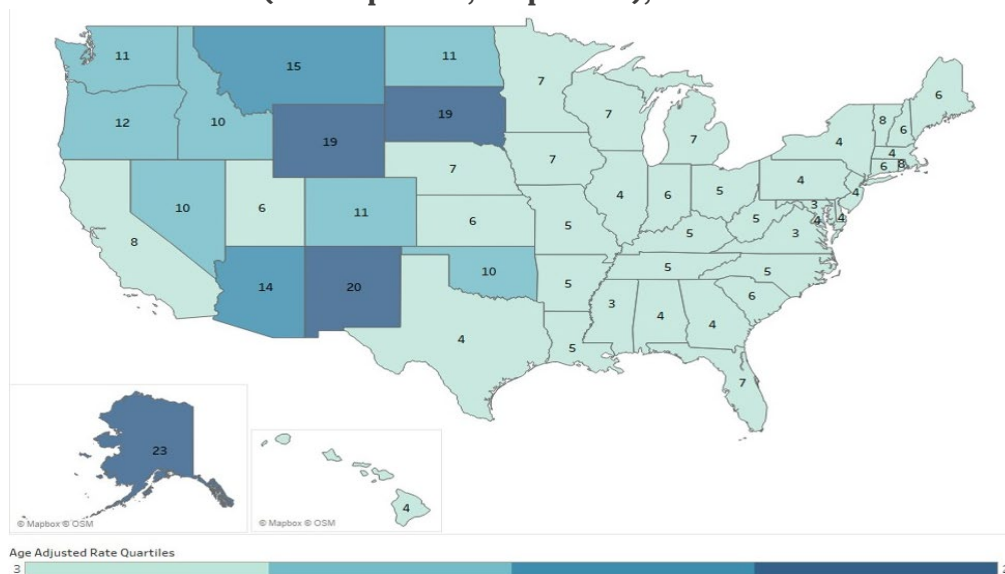
Economic distress may be another key factor in explaining why some places are more vulnerable to alcohol-related causes of death.⁶ Studies have found that states with higher alcohol-related deaths have higher rates of poverty rates, unemployment, and stagnant incomes.⁷ Men in these states may experience more economic distress as a result of substantial blue-collar job loss and use alcohol as a coping mechanism. The loss of jobs may be particularly difficult for men due to the pervasive nature of gender roles that expect men to be breadwinners and heads of household.

Figure 1a. Working-Age (25-64) Male Alcohol-Related Mortality Rate (Deaths per 100,000 persons), 2013-17

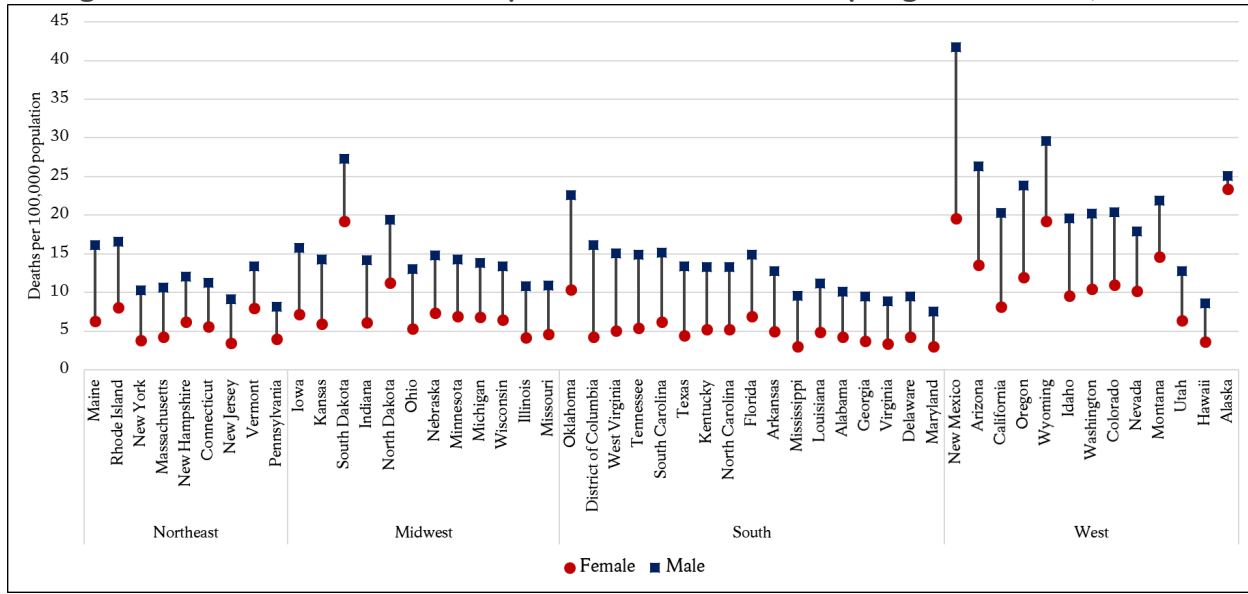


Data Source: CDC WONDER; Map: Erin Bisesti

Figure 1b. Working-Age (25-64) Female Alcohol-Related Mortality Rate (deaths per 100,000 persons), 2013-17



Data Source: CDC WONDER; Map: Erin Bisesti

Figure 2. Alcohol-Related Mortality for Males and Females by Region and State, 2013-17

Note: Rates are age-adjusted; Data Source: CDC WONDER; Chart: Erin Bisesti

Recommendations for Policy and/or Practice

Men have higher rates of alcohol-related mortality than women, but rates among women have been increasing rapidly, especially since the early 2010s.³ Overall rates and gender differences in alcohol-related mortality vary substantially across U.S. states.

Federal policies that pertain to alcohol consumption are limited to the distribution and consumption of alcohol (e.g., where alcohol can be sold and who it can be sold to) across the United States. However, states also create and enforce their own alcohol-related policies. For example, in Hawaii (where alcohol-related mortality rates are low), the penalties for underage drinking are severe, whereas in New Mexico (where alcohol-related mortality rates are much higher), alcohol policies are far weaker.⁸ State tax policies have a direct impact on health and mortality. For example, prior research has found that states with higher tobacco taxes have lower rates of smoking-related mortality.⁹ While states can make their own general sales tax on alcohol, excise taxes are paid at the wholesale level and incorporated into retail prices. Increasing excise taxes at the federal level and general sales tax at the state level could help reduce alcohol-related mortality.

Researchers have identified multiple social and economic factors related to recent increases in mortality from the so-called “deaths of despair” - drug poisonings, suicide, and alcohol-induced causes.^{6,7,10} States that have experienced major losses in manufacturing jobs, a contraction of the middle class, and stagnant wages have experienced larger increases in mortality rates from these and other causes.⁷ Accordingly, policies addressing the underlying social and economic causes of high rates of alcohol mortality will be essential for reducing these deaths.

Data and Methods

Mortality data came from the U.S. Center for Disease Control and Prevention Underlying Cause of Death Database pooled for 2013-2017. Rates represent the number of deaths per 100,000 population and are age-adjusted. Deaths are categorized based on ICD-10 codes provided by CDC Wonder. ICD-10 codes for alcoholic liver disease and other alcohol-induced causes were utilized. The population includes males and females of all race/ethnicities ages 25-64 ($N= 842,726,148$).

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