

Youth Binge Drinking in Alberta

A Report by Alberta's Chief Medical Officer of Health
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Issue

Heavy episodic drinking, also known as “binge drinking,” is a pattern of alcohol use that often leads to serious health and social issues. In 2002, the total cost of alcohol misuse in Alberta was estimated at \$1.6 billion, and included \$855 million in lost productivity, \$407 million in direct healthcare costs and \$275 million in law enforcement costs.¹ The significant costs of alcohol misuse make it a priority issue, particularly considering the number of young Albertans engaging in binge drinking, which is a harmful pattern of alcohol consumption.

According to the 2008 Alberta Youth Experience Survey, binge drinking among 12-19 year olds increased from 13% in 2002 to 19% in 2008.⁵ Achieving reductions in youth binge drinking has been difficult due to the many influencing factors such as parental supervision, peer groups, advertising and cultural norms. This report will explore binge drinking in Alberta by identifying who is most at risk, highlighting the social and health problems caused by binge drinking and discussing possible reduction strategies.

What is binge drinking?

Currently, there is no universally accepted definition of “binge drinking.” However, for the purpose of this report, we will use the Centre for Addiction and Mental Health’s definition of “binge drinking” as consuming five or more drinks once on one occasion.² Binge drinking is a pattern of heavy episodic drinking that is often characterized by drinking for the sole purpose of becoming intoxicated. Binge drinking is harmful as it can lead to a number of negative social and health effects including an increased risk for injuries and chronic health problems.²

Who is at risk?

The 2011 Canadian Community Health Survey indicates that youth aged 18-24 are most likely to participate in heavy drinking. Approximately 35% of Albertans aged 18-24 engaged in binge drinking during the past month.³ Among those in the under 25 age group, undergraduate college and university students are the most likely to report binge drinking.⁴ A 2011 survey found that 32% of University of Alberta students reported binge drinking at least once per month in the previous year.¹¹

Despite the high number of young adults who binge drink, young Albertans may perceive peer drinking as being even higher. Many young adults overestimate how often and how much their peers drink, and this false perception can actually prompt individuals to consume more alcohol.⁴ Studies show that youth are swayed by their misperception of peer drinking culture and then behave accordingly.⁴ For example, 87% of Canadian undergraduate students overestimate the quantity and frequency of alcohol that their peers consume, and admit it influences their consumption.⁴

A high number of underage youth also participate in binge drinking. The 2008 Alberta Youth Experience Survey found that 19% of all surveyed students and 53% of students who were current drinkers reported binge drinking in the month preceding the survey.⁵ The survey also found that male drinkers were more likely than female drinkers to report binge drinking (82% vs. 77%).⁵ Early binge drinking can be problematic as youth can develop a dependence on alcohol and are more vulnerable to violence and injury as a result of intoxication.^{6,16}

Why should the Government of Alberta be concerned about binge drinking?

Those who engage in binge drinking put themselves at risk for short-term and long-term consequences. These consequences can include significant negative impacts on individual health and social relationships.

The short-term health effects associated with binge drinking include physical harm and damage to internal organs. Consuming an excessive amount of alcohol can lead to gastrointestinal bleeding, alcohol poisoning, abnormal heart functioning, stroke and respiratory problems.⁸ Binge drinking also increases the risk of physical harm from violence, vehicle collisions, alcohol toxicity, injury and/or death.⁸ In 2009, 34% of trauma patients in Alberta hospitals tested positive for alcohol, with the average blood alcohol level being twice the legal limit.⁹ The most common mechanisms for alcohol related injuries were vehicle collisions, assaults and falls.⁹ Binge drinking also increases the risk of accidental death; of all accidental deaths in Alberta that were tested for alcohol in 2009, 82% were well above the legal limit.⁹

Women who binge drink also have increased risks of gender-based physical harm such as partner violence, involvement in unsafe or unwanted sexual practices, increased risk of sexually transmitted infections and increased chances of becoming pregnant.⁸ Binge drinking can be a contributing factor in sexual assaults. In 2010, the University of Alberta's Sexual Assault Centre found that 18% of individuals disclosed that they had been intoxicated at the time of their assault and in 12% of cases, the perpetrator was intoxicated at the time of the assault.²¹

The long-term effects of binge drinking can lead to a number of serious physical and mental problems. Repeated episodes of binge drinking can cause chronic health issues including cirrhosis of the liver, cancer, diabetes, obesity and pancreatitis.⁸ Long-term binge drinking can also contribute to mental illness, alcohol dependence, depression and even suicide.⁸ Over the long-term, research also demonstrates that university students who engage in binge drinking are more likely to occupy less prestigious occupations, earn lower incomes and suffer from more psychiatric problems than their non binge drinking counterparts.⁴

As noted above, the consequences of binge drinking are considerable, and this danger is significantly increased for adolescents.⁶ Over the long-term, adolescents who binge drink put themselves at risk for brain damage that can permanently decrease their impulse control and alter their behaviour.⁶ Underage youth are also more likely to be unintentionally injured while under the effects of alcohol through violence or vehicle collisions.¹⁶ Early alcohol use can also increase the risk of social problems and negative behaviours, such as employment problems, delinquency, violence, school failure and substance abuse.⁶

What Can the Government of Alberta do?

The Alberta Government will use best practice and evidence-based research to inform actions to reduce binge drinking. Current best practices and research supports actions promoting a culture of moderation; implementing brief interventions for at-risk individuals; developing municipal and community partnerships to promote sensible drinking; and increasing alcohol taxation.

Brief Interventions

During the 2009-2010 school year, the University of Alberta implemented “Check Yourself,” a brief intervention program to reduce binge drinking among students. This campaign consisted of a variety of advertising efforts encouraging students to access an Internet-based self-help tool.¹¹ The “Check Yourself” campaign used social comparison to positively influence youth and modelled lower levels of alcohol use to gain social acceptance in the relevant peer group.

“Check Yourself” provides feedback to users about their alcohol consumption to correct misperceptions about alcohol use. Interim evaluation studies have demonstrated that the tool effectively reduced alcohol consumption among binge drinkers.²¹ “Check Yourself” was modelled after a similar web-based personalized assessment feedback program that was able to achieve a 30% reduction in typical weekly drinking among problem drinkers who received web-based personalized assessment feedback.¹⁸ Brief interventions provide an opportunity for individuals to receive personalized and private information on their drinking habits and correct their misperceptions of peer drinking.

Municipal Partnerships

Both the Australian and UK governments reduced binge drinking by working with municipal partners to develop stricter legislation. To reduce alcohol-related harm caused by binge drinking in public, the Australian government worked with local governments to limit the availability of alcohol.¹³ For example, alcohol was limited at public sporting events and stricter serving laws were implemented, reducing alcohol related harm by 20%.¹⁵

As a part of the National Alcohol Strategy, the U.K. worked with municipal partners and community groups to promote sensible drinking, inform parents on the dangers of youth binge drinking and develop stricter legislation. The U.K. also introduced labels similar to cigarette warnings that set recommendations for consumption levels and demonstrate negative health effects of alcohol.¹⁰ In 2005, the U.K. implemented the “Licensing Act” to reduce binge drinking by establishing community partnerships. Partnerships that were most successful responded to individual local problems, such as giving local police and local residents the power to call for a review of liquor licenses of premises that were causing problems.¹⁰ There has been evidence that municipal partnerships created through the Licensing Act reduced alcohol consumption. Self-reported data collected on alcohol consumption in the U.K. indicated a 6% decrease in the average number of units of alcohol consumed per week between 2005 and 2006.²³

Increased Alcohol Taxation/ Mark-Ups

An effective method for reducing alcohol consumption in the population is through taxation or other pricing strategies on beverage alcohol.¹⁴ Numerous studies indicate that increased price leads to decreased consumption of alcohol.¹⁴ Increased alcohol taxation and alcohol pricing strategies have been implemented by Switzerland, U.S., U.K., Scotland and the Nordic European countries to reduce excessive drinking.¹⁵

Alcohol taxation or mark-ups can be used to successfully reduce underage drinking because youth, who typically have lower incomes, are more sensitive to higher prices.¹⁵ In addition to reducing youth drinking, increased alcohol taxation is also associated with reduced alcohol-related motor vehicle crashes, reduced violence and reduced health problems.¹⁵

Volumetric taxation is a form of pricing policy that taxes alcohol based on the percent of ethyl alcohol. Nordic countries that have used volumetric taxation saw their populations eventually change from spirit consumption to beer consumption over the latter half of the 20th century.¹⁴ Volumetric taxation is popular because it creates an incentive to choose lower percent beverages like beer and wine over spirits such as whiskey and vodka. A 2010 survey in British Columbia found that heavy drinkers favour cheaper alcohol, so volumetric pricing could be used to shift heavy drinkers to cheaper alcohol with less percent alcohol content.²⁴

The Government of Alberta recognizes the serious nature of binge drinking and has taken action to reduce harm. For example, recommendations in the *Alberta Alcohol Strategy* support priorities to improve Albertans' quality of life and to provide safe communities. The Alberta Gaming and Liquor Commission has regulated minimum prices on alcoholic drinks in bars, eliminated cheap drink specials, regulated the duration of "happy hours" and limited the number of drinks people can order at last call. Alberta supports the Canadian Low-Risk Alcohol Drinking Guidelines and has implemented new legislation that has increased penalties for driving with a blood alcohol level of .05 percent.

Moving Forward: Recommendations for Action

Alberta continues to make strides in reducing alcohol-related harm. However, there is still much work to be done to achieve reductions in underage and young adult binge drinking. In order to effectively address and reduce binge drinking in Alberta, the Chief Medical Officer proposes the following recommendations:

1. Work with Alberta Health Services (AHS) to develop and implement alcohol screening and brief interventions in primary care networks and family care clinics.

There are serious short-term and long-term health issues associated with hazardous and harmful alcohol consumption. Younger people are often unaware of the serious health issues and heightened risk of violence or injuries resulting from binge drinking.⁸ Many people assume that binge drinking is normal and harmless in adolescence despite evidence to the contrary showing dangerous life-long effects.¹⁹ It is important that interventions are delivered before drinking habits become ingrained as problem drinking in adolescence predicts problem drinking in adulthood.¹²

Physician and health practitioner intervention could assist in the identification and treatment of those at risk of developing or demonstrating problems associated with binge drinking. There is a need for pediatricians to communicate the potential short and long-term risks of adolescent binge drinking to their patients and their parents.

2. Work with the University of Alberta and industry partners to expand the “Check Yourself” campaign:

The “Check Yourself” program was implemented at the beginning of the 2009-2010 academic year at the University of Alberta. The program is a brief and easily accessible method of helping individuals who are unwilling or unable to seek traditional treatment.²¹ The intervention will help to move the attitudes of young adults towards a culture of moderation by providing information on when, where, and how to drink. It requires understanding of the different risks involved in drinking – both acute injuries and chronic diseases – and learning how to minimize these risks.

3. Facilitate collaboration between the Alberta Gaming and Liquor Commission (AGLC), Alberta Health Services and community groups to address concerns related to binge drinking. Partnerships with municipal groups and community organizations are crucial as alcohol reduction programs are more successful when they are specific to community needs and account for the diversity of norms and culture in target groups.¹⁷ Bylaws and enforcement through enhanced municipal partnerships was strongly supported by ministers, mayors, city councillors, city managers and school board members in a 2010 survey of key decision makers.²⁰

Alberta Health can partner with AGLC and AHS to support municipal groups and community organizations to provide information to parents on underage drinking and the risks inherent in this behaviour. Research demonstrates that parental supports are important factors in preventing alcohol abuse among adolescents.^{16,17} Providing information to parents regarding drinking will help to address attitudes that teen drinking is normal and can be harmless if supervised. Parents should be aware that even if supervised, drinking carries health risks and dangers for adolescents. Further, parents or guardians can be held liable for any injuries/deaths that may occur as a result of any known underage drinking taking place in their homes, even if the accident or incident occurs after the child has left the party.²²

Alberta Health will support municipal interventions and strategies such as law enforcement initiatives, outlet zoning, regulation of hours and responsible serving practices that have been shown to have an impact on heavy drinking. Enhanced enforcement efforts in licensed premises such as monitoring sales at last call can reduce alcohol consumption and alcohol-related violence.⁸

4. Work with the AGLC to promote moderate drinking and support a liquor mark-up review. Increasing liquor mark-ups to reduce alcohol abuse is supported by 53% of Alberta decision makers, such as government ministers, mayors, city councillors, city managers and school board members as indicated by a 2010 survey.²⁰ The Office of the Chief Medical Officer of Health will provide support to the AGLC as needed during their liquor mark up review. OCMOH may also propose that a review be conducted to determine if additional revenue generated by a mark-up increase could be provided to increase funding for prevention and treatment programs.

Conclusion

The above recommendations align with the *Alberta Alcohol Strategy* and the *National Alcohol Strategy* by focusing on healthy attitudes toward alcohol use, providing treatment services, reducing alcohol consumption by adolescent Albertans and developing context specific policies and regulations. These recommendations also follow the strategic direction of *Creating Connections, Alberta's Addiction and Mental Health Strategy and Action Plan 2011-2016* by fostering the development of healthy children; implementing effective strategies at provincial, regional and local levels; and aligning policy, regulations and legislation to improve public health and awareness. By focusing on the individual and social aspects that influence drinking, the Government of Alberta can reduce the health and social harm associated with youth binge drinking and create a safer and healthier Alberta.

End Notes

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Related Government Documents:

Alberta Alcohol Strategy http://aglc.ca/pdf/social_responsibility/AAS_Full.pdf

Reducing Alcohol-Related Harm in Canada: Towards a Culture of Moderation - Recommendations for a National Alcohol Strategy
www.ccsa.ca/2007%20CCSA%20Documents/ccsa-023876-2007.pdf

Creating Connections: Alberta’s Addiction and Mental Health Strategy and Action Plan 2011-2016
www.health.alberta.ca/documents/Creating-Connections-2011-ActionPlan.pdf