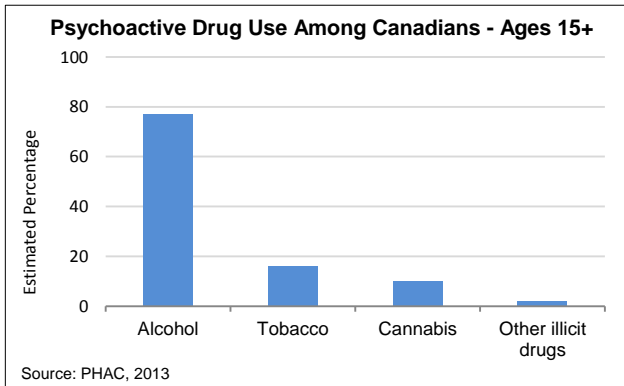


Harmful Alcohol Use in Halton

Alcohol Consumption

Alcohol is the most used drug among Canadians, aside from caffeine.



In Halton Region, 85% of adults drink alcohol compared to 78% of Ontarians. Halton adults also consume alcohol above [Canada's Low-Risk Alcohol Drinking Guidelines \(LRADG\)](#) at a rate (46%) that is significantly higher than the Ontario average (42%). This means that about half of Halton's adult residents consume alcohol in way that puts them at higher risk for significant health and social harms.

Halton compares favourably to Ontario across many different health indicators, such as physical activity and teen pregnancy. However, alcohol consumption is one of the few health indicators where Halton rates are less favorable than the provincial average.

Younger adults (20-24) in Halton report drinking alcohol above the recommended limits in the LRADG at rates (78%) higher than any other age group. As age increased, the percentage of adults who exceeded the LRADG decreased. In 2012/13, 34% of Grade 10 students in Halton reported having at least one episode of binge drinking (4 or more drinks for a female and 5 or more drinks for a male on any one occasion) in the past year.

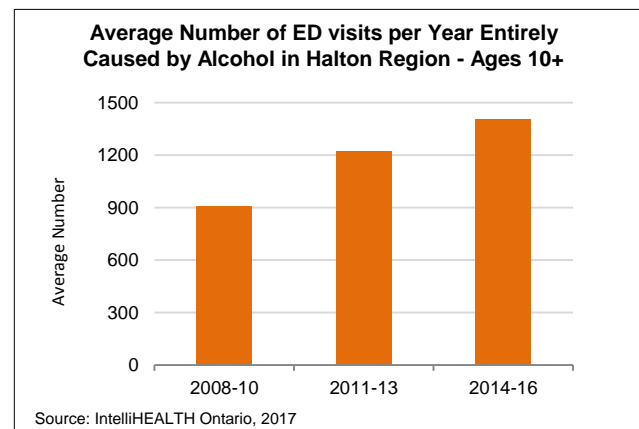
Alcohol Harms

Alcohol is in the top five risk factors for death and disease in the world and is the top risk factor for Canadians aged 15-29. Evidence has found that alcohol is a causal factor in over 200 disease and injury conditions.

Short Term Impacts: alcohol intoxication and poisoning, falls, drowning and self-harm

Long Term Impacts: cancer, cardiovascular disease, stroke, liver cirrhosis, fetal alcohol spectrum disorder, epilepsy, pancreatitis, tuberculosis and mental health issues

Social and Second-Hand Impacts: impaired driving, violence, neglect, abuse, sexual assault, homicide, property damage, fire, public intoxication and noise nuisances



From 2008-10 to 2014-16, the rate of emergency department (ED) visits entirely caused by alcohol increased significantly from 905 to 1404. The types of issues included in this category are alcohol poisoning, alcoholic cirrhosis of the liver and alcohol withdrawal, and do not include chronic diseases. Halton residents aged 19-24 experienced the most emergency department visits entirely caused by alcohol.

In 2014/15, 4.6% of Halton adults reported drinking and driving. There was no significant change in this percentage from 2001-2015.

Special Considerations

Age: The earlier a young person starts to drink alcohol, the more at risk they are for alcohol dependence and alcohol-related harms.

Gender: In general, men consume more alcohol but women are more vulnerable to alcohol-related harm. In Ontario, alcohol use among women is increasing.

Income: As income increases, the likelihood of exceeding the LRADG increases as well, however low-income individuals tend to experience more alcohol related harm than those of higher income.

Evidence-Based Strategies for Reducing and Preventing Harmful Alcohol Use

There are a number of effective evidence-based strategies for reducing the harmful use of alcohol. International literature on these strategies confirms that they are a part of a comprehensive approach to addressing harmful alcohol use. Implementing multiple strategies is more effective than implementing one alone.

Reducing the Physical Availability of Alcohol: When alcohol availability increases, so do rates of drinking and related harm. The density of Halton's retail alcohol outlets (e.g. LCBO) at 2.0 per 10,000 people aged 15+ is similar to the province but notably higher than other municipalities including Toronto (1.3), Peel (1.0) and Hamilton (1.7).

Restricting the Marketing and Promotion of Alcohol: Exposure to alcohol advertising and images of alcohol products and brands can increase and normalize alcohol consumption.

Altering the Drinking Environment: Multi-component interventions to alter the drinking environment include; server liability, community engagement,

enforcement of current laws and staff training.

Implementing Drinking and Driving

Countermeasures: Strategies such as random and selective breath testing, lower BAC regulations, restrictions for young drivers and immediate license suspension effectively reduce alcohol-related harm.

Improving Education and Awareness: As a part of a comprehensive approach to reducing alcohol consumption and harms, public education campaigns have the ability to increase awareness about the issue of harmful alcohol use and influence decision makers.

Providing Early Intervention and Treatment: Screening, brief intervention and referral to specialized treatment and support in primary care other settings are important measures to prevent and address harmful alcohol use and dependence.

Increasing the Price of Alcohol:

As alcohol prices increase, alcohol consumption decreases and consequently so do alcohol-related harms. Increasing alcohol pricing is the intervention that has the highest potential impact on alcohol consumption and related harms.

Opportunities through the Community-Safety and Wellbeing Plan

"The diversity of alcohol-related problems and measures necessary to reduce alcohol-related harm points to the need for comprehensive action across numerous sectors"

-World Health Organization, 2010

The Community Safety and Wellbeing Plan offers a unique opportunity to prevent and address harmful alcohol use and the associated impacts through strategic and collaborative action. The harms associated with alcohol use are not limited to one sector and the opportunity and obligation to address these harms is also not limited to one sector.