## Early Adulthood

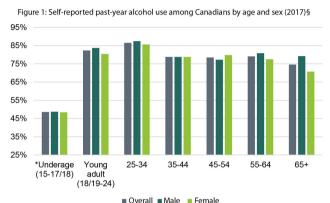
## Why is this important to talk about?

The risky use of alcohol is still most prevalent among young adults (aged 18–24 yrs)<sup>(1)</sup> and is the leading risk factor for death and social problems. This includes: <sup>(1)</sup>

- Physical Risk injury to self or others
- Physiological Risk impacts as a result of events that took place during the consumption of alcohol
- Social Risk diminished relationships with friends and family
- Economic Risk personal, professional (productivity), and health care costs

Among the postsecondary age population, 33% of Nova Scotians reported heavily drinking more than once a month, almost twice the heavy drinking rate for the general Nova Scotian population and higher than the Canadian average for the same age group.<sup>(2)</sup>

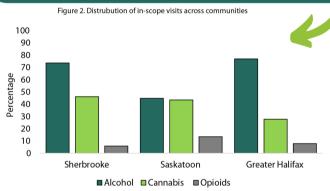




Source: CTADS 2017

Note: Underage in Alberta, Manitoba and Quebec is 17 years old; in the rest of provinces and territories it is 18 years old.

According to a study done by Canadian Center on Substance Use and Addiction, released in 2022, 76.8% (of inscope visits) of youth and young adult visits to the ER in the Greater Halifax Area are attributed to alcohol consumption.<sup>(3)</sup>



NOTE: The total equals more than 100% as each case may involve more than one in-scope substance.

40% of young adults reported alcohol-related<sup>(6)</sup> harms compared to only 18% of adults over age 25.

## What we can do!

Encourage enjoyable alcohol-free spaces. By increasing alcohol-free spaces and normalizing alcohol-free events, we will decrease alcoholrelated harms in our young adult population and beyond. For example,<sup>(7)</sup>

 One of the ways this can be achieved is through Municipal Alcohol Policies. Write/Talk to municipal counselors about updating their municipal alcohol policies The healthcare cost directly attributed to alcohol consumption in Canada is 6.3 billion.<sup>(4)</sup> In Nova Scotia, 662 million is directly attributed to the healthcare costs associated with alcohol consumption.<sup>(5)</sup>



Note: These estimates do not include costs associated with in-patient hospitalizations, day surgeries, emergency department visits and paramedic services in Quebec. A rough calculation based on Ontario per-person costs and data available from Quebec suggests that these per-person costs are likely conservative by about 8%.

