



Addiction Prevention &
Treatment Services

CAPITAL HEALTH

ALCOHOL

where we stand

“It’s not that we’re drinking. It’s how we’re drinking.”

OUR VISION

- Safe and healthy Nova Scotians who follow the low-risk drinking guidelines. What are the guidelines? **Please see reverse side of this page.**
- A culture of moderation vs. heavy and harmful drinking
- Prevent and reduce alcohol-related health, social and economic harms and costs among individuals, families, and communities in Nova Scotia

ALCOHOL: A NET LOSS FOR NOVA SCOTIA?

These numbers are a snapshot only. They don’t represent all of the revenues from alcohol (e.g. jobs created) nor do they include all costs (e.g. indirect costs such as loss of employment or disability).

- In 2006, tax revenue from the sale of alcohol in Nova Scotia: \$224.2 million
- In 2006, **direct costs to government** from alcohol (health and justice): \$242.9 million

JUST THE FACTS

- Nova Scotians are drinking **more** (per capita) than ever before
- Nova Scotians are drinking **earlier** than ever before (boys at 12.7 yrs; girls 13.1 yrs)
- Nova Scotian youth are drinking **more heavily** than ever before:
“I have been drunk in the last 30 days.” 46% of Grade 12 students answer “yes.”
- **Heavy drinking is the norm** for university students: 51.7% of students (NS) demonstrate a “heavy drinking pattern”; 49.7% engage in hazardous/harmful drinking

YOUTH ARE ESPECIALLY VULNERABLE

- They are at a vulnerable stage of life and more susceptible to marketing messages
- Physical and brain development makes them more likely to experience long-term alcohol-related harms

HEALTH PROMOTION PRIORITIES FOR REDUCING ALCOHOL-RELATED HARM

- Increase the price of alcohol and the taxes charged on alcohol
- Reduce access to alcohol
- Reduce alcohol advertising and promotion, eliminate advertising directed at youth

Adapted from “Alcohol: Our Collective Problem and What We Can Do About It,” May 7th, 2010 2nd Annual Alcohol Forum, Dr. Robert Strang, Chief Public Health Officer

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Low-Risk Drinking Guidelines¹

The Low-Risk Drinking Guidelines have been developed by a team of medical and social researchers from the University of Toronto and the Centre for Addiction and Mental Health.

What is low-risk drinking?

0	Zero drinks = lowest risk of an alcohol-related problem
2	No more than 2 standard drinks on any one day
9	Women - up to 9 standard drinks a week
14	Men - up to 14 standard drinks a week

1 standard drink = 13.6 grams of alcohol =		
5 oz = 142 mL Wine 	1.5 oz = 43 mL Spirits 	12 oz = 341 mL Beer 
Coolers and higher alcohol beers have more alcohol than one standard drink.		

- If you don't already drink, don't start for "health reasons".
- If you do drink, avoid getting drunk or intoxicated.
- Wait **at least one hour** between drinks.
- Have something to eat.
- Drink non-alcoholic beverages, such as water, soft drinks, or fruit juice.

Please note: The low-risk drinking guidelines are for people of legal drinking age.

The Guidelines do not apply if you:

- have health problems, such as liver disease or mental illness
- are taking medications, such as sedatives, painkillers, or sleeping pills
- have a personal or family history of drinking problems
- have a family history of cancer or other risk factors for cancer
- are pregnant, trying to get pregnant, or breastfeeding
- will be operating vehicles such as cars, trucks, motorcycles, boats, snowmobiles, all-terrain vehicles, or bicycles
- need to be alert; for example, if you will be operating machinery or working with farm implements or dangerous equipment
- will be doing sports or other physical activities where you need to be in control
- are responsible for the safety of others at work or at home
- are told not to drink for legal, medical, or other reasons

Concerned about how drinking may affect your health? Check with your doctor!

¹ From the Low-Risk Drinking Guidelines Website: LRDG.net