

# Health data can help address alcohol-related harm in youth

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Administrative information can be useful for surveillance and understanding of alcohol-related harm in young people, states an article in *CMAJ* (*Canadian Medical Association Journal*).

Binge drinking and overconsumption of alcohol by young people is a growing issue in many countries. For example, in a 2009 study, almost 60% of young Canadians aged 15-24 reported having consumed alcohol in the previous month, with 22% reporting heaving drinking and 20% experiencing harm related to [alcohol consumption](#). In Australia, 52% of serious road injuries and 32% of hospital admissions for 15-to-24-year-olds are related to [alcohol misuse](#).

Administrative data that are routinely collected can help with identifying emerging trends and predictors of health outcomes for infectious and [chronic diseases](#). They can also help in assessing alcohol and substance abuse disorders and related harms. The Australian Illicit Drug Reporting System and the National Household Surveys of Drug Use are international examples of useful systems.

"It is important to choose measures of alcohol-related harm that are reliable across jurisdictions, sensitive to change and tailored to specific policy interventions," writes Dr. Mark Asbridge, Dalhousie University, with coauthors.

Hospital admissions and discharges, physician billings and trauma registries can provide information on alcohol-related conditions. In

Canada, the provinces collect most of these administrative data, although coverage and availability vary by jurisdiction.

As well, measures should be relevant to young people and their behaviour versus measuring chronic diseases, which are evident only in the long term. Accidental alcohol-related injuries (traffic-related injuries, falls and poisonings) and intentional injuries such as deliberately inflicted harm against oneself or by someone else are relevant measures.

The authors suggest that a model for a national surveillance of alcohol-related harm in young people can be adapted from the Public Health Agency of Canada's work in diabetes and mental health.

"Routine administrative data can make substantial contributions to the surveillance of alcohol-related harms to health across jurisdictions and within target populations," state the authors. "Their timeliness, accessibility, large sample size and jurisdictional spread create the potential to improve the quality of currently available information on alcohol-related harm."

Provided by Canadian Medical Association Journal

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