

Alcohol Behaviours, Attitudes and Awareness in Grey Bruce

Analysis of data from the Rapid Risk Factor Surveillance System

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About RRFSS

The Rapid Risk Factor Surveillance System (RRFSS) is a public health surveillance survey that initiated with a pilot project through the Durham Region Health Department in 1999. It is coordinated by the Institute for Social Research at York University, and has been a multi-health unit collaborative surveillance project since 2000. Health units across Ontario have had the option of participating in RRFSS for an annual fee, and are able to participate in the development and revision of topic-based interview modules in RRFSS (RRFSS Working Group, 2010a).

RRFSS is administered as a 10- to 20-minute telephone survey using random digit dialing. It targets 60 to 200 adult (18+) respondents per month from each participating health region. At present, it does not include cell phones in its sampling frame, so respondents are only reached if they have landlines.

This report presents data analysed only for the Grey Bruce region.

About this Document

The rates presented in this document are estimates based on RRFSS survey results. These are presented with the upper and lower limits of their 95% confidence intervals following in parentheses.

Figures noted with an asterisk (*) should be used with caution, as the estimates have wide confidence intervals and are therefore less reliable.

All statistical analyses were written and conducted in Stata version 14.1.

For more information and explanation of any of the concepts included in this report, contact Virginia at extension 1522.

Findings

Summary

Alcohol and Chronic Disease Awareness (2015)

- 95.6% (92.6% to 97.4%) of Grey Bruce adults (18+) know that drinking alcohol every day may increase the risk of non-cancer diseases of the liver or stomach;
- 87.0% (82.5% to 90.5%) know that it may increase the risk of depression;
- 79.3% (73.7% to 84.0%) know that it may increase the risk of diabetes;
- 69.1% (63.5% to 74.3%) know that it may increase the risk of heart disease & stroke; and
- only 42.2% (36.7% to 48.0%) have heard that it may increase the risk of cancer.

Alcohol and Injury Prevention Awareness (2015)

- 92.0% (88.1% to 94.8%) of Grey Bruce adults think alcohol negatively impacts brain development in people 24 years or younger.
 - Younger adults are more likely to hold this belief than seniors.
- 94.1% (90.6%-96.3%) of Grey Bruce adults think excessive drinking increases the risk of domestic violence;
- 94.2% (90.8%-96.4%) think excessive drinking increases the risk of crime in the community;
- 94.7% (91.2%-96.9%) think excessive drinking increases the risk of sexual assault in the community;
- 97.2% (94.1%-98.7%) think excessive drinking increases the risk of unprotected sex; and
- 90.4% (86.2%-93.3%) think excessive drinking increases the risk of suicide.

Safe Amount to Drink during Pregnancy (2016)

- 84.1% (80.9% to 86.9%) of Grey Bruce adults know that the safe amount of alcohol to drink during pregnancy is “none at all”.
 - Women are 11% more likely than men to identify the safe level of drinking during pregnancy.
 - 92.2% (80.9% to 95.2%) of reproductive-aged women in Grey Bruce (those 18 to 44) know that the safe amount of alcohol to drink during pregnancy is “none at all”.

Binge Drinking Behaviour (2016)

- 29.8% (25.2% to 34.8%) of Grey Bruce men 18+ have binge drunk at least once a month in the past 12 months, and
- 13.3% (10.4% to 16.7%) of Grey Bruce women 18+ have binge drunk at least once a month in the past 12 months.
 - Rates of binge drinking decrease among older age groups.
- The predominant locations at which adults in Grey Bruce engage in binge drinking are at home or at the cottage (91.7% (88.1%-94.3%)), and at a bar, club, legion hall or restaurant (25.8% (21.1%-31.0%)).

- Younger adults were more likely than older adults to binge drink at a bar, club, legion hall or restaurant.

Drinking and Driving (2015)

- 3.8%* (2.7% to 5.4%) of Grey Bruce adult motor vehicle drivers have driven in the last year at least once after having had two or more drinks in the hour before they drove; and
- 6.8%* (3.8% to 11.7%) of Grey Bruce adult recreational vehicle drivers have driven a recreational vehicle in the last year at least once after having had two or more drinks in the hour before they drove.

Awareness of Canada's Low-risk Alcohol Drinking Guidelines (LRADG) (2014-2015)

- Only 20.2% (18.3% to 22.3%) of Grey Bruce adults are aware of Canada's LRADG, and seniors aged 65 and over are less likely to be aware of the LRADG than younger age groups.
- 38.6% (35.8% to 41.4%) of Grey Bruce adults would change the amount they drank if Canada's LRADG said they had to drink less, and
 - Women are 41% more likely than men to say they would change the amount they drank in response to LRADG recommendations.
- 3.0% (2.3% to 4.0%) of Grey Bruce adults overestimate the number of drinks permitted *per day* for men,
- 4.6% (3.7% to 5.7%) overestimate the number of drinks permitted *per week* for men,
- 5.9% (4.8% to 7.1%) overestimate the number of drinks permitted *per day* for women, and
- 11.5% (10.0% to 12.9%) overestimate the number of drinks permitted *per week* for women.
- Men are more likely than women to overestimate the safe level of daily and weekly drinking for both men and women.
- Respondents suggested the best methods of messaging about Canada's LRADG are:
 - Mailouts/pamphlets (43.6% (37.5% to 49.8%))
 - Email (16.1% (12.0% to 21.3%))
 - Internet (15.2% (11.2% to 20.3%))
 - Newspaper (15.0% (11.0% to 20.1%))
 - Radio (8.1%* (5.2% to 12.6%))
 - Health Care Professional (6.1%* (3.7% to 9.8%))
 - Social Networking Site (5.5%* (3.2% to 9.3%))
 - Community posters/flyers (4.8%* (2.5% to 8.3%))
 - Television (4.4%* (2.4% to 7.8%))
 - LCBO or Beer Store posters/flyers (2.3%* (1.1% to 4.8%))

Alcohol Policy (2016)

Among adults in Grey Bruce...

- 79.9% (76.3%-83.1%) think alcohol should be sold with a label that shows how many standard drinks are contained within

* Interpret with caution

- Women are more supportive of this policy than men
- 76.3% (72.6%-79.7%) think alcohol should be sold with a health warning label.
 - Women are more supportive of this policy than men
 - Younger adults (18-44) are more supportive of this policy than older adults (45-64), but not seniors (65+).
 - 90.1% (86.8%-92.6%) of those who think alcohol should be sold with a warning label think the size of the label should be standardized
- 62.1% (56.0%-67.8%) think the price of alcohol sold at retail outlets should increase each year by the same rate as other retail items.
- 57.0% (51.0%-62.9%) think that the price of alcohol sold at retail outlets should increase for higher strength beverages
 - Women are more supportive of this policy than men
- 51.5% (45.6%-57.3%) think the more places there are to buy alcohol, the more people will drink
- 56.7% (50.6%-62.6%) think buying alcohol through online ordering or by phone for home delivery should be banned
- 21.6% (17.2%-26.1%) think the number of places where you can buy alcohol should be increased
 - Men are more in favour of increasing locations to buy alcohol than women
- Only 7.5% (5.0%-10.0%) think the hours of stores that sell alcohol should be increased, and 3.6% (1.9%-6.8%) think the hours of bars and restaurants that sell alcohol should be increased
 - More men than women are in favour of increasing the hours of stores that sell alcohol

Module: Alcohol—Chronic Disease

The *Alcohol—Chronic Disease* module asks six questions about respondents' understanding of the relationship between alcohol and various chronic diseases (RRFSS Working Group, 2016b). This module was asked for the first cycle of 2015 (337 respondents) to adults 18+.

Because these questions were asked to only 337 respondents, age and sex breakdowns produce wide confidence intervals and have therefore not been presented for this module.

Questions

1. Have you ever heard that drinking alcohol every day may increase your risk of cancer? (Yes/No)
2. I would like to read a list of chronic health problems to you. Please tell me if you think that drinking alcohol can cause these health problems. (Yes/No)
 - a. First, Heart Disease and Stroke?
 - b. What about Depression?
 - c. Diabetes?
 - d. Diseases of the Liver or Stomach, other than cancer?
 - e. And what about Fetal Alcohol Spectrum Disorder? (not asked)

Alcohol & Cancer Risk (2015)

Overall, only 42.2% (36.7% to 48.0%) of Grey Bruce adults have heard that drinking alcohol every day may increase the risk of cancer.

Alcohol & Heart Disease and Stroke Risk (2015)

More than two thirds (69.1% (63.5% to 74.3%)) of Grey Bruce adults think that drinking alcohol every day may increase the risk of heart disease and stroke.

Alcohol & Depression Risk (2015)

Nearly nine out of ten (87.0% (82.5% to 90.5%)) Grey Bruce adults think that drinking alcohol every day may increase the risk of depression.

Alcohol & Diabetes Risk (2015)

Four out of five (79.3% (73.7% to 84.0%)) Grey Bruce adults think that drinking alcohol every day may increase the risk of diabetes.

Alcohol & Risk of Diseases of the Liver or Stomach, Besides Cancer (2015)

Nineteen out of twenty (95.6% (92.6% to 97.4%)) Grey Bruce adults think that drinking alcohol every day may increase the risk of non-cancer diseases of the liver or stomach.

Module: Alcohol—Injury Risk Factor

The *Alcohol—Injury Risk Factor* module asks six questions about respondents' awareness of the health, safety and social problems linked to alcohol use (RRFSS Working Group, 2016c). This module was asked from May to August 2016 (322 respondents) to adults 18+.

Questions

1. Do you think that drinking alcohol negatively affects the brain development of people aged 24 or younger a lot, a little or not at all?
2. Excessive drinking is having more than 3 drinks for women or more than 4 drinks for men on any single occasion. Do you think that excessive drinking increases the risk of domestic or family violence a lot, a little or not at all?
3. Do you think that excessive drinking increases the risk of crime (for example, property crime or community violence) in the community a lot, a little or not at all?
4. Do you think that excessive drinking increases the risk of sexual assault in the community a lot, a little or not at all?
5. Do you think that excessive drinking increases the risk of unplanned or unprotected sex a lot, a little or not at all?
6. Do you think that excessive drinking increases the risk of suicide a lot, a little or not at all?

Effects on Brain Development (2016)

About eighteen out of twenty Grey Bruce adults think that drinking alcohol negatively affects the brain development of people aged 24 or younger a lot or a little (92.0% (88.1% to 94.8%)). Younger adults are more likely to hold this belief than seniors (Table 1).

Table 1. Think Alcohol Negatively affect Brain Development of Young People, by Age, Grey Bruce 2016

	All ages	Under 45	45-64	65+
2016	92.0% (88.1%-94.8%)	99.1% (94.1%-99.9%)	92.1% (84.8%-96.0%)	87.8% (80.4%-92.6%)

Domestic and Family Violence (2016)

About nineteen out of twenty Grey Bruce adults think that excessive drinking increases the risk of domestic or family violence a lot or a little (94.1% (90.6% to 96.3%)).

Crime in Community (2016)

About nineteen out of twenty Grey Bruce adults think that excessive drinking increases the risk of crime (for example, property crime or community violence) in the community a lot or a little (94.2% (90.8% to 96.4%)).

Sexual Assault (2016)

Nineteen out of twenty Grey Bruce adults think that excessive drinking increases the risk of sexual assault in the community a lot or a little (94.7% (91.2% to 96.9%)).

Unprotected Sex (2016)

Nineteen out of twenty Grey Bruce adults think that excessive drinking increases the risk of unplanned or unprotected sex a lot or a little (97.2% (94.1% to 98.7%)).

Suicide (2016)

Eighteen out of twenty Grey Bruce adults think that excessive drinking increases the risk of suicide a lot or a little (90.4% (86.2% to 93.3%)).

Module: Attitudes towards Drinking Alcohol during Pregnancy

The *Attitudes Towards Drinking Alcohol During Pregnancy* module asks one question to determine people's perception of a safe level of alcohol use during pregnancy (RRFSS Working Group, 2010). This module was asked for the full 2015 year (960 respondents), and January to August 2016 (653 respondents) to adults 18+.

Questions

1. Which of the following do you think is a safe level of alcohol to drink during pregnancy? Would you say none at all, 1–2 drinks over the course of a month, or 1 drink per day?

Safe Amount to Drink during Pregnancy (2016)

Seventeen out of twenty Grey Bruce adults think that the safe level of alcohol to drink during pregnancy is “none at all” (84.1% (80.9% to 86.9%)). Women are 8% more likely than men to identify the safe level of drinking during pregnancy as “none at all” (Table 2). This has not changed significantly since 2015 (Table 2).

Among reproductive-aged women (those aged 18 to 44), 92.2% (80.9% to 97.1%) identify the safe level of drinking during pregnancy as “none at all”. This has not changed significantly since 2015 (94.0% (85.6% to 97.7%)).

Table 2. Adults who think Safe Level of Alcohol during Pregnancy is none, by Sex, Grey Bruce 2015-2016

	2015	2016
Men	80.6% (75.8% to 84.6%)	80.5% (75.1%-85.0%)
Women	89.6% (86.6% to 91.9%)	87.0% (82.8%-90.3%)
Total	85.9% (83.3% to 88.2%)	84.1% (80.9%-86.9%)

Module: Binge Drinking

The *Binge Drinking* module asks two questions (one to women only) about respondents' binge drinking behaviour in the past 12 months (RRFSS Working Group, 2015a). This module was asked for the full 2015 and 2016 year (960 respondents per year) to adults 18+.

Questions

1. (to all respondents) How often in the past 12 months have you had 5 or more drinks on one occasion? (Never, Less than once a month, Once a month, 2 to 3 times a month, Once a week, More than once a week)
2. (to females only) And how often in the past 12 months have you had 4 or more drinks on one occasion? (Never, Less than once a month, Once a month, 2 to 3 times a month, Once a week, More than once a week)

Binge Drinking Behaviour (2015, 2016)

Male and female binge drinking are defined differently according to Canada's Low-risk Alcohol Drinking Guidelines: males are considered to have binged if they have consumed five or more drinks at a sitting, while females are considered to have binged if they have consumed four or more. Women's biology makes them more prone to intoxication than men, given the same volume of alcohol consumption.

2016

Among men, 29.8% (25.2% to 34.8%) have binge drunk at least once a month in the past 12 months. Among women, the rate is 13.3% (10.4% to 16.7%), substantially lower. Rates of binge drinking increased slightly in both men and women between 2015 and 2016 but this increase was not statistically significant (Table 3). Among both men and women, rates of binge drinking decrease among older age groups (Tables 4 & 5).

Table 3. Rates of Binge Drinking by Sex, Grey Bruce 2015-2016

	2015	2016
Men	24.9% (20.5%-29.8%)	29.8% (25.2%-34.8%)
Women	9.5% (7.1%-12.5%)	13.3% (10.4%-13.7%)

Table 4. Rates of Binge Drinking among Men by Age Group, Grey Bruce 2015-2016

	2015	2016
18 to 44	38.9% (27.3% to 52.0%)	41.0% (29.9%-53.1%)
45 to 64	28.9% (22.1% to 36.8%)	32.2% (24.9%-40.4%)
65 and over	12.2%* (7.8% to 18.7%)	20.0% (14.4%-27.0%)

Table 5. Rates of Binge Drinking among Women by Age Group, Grey Bruce 2015-2016

	2015	2016
18 to 44	19.8%* (12.5% to 29.9%)	19.0%* (10.8%-31.2%)
45 to 64	7.1%* (4.2% to 11.9%)	15.7% (11.3%-21.4%)
65 and over	7.0%* (4.2% to 11.5%)	8.5%* (5.4%-13.0%)

Binge Drinking Location (2016)

The predominant locations at which adults in Grey Bruce engage in binge drinking are at home or at the cottage (91.7% (88.1% to 94.3%)), and at a bar, club, legion hall or restaurant (25.8% (21.1% to 31.0%)). Younger adults were more likely than older adults to binge drink at a bar, club, legion hall or restaurant (Table 6).

Table 6. Binge Drank at Bar, Club, Legion hall or Restaurant, by Age, Grey Bruce 2016

	All Ages	18-34	35-44	45-64	65+
2016	25.8% (21.1%-31.1%)	42.3%* (27.5%-58.6%)	45.8%* (31.0%-61.4%)	20.1% (14.6%-27.0%)	17.4%* (10.5%-27.3%)

* Interpret with caution

Module: Drinking and Driving (2015)

The *Alcohol—Drinking and Driving* module asks four questions to determine respondents' drinking and driving behaviours (RRFSS Working Group, 2016a). This module was asked for the full 2015 year (960 respondents).

Because the rates for these indicators are so low, age and sex breakdowns are not possible.

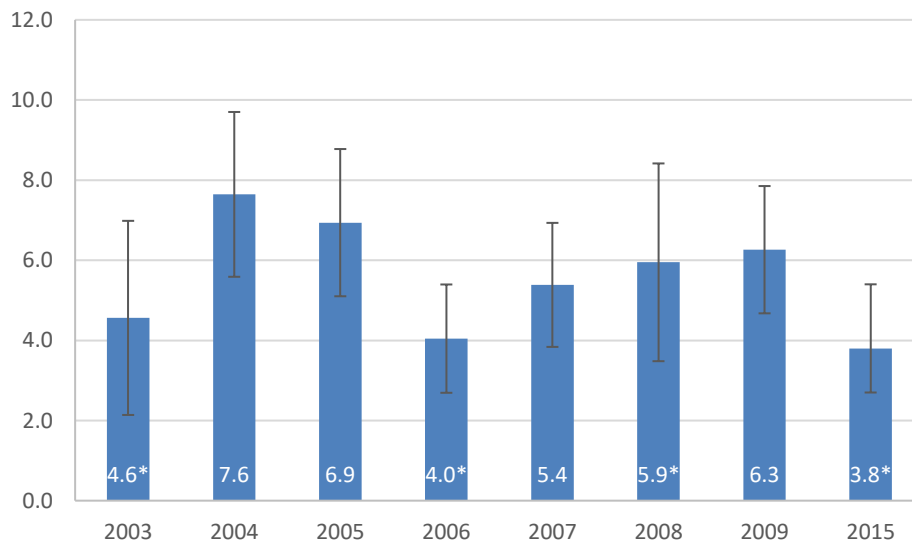
Questions

1. In the past 12 months have you driven a motor vehicle? (Yes/No)
2. (if yes to 1) In the past 12 months have you driven any of these vehicles when you've had two or more drinks in the hour before you drove? (Yes/No)
3. In the past 12 months have you driven a recreational vehicle such as a snowmobile, boat, or all-terrain vehicle? (Yes/No)
4. (if yes to 3) In the past 12 months have you driven one of these vehicles when you've had two or more drinks in the hour before you drove? (Yes/No)

Drink Driving Behaviour—Motor Vehicles (2015)

Overall, 3.8%* (2.7% to 5.4%) of Grey Bruce motor vehicle drivers of drinking age (19+) drove a motor vehicle in the last year after having had two or more drinks in the hour before they drove. This is not significantly different from past estimates for Grey Bruce (Figure 1).

Figure 1. Grey Bruce Respondents who consumed 2+ drinks in the hour before driving, by year (%)

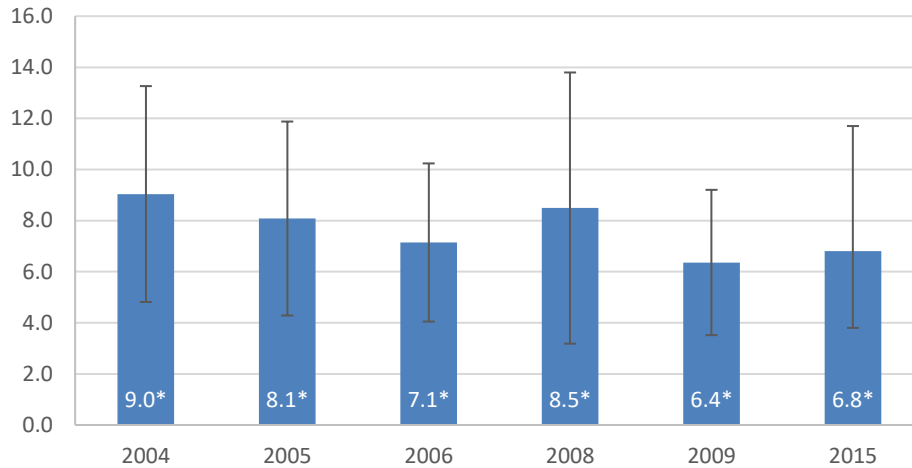


* Interpret with caution

Drink Driving Behaviour—Recreational Vehicles (2015)

Overall, 6.8%* (3.8% to 11.7%) of Grey Bruce recreational vehicle drivers of drinking age (19+) drove a recreational vehicle in the last year at least once after having had two or more drinks in the hour before they drove. This is not significantly different from past estimates for Grey Bruce (Figure 2).

Figure 2. Grey Bruce Respondents who consumed 2+ drinks in the hour before driving a recreational vehicle, by year¹



Module: Alcohol—Canada's Low-risk Alcohol Drinking Guidelines (LRADG)

Canada's Low-risk Alcohol Drinking Guidelines were first published in 2012. The *Alcohol—Canada's Low-risk Alcohol Drinking Guidelines* module asks 8 questions to determine respondents' awareness of the Low-risk Alcohol Drinking Guidelines (LRADG) and their willingness to follow guidelines (RRFSS Working Group, 2010b). This module was asked for the full 2014 year (1203 respondents), and in the first and third cycles of 2015 (337 and 309 respondents, respectively).

With the exception of Awareness of the LRADG, rates for the following indicators did not differ significantly among age groups, and are therefore not presented.

Questions

1. Have you ever seen or heard about *Canada's Low-risk Alcohol Drinking Guidelines*? (Yes/No)
2. If the guidelines said you had to drink less, would you change the amount you drink? (Yes/No)
3. In general, what is the maximum number of drinks per DAY you think could be considered low-risk for a man of legal drinking age? (#)
4. In general, what is the maximum number of drinks per WEEK you think could be considered low-risk for a man of legal drinking age? (#)
5. In general, what is the maximum number of drinks per DAY you think could be considered low-risk for a woman of legal drinking age? (#)
6. In general, what is the maximum number of drinks per WEEK you think could be considered low-risk for a woman of legal drinking age? (#)

¹ Estimates from 2003 and 2007 suppressed due to high variability

* Interpret with caution

7. How could the Grey Bruce Health Unit BEST get information to you about the guidelines?
- | | |
|--|------------------------------------|
| a. Newspaper | h. Posters/flyers in the community |
| b. Mailouts/pamphlets | i. Billboards in the community |
| c. Television | j. Bottle labeling |
| d. Internet | k. Text message |
| e. Radio | l. Social networking site |
| f. Doctor/nurse/health care professional | m. Other |
| g. Posters/flyers at LCBO or beer store | n. Email |

Awareness of Canada's LRADG (2014–15)

Overall, only 20.2% (18.3% to 22.3%) of Grey Bruce adults 18+ are aware of Canada's LRADG.

The rates between men and women did not differ significantly. Males have a rate of 19.5% (16.7% to 22.7%) compared to females with a rate of 20.8% (18.3% to 23.6%). Seniors were less likely than younger age groups to report being aware of Canada's LRADG (16.7% compared to the next nearest group—45- to 64-year olds—at 20.2%).

Table 1. Awareness of Canada's LRADG by Age Group, Grey Bruce 2015

18 to 34	25.3% (18.3% to 33.9%)
35 to 44	27.5% (21.2% to 34.8%)
45 to 64	20.2% (17.4% to 23.4%)
65 and over	16.7% (13.9% to 19.9%)

Willingness to Drink Less if Guidelines Recommended It (2014–15)

Overall, 38.6% (35.8% to 41.4%) of Grey Bruce adults 18+ would change the amount they drank if Canada's LRADG said they had to drink less.

Women are 41% more likely than men to say they would change the amount they drank in response to LRADG recommendations. While 44.5% (40.7% to 48.4%) of women would change the amount they drank, only 31.5% (27.6% to 35.7%) of men would change the amount they drank.

Awareness of Drinks per Day Permitted for Men (2014–15)

Overall, 3.0% (2.3% to 4.0%) of Grey Bruce adults 18+ overestimate the number of drinks permitted per day for men, and men (5.0% (3.6% to 6.9%)) are more than three times as likely to overestimate compared to women (1.5%* (0.9% to 2.5%)).

Awareness of Drinks per Week Permitted for Men (2014–15)

Overall, 4.6% (3.7% to 5.7%) of Grey Bruce adults 18+ overestimate the number of drinks permitted per week for men, and men (8.3% (6.5% to 10.5%)) are more likely to overestimate compared to women (1.8%* (1.1% to 2.8%)).

* Interpret with caution

Awareness of Drinks per Day Permitted for Women (2014–15)

Overall, 5.9% (4.8% to 7.1%) of Grey Bruce adults 18+ overestimate the number of drinks permitted per day for women, and men (8.6% (6.8% to 11.0%)) are more likely to overestimate compared to women (3.8% (2.7% to 5.2%)).

Awareness of Drinks per Week Permitted for Women (2014–15)

Overall, 11.5% (10.0% to 12.9%) of Grey Bruce adults 18+ overestimate the number of drinks permitted per week for women, and men (18.6% (15.9% to 21.7%)) are more likely to overestimate compared to women (5.9% (4.6% to 7.7%)).

Preferred Ways of Receiving Messaging about Canada's LRADG (2014–15)

When asked to name ways that public health could best communicate Canada's LRADG, Grey Bruce adults 18+ provided the following suggestions:

- Mailouts/pamphlets 43.6% (37.5% to 49.8%)
- Email 16.1% (12.0% to 21.3%)
- Internet 15.2% (11.2% to 20.3%)
- Newspaper 15.0% (11.0% to 20.1%)
- Radio 8.1%* (5.2% to 12.6%)
- Health Care Professional 6.1%* (3.7% to 9.8%)
- Social Networking Site 5.5%* (3.2% to 9.3%)
- Community posters/flyers 4.8%* (2.5% to 8.3%)
- Television 4.4%* (2.4% to 7.8%)
- LCBO or Beer Store posters/flyers 2.3%* (1.1% to 4.8%)
- Other 8.3%* (5.4% to 12.7%)

Module: Alcohol Policy (2016)

The *Alcohol—Drinking and Driving* module asks ten questions to determine respondents' support for policies to reduce access to alcohol (RRFSS Working Group, 2015b). The first three questions were asked from January to April and September to December (638 respondents) and the remaining questions were asked from January to April (331 respondents),

Questions

1. Alcohol sold at retail outlets should be sold with a label that shows how many standard drinks are contained within. Do you strongly agree, somewhat agree, somewhat disagree or strongly disagree with this?
2. Alcohol sold at retail outlets should be sold with a warning label that describes the health hazards of drinking alcohol. Do you strongly agree, somewhat agree, somewhat disagree or strongly disagree with this?
3. Alcohol warning labels should be a standard size like those on cigarette packages. Do you strongly agree, somewhat agree, somewhat disagree or strongly disagree with this?

* Interpret with caution

4. The price of alcohol sold at retail outlets should increase each year by the same rate as other retail items. Do you strongly agree, somewhat agree, somewhat disagree or strongly disagree with this?
5. The price of alcohol sold at retail outlets should increase for higher strength beverages. For example, a beverage with 10% alcoholic content should be priced higher than a beverage with 5% alcohol content. Do you strongly agree, somewhat agree, somewhat disagree or strongly disagree with this?
6. The more places there are to buy alcohol, the more people will drink. Do you strongly agree, somewhat agree, somewhat disagree or strongly disagree with this?
7. Buying alcohol through online ordering or by phone for home delivery should be banned. Do you strongly agree, somewhat agree, somewhat disagree or strongly disagree with this?
8. Should the number of places where you can buy alcohol be increased, decreased, or remain the same?
9. Should the hours of stores that sell alcohol be increased, decreased, or remain the same?
10. Should the hours of bars or restaurants that sell alcohol be increased, decreased, or remain the same?

Alcohol Sold with Standard Drink Label (2016)

Sixteen out of twenty Grey Bruce adults somewhat or strongly agree that alcohol should be sold with a standard drink label (79.9% (76.3% to 83.1%)). Women (85.1% (80.7% to 88.7%)) are more supportive of this policy than men (73.1% (66.9% to 78.5%)).

Alcohol Sold with Health Warning Label (2016)

Fifteen out of twenty Grey Bruce adults somewhat or strongly agree that alcohol should be sold with a health warning label (76.3% (72.6% to 79.7%)). Women (80.0% (75.1% to 84.1%)) are more supportive of this policy than men (71.4% (65.2% to 76.9%)). Younger adults were significantly more in favour than older adults (Table 7). Among those who agreed that alcohol should be sold with a health warning label, 90% (86.8% to 92.6%) somewhat or strongly agreed that the warning labels should be a standard size.

Table 7. Support Alcohol being sold with Health Warning Label, by Age, Grey Bruce 2016

	All Ages	Younger Adults Under 45	Older Adults 45-64	Seniors 65+
2016	76.3% (72.6%-79.7%)	85.4% (76.4%-91.4%)	71.9% (65.5%-77.5%)	77.3% (71.7%-82.1%)

Increasing Price of Alcohol by Same Rate as other Retail Items (2016)

About twelve out of twenty Grey Bruce adults somewhat or strongly agree that the price of alcohol sold at retail outlets should increase each year by the same rate as other retail items (62.1% (56.0% to 67.8%)).

Increasing Price of Alcohol for Higher Strength Beverages (2016)

About eleven out of twenty Grey Bruce adults somewhat or strongly agree that the price of alcohol sold at retail outlets should increase for higher strength beverages (57.0% (51.0% to 62.9%)). Women (64.6% (56.4% to 72.1%)) were more supportive of this policy than men (48.1% (39.2% to 57.2%)).

Alcohol Consumption and Availability (2016)

Half of Grey Bruce adults somewhat or strongly agree that the more places there are to buy alcohol, the more people will drink (51.5% (45.6% to 57.3%)).

Sale of Alcohol through Online Ordering or by Phone (2016)

Eleven out of twenty Grey Bruce adults somewhat or strongly agree that buying alcohol through online ordering or by phone for home delivery should be banned (56.7% (50.6% to 62.6%)).

Number of Places to buy Alcohol (2016)

About four out of twenty Grey Bruce adults somewhat or strongly agree that the number of places where you can buy alcohol should be increased (21.6% (17.2% to 26.8%)). Men (31.3% (23.7% to 40.1%)) were more in favour of increasing locations to buy alcohol than women (14.1% (9.5% to 20.4%)).

Hours of Stores, Bars, Restaurants that sell Alcohol (2016)

About eight percent of Grey Bruce adults somewhat or strongly agree that the hours of stores that sell alcohol should be increased (7.5% (5.0% to 11.1%)). Men (11.5% (7.1% to 18.1%)) were more in favour of increasing stores hours than women (4.4%* (2.1% to 8.8)). About four percent of Grey Bruce adults somewhat or strongly agree that the hours of bars and restaurants that sell alcohol should be increased (3.6% (1.9% to 6.8%)).

* Interpret with caution

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