

# DRINKAWARE

## POSITION PAPER SUMMARY

### *Young Adults in Ireland: an insight into 18-34 year olds' alcohol use & wellbeing*

#### Context is key (and understanding the contradictions)

- Alcohol data cannot be examined in isolation - it is nuanced and complex
- There are many powerful determinants of alcohol usage, of which age is one

#### Alcohol consumption

- Delaying the age of first drink is an important protective factor for hazardous drinking and developing alcohol dependency later in life.
- The age of first drink in Ireland is getting younger, for those aged under 35 the average age of 1<sup>st</sup> drink is 14.8 years, compared with 17 years for those aged 50+.
- Young adults report lower levels of weekly drinking (33% 18-24 yrs old)
- but higher levels of binge drinking in the past 30 days (68% of 25-34yrs olds).

#### Positive intentions

- 1 in 3 would like to drink less.
- 4 in 10 have made small positive changes to their drinking
- Self-agency matters to them - prefer supports that empower them to make their own informed and better decisions eg, clear information, drinks calculators, etc.
- No-Lo alcohol drinks the most cited option as moderation technique for 18-24-year-olds.

#### Mental health & wellbeing

- Irish & international research identifies a corroboration between low mental wellbeing and an increase in alcohol consumption during the pandemic.
- Only 15% of 25-34yrs report high levels of mental wellbeing.
- Young adults are more likely to state that impact on mental health is an influence for them to drink less.
- 62% of those aged 34 and under said they '*know people in my social group that either consume illicit drugs as a substitute for alcohol*' or use illicit drugs '*with alcohol*'.

#### Recommendations

1. Targeted and relatable alcohol awareness and information campaigns that promote knowledge, elicit positive intention and build capacity to support healthier behaviour
2. Broader and inclusive discourse at a political, community and public level
3. Qualitative research that captures young adults' voices and supports tenable intervention ideation and co-creation
4. Forum of multiple stakeholders to explore what a collaborative and ethical approach to Under 18s could entail that empowers them onto a healthier path into adulthood

# Young Adults in Ireland: an insight into 18-34 year olds' alcohol use & wellbeing

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## Introduction

COVID-19 brought about dramatic change to the daily routines of billions of people across the world. Physical and social distancing measures as well as a series of lockdown phases, led to a radical re-organisation of social, economic and cultural relations that was particularly pronounced for young adults<sup>i</sup> (those aged between 18-34) for whom the onset of the pandemic meant being separated from friends and family, interruption to their education and work, aggravated accommodation and housing issues and the disruption and/or deletion of many key emerging adulthood milestones. The long-term impact of this is as yet unknown, but the more immediate outcomes are beginning to surface and merit discussion. This position paper therefore seeks to initiate this discussion, in the context of alcohol and in particular its association with regards to mental wellbeing.

The purpose of Drinkaware's research, in particular the Annual Barometer<sup>ii</sup> (conducted by B&A), is to deliver timely and comprehensive insight and context that enriches understanding of Irish adults' behaviours and attitudes towards alcohol. This delivers a greater knowledge on the use and misuse of alcohol that in turn helps shape more effective interventions and preventions, including Drinkaware's public information, engagement and education programmes. The research serves an additional critical purpose, to flag evolving patterns of attitudes, behaviours and culture regarding alcohol and lifestyle in Ireland, which signposts potential forward projections based on past and current behaviours. It is against this research backdrop that this position paper on young adults has been written.

## Context (and contradictions)

Alcohol data is nuanced and complex and cannot be examined in isolation. There is a multi-dimensional aspect to both society's and people's relationship with alcohol and there are powerful social, economic and environmental determinants of alcohol usage/experience. The 'wider picture' therefore, of people's *actual lived experience* that encompasses these multiple aspects, must be examined if viable interventions are to be created.

What we know about young adult's drinking in Ireland is that whilst the emerging data shows a positive cultural and expectations shift, some key areas have either not changed, or have gotten worse. The data can consequently appear contradictory. Young adults for instance are the most health conscious and sober curious but are also the highest binge drinkers. Addressing alcohol consumption issues requires appreciating and holding these contradictions in tandem and speaking to them in context.

## Age of first drink

72% of Irish adults report that they first drank alcohol before the legal age of 18 and the average age of first drink is nearly 16 (Barometer 2022). However, while there is a growing body of research pointing to adolescents drinking less (HRB 2022), evidence from Barometer 2022 points to a pattern that today's younger adults are starting to drink earlier than their older counterparts. Those surveyed aged 34 and younger first tried alcohol more than 2 years earlier than those aged 50+:

- The average age of first drink across the adult population is 15.8 years
- For those aged 50+ the average age for their first drink was 17 years
- For those aged 34 and under, the average age for first drink, drops to 14.8 years

This illustrates the risk that averages can neutralize or obscure significant data, such as the negative escalation of the age of first drink as is the case here.

Delay is an important protective factor for hazardous drinking and developing alcohol dependency later in life (HRB 2022). Also, whilst some data finds the average age of first drink getting older in general, hazardous drinking was found to be commonplace for many (64%) and one in three young drinkers had an alcohol use disorder in 2019 (HRB 2022).

### **Binge Drinking<sup>iii</sup> (& consumption motivations)**

Recent changes in consumption are most stark in the younger adult age cohorts: In the 2022 Barometer, those under 34 years report lower levels of weekly+ drinking (33% of 18-24 yr olds and 50% of 25-34 yr olds) compared to the national average of 52% (as well as a continued decrease since start of COVID-19). At the same time, the 25-34-year cohort report higher levels of binge drinking in the past 30 days - 68% compared to the national average of 55%. The most recent Healthy Ireland data found that drinkers aged under 25 remain more likely than other drinkers to binge drink on a typical drinking occasion (46%). However, while the proportion of men in this age group who binge drink on a typical drinking occasion has returned to pre-pandemic levels, the proportion of women who do so remains lower (2018 - men aged under 25: 67%, women aged under 25: 37%) (Government of Ireland 2022).

In terms of reasons for drinking<sup>iv</sup>, *social motivations among* 18-34-year-olds are higher than older cohorts: under 35's were more likely to report their motivation to drink is to: *make social gatherings more fun* at 50%, *to celebrate* at 58% and *to get drunk* at 30% (2022 Barometer). The social context of being surrounded by others who are drinking, or in drinking contexts in general, is strongly associated with unplanned drinking in young adults (Griffin et al. 2021).

### **Positive intentions**

Today's young adults display good levels of self-awareness and positive health-related intentions. 40% of younger adults said they had made small positive changes to their drinking. The young adult cohorts were also more likely to state that impact on mental health is an influence for them to drink less with 48% of 18-24-year-olds and 37% of 25-34-year-olds doing so (vs 32% national average).<sup>v</sup> Physical health was the top motivator for the 18-34 year ago cohort, with 18-24-year-olds more likely to cite career/job as they may see alcohol as a barrier in career progression (2022 Barometer). 18-24-year-olds are also more likely to report that Irish drinking culture has changed for the better over the last 3 years.

Self-agency is important to young adults, with indications of openness to positive behaviour change. Of note is the likelihood that they prefer supports that empower them to make their own informed and better decisions as reflected in the moderation option preferences - clear information, using a drinks calculator, following guidelines (Low-Risk Weekly Guidelines). No-Lo alcohol drinks were the most cited option as a moderation technique for 18-24-year-olds.

### **Mental Health<sup>vi</sup>**

Young adults are more likely to report low mental wellbeing than their older counterparts. In 2022, low mental wellbeing peaks among 25-34yrs (45%). In contrast to this 30% of all adults report low mental wellbeing.

Healthy 2021 found that 45% of those aged 15-34 were likely to say their mental health had declined during the pandemic. Alongside high levels of low mental wellbeing, Barometer 2022 found that 40% of the 25-34 age group reported increased stress and tension (vs 26% of adults overall). Many young adults found themselves in a situation where they moved back in with their parents/family members. Others that lived at home prior to COVID-19 found themselves 'stuck at home', likely compounded further in 2022 and 2023 due to the housing crisis. Young adults experienced the highest rate of job loss during the pandemic (Central Statistics Office, 2020).

The rise in household tension reported by young adults the Barometers 2020-2022 is a trend that has also emerged in other studies (Eurofound, 2020; Orgiles et al, 2020). Disruptions to employment, education and social activities negatively impacted young adults' mental health and wellbeing (Nolan & Smyth 2020; Smyth and Nolan 2022). It is important to note the underlying prevalence of low mental wellbeing amongst young adults that was present pre-COVID-19 and undoubtedly exasperated by the pandemic: For example, feelings of depression were widely documented across both Growing Up in Ireland and My World surveys. Over one in five young men, and one in three of young women, had elevated scores on a measure of depressive symptoms in Growing up in Ireland data from 2019.

Important to note is the corroboration between low mental wellbeing and an increase in alcohol consumption during the pandemic, highlighting trends in the potential use of negative coping strategies to deal with the stress, as identified by Irish and international research (Capasso et al. 2021, CSO 2021, Smyth & Nolan 2022, Roberts et al. 2021). The 2022 Barometer found 25-34 year olds over index on drinking to cope at 60%, (as do men compared with 50% of current drinkers). When coping motivations are broken down further, drinking 'to help relax and unwind' remains the dominant motivation cited among 25-34-year-olds in 2022 with half (50%) doing so always/most/half of the time. Over 1 in 5 referenced feeling depressed/anxious or to cheer up when in bad mood/stressed as motivations.

The likely impact and trajectory of young adults' mental health as they become mature citizens is not known. Irelands' first comprehensive assessment of the occurrence of multiple mental health disorders and attempted suicide was recently conducted by a team of researchers at Maynooth University, National College of Ireland and Trinity College Dublin (Hyland et al. 2022). This study found that young adults aged 18-24 years are eight times more likely than people aged 55+ to have a mental health disorder (Hyland et al. 2022).

### **The use of illegal substances**

The consumption of alcohol and illicit drugs and the interplay between the two is a growing area of concern. Data from the National Drug Treatment Reporting System (NDTRS) indicated that during the period 2011-2020, some 8,608 cases of young people aged under 25 years received treatment due to their alcohol use and 27,569 for their drug use (Doyle 2022).

Polydrug use was reported by 44% of those attending treatment for their alcohol use, with cannabis, cocaine, and benzodiazepines the most commonly reported additional substances (Doyle 2022). For the first time, the Drinkaware Annual Barometer asked questions regarding the use of illegal drugs in 2022. 62% of those aged 34 and under said they '*know people in my social group that either consume illicit drugs as a substitute for alcohol*' or use illicit drugs 'with alcohol'. This indicates high levels of poly drug use amongst this age cohort and thus warrants further investigation.

## Recommendations

1. Premise:

The need to address young adults' drinking and the intertwined relationship that exists with their wellbeing is evident: they are starting to drink younger, have higher levels of binge drinking, illegal drug use and lower levels of mental wellbeing.

Furthermore, the opportunity to address their drinking, and simultaneously support their wellbeing, is also evident: they have positive intentions and good levels of awareness of alcohols' impact on their mental health and career prospect.

Recommended action:

Positively influence the key determinants of consumption - knowledge, motivation, intentions and capacity - through thoughtful, relevant awareness and information programmes. Capacity is the ultimate turnkey that unlocks the potential of change, and this requires engagement and education.

2. Premise:

The public narrative and discussions on alcohol are too often polarized and take a binary approach with regard to those who drink at high or low-risk. This paper shows the complexity of consumption data in the context of actual lived experiences and their evolving attitudes and situations, and many of the determinants of consumption are out of young adults' control.

Recommended action:

Need to think broader: a more inclusive and broader discourse on young adults and alcohol, that includes diverse data, multiple dialogue and broader insights, is warranted. Greater discussion at a political, community and public level is essential.

3. Premise:

Average does not tell the whole story. Not only are young adults not a homogenous group, COVID-19 has exacerbated existing inequalities across society, particularly for young adults (Smyth & Nolan 2022). Interventions therefore need to be based on a greater understanding of actual experiences.

Recommended action:

Qualitative research that listens to and captures young adults' own voices, with young adults themselves and considers what co-created programmes might look like should be the cornerstone of any future interventions and preventions targeting this audience.

4. Premise:

In order to comprehensively address the issues regarding the young adult age cohort outlined here, it is critical that preventions are also considered. This means designing fit-for-purpose programmes for under 18s, that are informed by best practice and evidence, take a whole-community approach, and are delivered by trusted organisations. Inaction, or ineffectual action, will assure the continuation and escalation of the issues raised in this paper.

Recommended action:

A forum of multiple stakeholders - environmental, legislative, educational, health and youth - to discuss what a collaborative and ethical approach to Under-18s could entail to support and empower our young people on a healthier path during adolescence and as they transition into adulthood.

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<sup>i</sup> Young adulthood encompasses the years following adolescence - a transitional stage between childhood and adulthood. Age definitions vary, with the youth market often referred to as including those under 35 years. Another reference is to 'Young Adulthood'. According to Robert J. Havighurst's theory, young adulthood (ages 18-35 years) is characterized by developmental tasks, such as the choice of spouse and learning to live with him or her, the enlargement of one's family and raising children, directing one's own home, undertaking a professional career, engaging in civic responsibilities, and finding a corresponding social group. (Havighurst also refers to middle adulthood as being between 35-65 years). Therefore, for the purposes of this paper and to reflect societal changes (i.e. young adults spending more time in 3rd level education, remaining at home for longer, alongside the specific impact of COVID-19), it was decided to also examine the adult cohort immediately following 18-24 years i.e. 25-34 year olds.

<sup>ii</sup> A quota-controlled sampling procedure is utilised to deliver a nationally representative sample of 1,000 adults aged 18+ with online surveys being conducted at a specific point in the year. Questionnaire design incorporates internationally recognised question models including the AUDIT-C, Drinking Motive Questionnaire: Revised Short Form and Short Warwick-Edinburgh Mental Wellbeing Scale.

<sup>iii</sup> Binge Drinking - Heavy episodic drinking is defined as the proportion of adult drinkers (aged 15 and older) who have had at least 60 grams or more of pure alcohol on at least one occasion in the past 30 days. An intake of 60 grams of pure alcohol is approximately equal to 6 standard alcoholic drinks. Consuming six or more standard drinks of alcohol in one sitting is classified as binge drinking or excessive drinking.

<sup>iv</sup> The Drinking Motive Questionnaire: Revised Short Form (DMQ-R SF) (Kuntsche & Kuntsche 2009) consists of 12 motivations for drinking and a five-point response scale. The individual's responses used to determine the extent to which they drink for social reasons, enhancement reasons, conformity or coping reasons. To reflect the unique 'lockdown' circumstances, the presented motivations were updated for the purposes of this study in both 2020 and again in 2021 and 2022 (with additional added) to ascertain the key drivers and reasons for adults' drinking in the context of COVID-19.

<sup>v</sup> The total sample size for Barometer 2022 was 1,026 adults aged 18+. Under 35-year-olds represented 27% of the total sample, while over 35's accounted for the remaining 72%. It is therefore important to report these specific findings with a word of caution.

<sup>vi</sup> Participants in the Barometer were asked to complete an internationally recognised question model - The Short Warwick-Edinburgh Mental Wellbeing Scale (SWEMWBS) (Stewart-Brown et al. 2009)