# Girls, Women and Alcohol:

## **Making informed choices**





This resource was written by women for women to give you useful information about alcohol, and help you make informed choices about your alcohol use.

## Introduction

Drinking alcohol is a common social activity for many people. A 2017 Health Canada survey shows 77 per cent of women reported drinking alcohol in the past year. Alcohol is a "depressant" drug; it slows down the parts of the brain that affect thinking, behaviour, breathing, and heart rate. For many people, drinking alcohol releases tension and reduces inhibition, making them feel more at ease. Drinking can also cause intoxication, effects of which include reduced motor skills, slow reflexes, and impaired judgment.

Many people drink alcohol in ways that carry a low risk of harm. However, it is important that people who drink alcohol understand the way alcohol affects them, and the possible risks associated with drinking alcohol. It is possible to develop a physical dependence (addiction) on alcohol.

All information is based on research to help women make informed choices about alcohol use. Research sources are listed under References at the back of this guide. Alcohol affects female bodies differently than male bodies, based on several factors:

- body size and composition
- age
- genetics (biology)
- previous and current life circumstances
- stress

All of these factors can influence the way women respond to alcohol, and the risk level of their alcohol use.

This guide:

- presents low-risk drinking guidelines
- describes factors that affect drinking in girls and women
- highlights some of the health impacts that can be caused by alcohol use
- provides information on other resources about alcohol use



#### **Key Points**

- Alcohol is commonly used by women.
- Alcohol affects female bodies differently than male bodies.
- People can lower their risk of harm while drinking alcohol by following the low-risk guidelines.
- Heavy drinking can impact your health.
- Several factors can increase the risk of harm to people who drink.
- Support is available to help people make changes to harmful alcohol use patterns.

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## **1. Low-Risk Drinking**

Low-risk drinking guidelines have been developed in Canada to help people set safe drinking levels and to monitor their drinking. These guidelines can help reduce the health risks of drinking alcohol, by increasing awareness of:

- the amount of alcohol we consume
- how often we drink
- situations when drinking increases the risk of harm

Low-risk drinking helps to promote a culture of moderation. Low-risk drinking supports healthy lifestyles.

These guidelines are adapted from Canada's Low-Risk Alcohol Drinking Guidelines, published by the Canadian Centre on Substance Abuse. Visit **www.ccsa.ca** to learn more.

### Low-Risk Drinking Guidelines

#### How much do you drink?

Reduce your long-term health risks by drinking no more than:

- 10 drinks a week for women, with no more than 2 drinks a day most days
- 15 drinks a week for men, with no more than 3 drinks a day most days.

Plan non-drinking days every week to avoid developing a habit.

#### How often do you drink?

 Reduce your risk of injury and harm by drinking no more than 3 drinks (for women) or 4 drinks (for men) on any single occasion

#### What is a standard drink?

The amount of alcohol found in a standard drink is the same **regardless of the type of alcoholic beverage**. Each drink in the diagram below is one standard drink.



One glass of hard liquor (gin, rum, vodka, rye, liqueurs, etc.) 43 ml/1.5 oz, 40% Alc/Vol



One glass of wine 142 ml/5 oz, 12% Alc/Vol



341 ml/12 oz, 5% Alc/Vol



One bottle of beer

One bottle of beer 341 ml/12 oz, 5% Alc/Vol



#### Some Things to Think About

Be aware of situations where drinking has increased risks. It is safest not to drink if you are:

- pregnant or when planning a pregnancy
- using other drugs, including some medications
- driving a vehicle or operating machinery
- responsible for the safety of others

### Self-assessment

Knowing exactly how much we drink can help us assess our use of alcohol. Here are some tips that may help you track your drinking:

- Use standard drink measurements to count your drinks (see page 5)
- If you top up your drink before it is completely finished, keep track of how much alcohol you are adding
- Count the number of drinks you have on one occasion
- Notice how many days in a week you drink alcohol
- Look for patterns within your use of alcohol

When drinking, know your own limits. For example, you may feel the effects of the alcohol after two drinks, rather than the three noted in the guidelines. So two drinks might be your personal limit.

If you feel you are drinking more than you want to be, or if your alcohol use is causing harm in your life, it's a good idea to talk to people who can give you advice and support. Talking to a family physician, healthcare provider or counsellor can help you assess your alcohol use. [See the Resources section at the back of this guide.]

#### **Questions to consider:**

- How many drinks did I have in the past week?
- When I drink, how many drinks do I usually have in one day?
- What do I like about drinking? What don't I like?
- When do I feel most like drinking? When do I feel least like drinking?
- Do I have any worries about how much I drink?
- Are there any changes I want to make to my alcohol use?

## **2. Effects of Alcohol Use**

The effects of alcohol vary greatly from one person to the next. There are several factors that affect a person's response to alcohol.

## **Biology**

Alcohol affects females' bodies differently than males' bodies. Even after drinking smaller amounts, females generally feel greater effects for a longer period of time. Three key factors help explain the reasons female and male bodies break down alcohol differently:

- Females have less water in their bodies to help dilute the alcohol in their blood streams
- Female bodies absorb alcohol at a slower rate
- Females have lower levels of a particular enzyme that breaks down alcohol in their bodies

## Physical responses to alcohol

The effects of alcohol vary according to physical size. Females who are smaller and/or weigh less will often have a stronger reaction to alcohol. Some females quickly feel the effects of alcohol with only a couple of drinks, and may want to consider drinking less than the recommended low-risk drinking guidelines.

Listening to our bodies when we drink and adjusting our alcohol use accordingly is a way to be safer.

### Life circumstances

People use alcohol for a variety of reasons. Some people drink to have fun, to relax, to feel more confident, reduce inhibitions, cope with stress, fit in with peers, or cope with trauma. The way that a person uses alcohol is often related to the context of their lived experience and circumstances.

Women often face societal pressures and expectations around relationships, sexuality, caregiving, employment, and more. Women often face a lot of judgment and discrimination. LGBT2SQ+ people and women of colour also experience added layers of discrimination.

For a person in a relationship, their use of alcohol is sometimes influenced by their partner's drinking patterns as well as stress in the relationship. For people who have children, social expectations and judgments about parenting can add shame and fear about alcohol use. As a result, people may face barriers to seeking and accessing supports to address harmful alcohol use.

Research shows higher incidence of alcohol use among women who have experienced:

- Intimate partner violence
- Violence or abuse as a child
- Sexual assault

Understanding a person's lived experiences, and how root issues can contribute to harmful alcohol use, can help us refrain from judgment. Services that address these root issues, do not judge, and provide holistic services are proven to be the most effective way to address harmful alcohol use.

### Age

Research suggests that the brains and bodies of young females who drink may be particularly vulnerable to the effects of alcohol. Drinking can affect critical physical development during adolescence and young adulthood.

Research shows that 10 per cent of Canadian teens say that using drugs or alcohol was the reason they had intercourse for the first time. Young people who drink are more likely to experience an unplanned pregnancy or a sexually transmitted infection. Short and long-term health and social effects of drinking should be considered when deciding how much and when to drink.

As we age, the kidneys, liver, cardiovascular system and brain all change. These changes make the elimination of alcohol less efficient and can make us more sensitive to the effects of alcohol. It takes less alcohol for older women to feel the effects of alcohol.

### Genetics

Research shows that a person's genetics and family history may affect their risk of developing an alcohol addiction. It is important to consider what role alcohol has had in your own family. However, there are no hard and fast rules. Even if you have a family history of alcohol addiction, it doesn't mean you will have an addiction or experience patterns of harmful alcohol use. In the same way, people without a family history of alcohol addiction can develop an addiction or patterns of harmful alcohol use.



## **3. Other Factors**

Several other important factors can influence the effects of alcohol.

### Pregnancy

Research shows that drinking alcohol during pregnancy may lead to having:

- a baby with Fetal Alcohol Spectrum Disorder (FASD)
- a miscarriage or stillbirth
- a baby with low birth weight
- a baby born prematurely

Fetal Alcohol Spectrum Disorder (FASD) is a diagnostic term used to describe impacts of the brain and body to individuals prenatally exposed to alcohol. FASD is a lifelong disability. Individuals with FASD may experience some degree of challenges in their daily living, and need support with motor skills, physical health, learning, memory, attention, communication, emotional regulation, and social skills (CanFASD Research Network, 2018).

There is no known safe amount or type of alcohol, at any stage of pregnancy. The safest option during pregnancy, when planning to become pregnant, or about to breastfeed, is to not drink alcohol at all.

#### It is safest not to drink alcohol during pregnancy.

Many women may drink before they know they are pregnant – but it is never too late to make changes to alcohol use during pregnancy. Stopping or reducing alcohol use as soon as possible and looking after your health, including regular prenatal care by a health care professional, are the best ways to improve the health of your pregnancy.

To learn more about FASD and about supports in Manitoba for women who are pregnant and use alcohol, please visit: www.gov.mb.ca/fs/fasd/

### Breastfeeding

When a breastfeeding woman drinks, alcohol gets into their breast milk. The amount of alcohol in breast milk is directly affected by the amount the mother consumes. In large amounts, it may affect the breastfeeding baby's sleep or reduce the amount of milk the baby takes at feeding time. It is safest for breastfeeding women to limit their alcohol intake to one drink or less per day. If a breastfeeding woman is going to drink alcohol, it is best to feed the baby first, have a drink and then wait two to three hours before breastfeeding again. This allows time for the alcohol to be eliminated from the mother's body. Mothers who only drink once in a while should continue to breastfeed, because the benefits outweigh the risks. If a breastfeeding woman is planning to drink a few drinks, she may want to pump breast milk beforehand to have available for her baby while she is drinking alcohol.

### **Medication use**

People who are taking certain medications should ask a doctor or pharmacist if they should avoid alcohol when they are taking them. Mixing medications and alcohol can change the way the alcohol or the medication reacts in the body and can create health risks or injuries.

Tranquillizers are prescribed more often for women than men and can increase the depressant effects of alcohol.

### Hunger and fatigue

Both hunger and feeling tired will increase the effects of alcohol. Hunger increases the rate at which alcohol is absorbed into the bloodstream. Fatigue, or having low energy, means your liver won't be able to get rid of alcohol as efficiently. The depressant nature of alcohol may make feelings of tiredness more intense.

Special considerations for women who drink:

- pregnancy
- breastfeeding
- medication use
- hunger and fatigue

## 4. Alcohol and Well-Being

## Health impacts of alcohol use

Females tend to experience more health impacts caused by alcohol use than males do.

Many serious illnesses and chronic health conditions are linked to drinking, even at low levels.

Alcohol use can cause long-term health impacts, including:

- For females, heavy alcohol use can significantly increase the chances of osteoporosis, breast cancer, heart disease, stroke, and alcohol-induced brain damage. These impacts are further complicated if if a person smokes or uses other substances, or if they are exposed to environmental toxins (eg. moulds, pesticides).
- Females develop cirrhosis of the liver more quickly than males, and with less alcohol. Cirrhosis in women is more likely to become more severe or fatal.
- Alcohol use has particular risks for people who are pregnant or are planning to become pregnant. These risks are described in Section 3.

 Research in the past decade shows longterm drinking, even at low levels, is linked to many serious illnesses and chronic health conditions. Long-term alcohol use can increase the risk of at least eight types of cancer (mouth, pharynx, larynx, esophagus, liver, breast, colon, rectum) and numerous other serious conditions (ex: epilepsy, pancreatitis, dysrythmias, hypertension).

Research indicates that higher-risk alcohol use can increase the risk of health impacts such as:

- osteoporosis
- breast and other forms
  of cancer
- heart disease and stroke
- brain damage
- liver disease
- addiction or alcohol dependence

#### **Alcohol and Safety**

Drinking heavily in some social situations can make people more vulnerable to experience violence or sexual assault. This is never the fault of the person who is assaulted. If this has happened to you, support is available:

Sexual Assault Crisis Line (24/7): In Winnipeg: (204) 786-8631; Toll free in Manitoba: 1-888-292-7565

## **5. Support for People Close to You**

If someone close to you would like to make changes to their alcohol use, there are ways you can offer support:

- Look for ways you can support the person to address circumstances in their life that impact their alcohol use. Holistic supports that address issues like trauma, poverty, violence, addiction, mental health, and connection to social supports can strengthen a person's lasting success meeting their goals around alcohol use.
- Ask the person if they want to talk about their alcohol use, and find out what they feel would be most helpful.
- Stay non-judgmental and listen; don't move too quickly to solutions.
- Offer support in practical ways such as doing things together that don't include alcohol, caring for the person's children so they get some time off, or going to an appointment with them.
- Remember that ultimately, you must respect the person's right to decide for themselves whether or not they want to make changes to their alcohol use.



If someone close to you has set a goal about their use of alcohol, ask questions like:

- What are the reasons you chose this goal?
- What are the steps you plan to take to reach your goal?
- Who are the people who can support you to reach your goal? How will they support you?
- Are there any things that could interfere with your goal? How will you deal with these concerns?

All change takes time. If a person sets a goal about their alcohol use, it might take them a few tries before they achieve that goal. It is important to recognize small successes and offer reassurance that your support will be ongoing.

Using shame, blame, and fear to try to make a person change their alcohol use DOES NOT WORK! Research shows that shaming and blaming people actually prevents them from seeking and accessing the supports they need. This is especially true for people who are pregnant and using alcohol. Compassionate, non-judgmental support is the best way to care for people.

## 6. Resources

For more information about alcohol use, or if you are interested in making changes to your use of alcohol, many sources of information and support are available.

## Information, Crisis Support, and Referral

#### **Health Links**

Health Links is a 24-hour, seven days a week phone information service. It is staffed by registered nurses who can answer questions on health care and suggest other resources. Phone 24/7: **204-788-8200** in Winnipeg; Toll-free **1-888-315-9257**.

#### **Klinic Crisis Line**

This is a 24-hour, seven days a week crisis phone line. It offers confidential counselling, support and referral. Phone: **204-786-8686** in Winnipeg; Toll-free: **1-888-332-3019** 

#### Willow Place Crisis Line

This is a 24-hour, seven days a week phone line for women experiencing violence or abuse. Phone: **204-615-0311** in Winnipeg; Toll-free **1-877-977-0007** Website: **willowplaceshelter.ca** 

#### Manitoba Addictions Helpline

This is a toll-free phone line that answers questions about alcohol and drugs and provides support options for those struggling with substance use. This service is available Monday to Friday 8:30am to 4:30pm. Toll-free: **1-855-662-6605** Website: **MBAddictionHelp.ca** 

#### **Community Supports**

#### **Project CHOICES**

This is a Winnipeg program for women who use alcohol and are sexually active. It offers up to four brief counselling sessions and one session with a nurse to talk about birth control options. The program gives you the information you need to make the best choices for your health. Phone Klinic at **204-784-4090** or NorWest Co-op Community Health Centre at **204-938-5941** 

#### **Addictions Foundation of Manitoba**

AFM offers a number of choices depending on your interest or need. If you want help with alcohol or other drugs, for you or your family, you can meet with a counsellor who will help you decide on the service that best suits your needs. Phone toll free:

Northern Region **1-866-291-7774** Parkland Region: **1-877-917-4040** Brandon & Area Region: **1-866-767-3838** Winnipeg Region **1-866-638-2561** Website: **afm.mb.ca** 

### References

- Health Canada. Canadian Tobacco, Alcohol and Drugs (CTADS) Survey: 2017 detailed tables. 2017. Cited Feb 25 2019. Available from: https://www.canada.ca/en/health-canada/ services/canadian-tobacco-alcohol-drugssurvey/2017-summary/2017-detailed-tables. html
- Butt P, Beirness D, Cesa F, Gliksman L, Paradis C, Stockwell T. Alcohol and health in Canada: A summary of evidence and guidelines for lowrisk drinking. Ottawa, ON: Canadian Centre on Substance Abuse2011.
- Tucker KL. Osteoporosis prevention and nutrition. Current Osteoporosis Reports. 2009;7(4):111-7.
- Maurel DB, Boisseau N, Benhamou CL, Jaffre C. Alcohol and bone: review of dose effects and mechanisms. Osteoporosis International. 2011.
- Chen WY, Rosner B, Hankinson SE, Colditz GA, Willett WC. Moderate alcohol consumption during adult life, drinking patterns, and breast cancer risk. JAMA. 2011;306(17):1884-90.
- Li Cl, Chlebowski RT, Freiberg M, K.C. J, Kuller L, Lane D, et al. Alcohol consumption and risk of postmenopausal breast cancer by subtype: the women's health initiative observational study. Journal of the National Cancer Institute. 2010;102(18):1422-31.
- Ikehara S, Iso H, Toyoshima H, Date C, Yamamoto A, Kikuchi S, et al. Alcohol consumption and mortality from stroke and coronary heart disease among Japanese men and women. The Japan Collaborative Cohort Study. Stroke. 2008(http://stroke.ahajournals. org/content/39/11/2936).

- Prendergast MA. Do women possess a unique susceptibility to the neurotoxic effects of alcohol? Journal of the American Women's Association. 2004;59(3):225-7.
- Mancinelli R, Vitali M, Ceccanti M. Women, alcohol and the environment: an update and perspectives in neuroscience. Functional Neurology. 2009;24(2):77-81.
- Greenfield SF, Back SE, Lawson K, Brady KT. Substance abuse in women. The Psychiatric Clinics of North America. 2010;33(2):339-55.
- Rehm J, Taylor B, Mohapatra S, Irving H, Baliunas D, Patra J, et al. Alcohol as a risk factor for liver cirrhosis: a systematic review and meta-analysis. Drug and Alcohol Review. 2010;29(4):437-45.
- Testa M, Livingston JA. Alcohol consumption and women's vulnerability to sexual victimization: can reducing women's drinking prevent rape? Substance Use and Misuse. 2009;44(9-10):1349-76.
- Greenfield SF. Women and alcohol use disorders. Harvard Review of Psychiatry. 2002;10(2):76-85.
- 14. The National Center on Addiction and Substance Abuse at Columbia University. Women Under the Influence. Baltimore, Maryland: The Johns Hopkins University Press; 2006.
- Homish G. Looking Beyond the Individual: The Impact of an Intimate Partner on Health and Health Behaviors. In: Garner JB, Christiansen TC, editors. Social Sciences in Health Care and Medicine: Nova Science Publishers, Inc.; 2008. p. 213-21.

- Poole N, Greaves L, editors. Highs and Lows: Canadian Perspectives on Women and Substance Use. Toronto, ON: Centre for Addiction and Mental Health; 2007.
- Logan T, Walker R, Cole J, Leukefeld C. Victimization and substance abuse among women: Contributing factors, interventions and implications. Review of General Psychology. 2002;6(4):325-97.
- Lown A, Nayak MB, Korcha RA, Greenfield TK. Child Physical and Sexual Abuse: A Comprehensive Look at Alcohol Consumption Patterns, Consequences, and Dependence From the National Alcohol Survey. Alcoholism: Clinical and Experimental Research. 2011;35(317-325).
- Testa M, VanZile-Tamsen C, Livingston JA. Prospective prediction of women's sexual victimization by intimate and nonintimate male perpetrators. Journal of Consulting and Clinical Psychology. 2007;75(1):52-60.
- 20. Spear LP. Alcohol's effects on adolescents. The Journal of the National Institute on Alcohol Abuse and Alcoholism. 2002;26(4):287-91.

- Boyce W, Docherty M, MacKinnon D, Fortin C. Canadian Youth, Sexual Health, HIV/ AIDS Study: Factors influencing knowledge, attitudes and behaviours: Council of Ministers of Education2003.
- 22. Flanigan B. Alcohol use as a situational influence on young women's pregnancy risk-taking behaviours. Adolesence. 1990;25:205-14.
- Giglia RC. Alcohol and lactation: An updated systematic review. Nutrition and Dietetics. 2010;67:237-43.
- 24. CanFASD Research Network. Common Messages: Guidelines for talking & writing about FASD. 2018. Cited Feb 25 2019. Available from: https://canfasd.ca/wp-content/ uploads/sites/35/2019/01/Common-Messages-FINAL-Dec-14-2018.pdf

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