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## Alcohol Consumption in Young Adults: a Higher Overall Risk of Excessive Alcohol Consumption in Men and an Increasing Risk of Heavy Episodic Drinking in Women

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In France, few studies have been conducted thus far on alcohol consumption amongst young people aged 18-30. However, studying the issue of alcohol consumption during the "emerging adult age" period provides a better understanding of the changes during this pivotal period –the transition from adolescence to adulthood–, which tends to be lengthy and results in very diverse situations and life trajectories. During a person's life, the risk of excessive alcohol consumption, which is an "avoidable" risk, culminates in a high proportion of risk of heavy episodic –rather than chronic– drinking between the ages of eighteen and thirty. At any age, the gap between men and women is very significant, as the risk of both episodic and chronic alcohol consumption in men is around twice as high. Almost three quarters of young women are not at risk, and they moderate their drinking at an earlier age, between the age of twenty-five and thirty, while men still increase their drinking. However, between 2002 and 2014, while the overall risk of excessive alcohol consumption tended to decrease amongst men due to a lower risk of chronic alcohol consumption, it increased slightly amongst young women due to a risk of episodic alcohol consumption.

Furthermore, socio-economic factors influence a generation's drinking behaviour. For example, the overall risk of excessive alcohol consumption in employed men aged 18-24 was higher than in students and the unemployed, whereas only unemployed women were less at risk at that age. In men and women aged 18-24 and 25-30, the risk increased with education and income levels. These are the findings of the 2014 European Health Interview Survey (*Enquête Santé Européenne, EHIS*) and previous Health, Health Care and Insurance Surveys (*Enquête Santé et Protection Sociale, ESPS*), conducted between 2002 and 2012.

**E**xcessive alcohol consumption is an avoidable health risk. In this regard, it is important to understand the different patterns of alcohol consumption in the population, particularly the drinking patterns amongst young people, in order to introduce and implement effective preventive initiatives to protect their health in the short and long term. While many national epi-

demiological surveys (Survey on Health and Consumption during the National Defence Preparation Day (*Enquête sur la Santé et les Consommations lors de l'Appel de Préparation à la Défense, ESCAPAD*)) and international epidemiological surveys (Health Behaviour in School-aged Children, HBSC, and the European School Survey Project on Alcohol and other Drugs, ESPAD) on alcohol consumption

in adolescence have been conducted, few studies have been conducted on alcohol consumption during the "emerging adult age" period –a period of family, school, and professional integration. Generally, young people aged 18-30 are either included in general population surveys or partially surveyed according to their academic or professional status. Even when the samples are considerable, young people

## DEFINITIONS

**Standard drink:** A standard drink contains 10 g of pure alcohol, regardless of the type of alcoholic beverage. Examples of standard drinks were included in the survey questionnaire, enabling the respondent to give precise answers to the questions in the AUDIT-C\* (Alcohol Use Disorders Identification Test-Consumption) [see Figure below].

**Heavy episodic drinking (HED):** the third question in the AUDIT C test, used in the ESPS-EHIS survey, defines HED as drinking six or more standard drinks on one occasion. It should be noted that the threshold in the ESCAPAD surveys (conducted amongst seventeen-year-olds) and the French Health Barometer (*Baromètre Santé*) is five standard drinks, which automatically increases the prevalences of HED.

Definitions in the ESCAPAD survey:

- **Regular consumption of alcohol:** Drinking on 10 or more occasions in a month.
- **HED:** Drinking 5 or more standard drinks on one occasion.
- **Repeated HED:** 3 or more drinking episodes in a month.
- **Regular HED:** 10 or more drinking episodes in a month.
- **Repeated drunkenness:** 3 or more episodes of drunkenness in a year.
- **Regular drunkenness:** 10 or more episodes of drunkenness in a year.

### Representation of standard drinks according to the type of alcoholic beverage



aged 18-30 do, in fact, represent a limited group. Furthermore, studying this population can be challenging due to difficulties related to social, professional, and family diversity, which is greater amongst young adults (Castell et al., 2016) than amongst adolescents, nine out of ten of whom attend school and live with their parents (French Monitoring Centre for Drugs and Drug Addiction (OFDT), 2019).

Indeed, risk-taking behaviour develops in adolescence, including heavy episodic drinking (HED)\*. But it is between the ages of eighteen and thirty that the brain becomes physically mature, in particular the prefrontal cortex, an area of the brain that carries out responsible decision-making and the ability to plan and control one's impulses. It is also during this period that young people feel the effects of a lack of academic achievement or family and social difficulties experienced during childhood and adolescence. Moreover, the least stability provided by school, family, peer groups, and a listening ear means that they no longer act as a protective buffer. All these psychosocioeconomic factors –resulting from an individual's personal history and his/her choice of career– play a key role in an individual's development between the ages of eighteen and thirty. In this context, alcohol consumption, engaged in extensively during adolescence, can become a habit in various forms, either by extending –or even increasing– alcohol consumption that is characteristic of young people, with search for drunkenness, or by drinking in a more mature manner, that is to say drinking in a more controlled and moderate way, and in a cultural context.

Although the alcohol consumption of seventeen-year-olds decreased significantly between 2014 and 2017, in both males and females –regular consumption decreased from 12.3% to 8.4% and repeated heavy episodic drinking (HED)\* from 21.8% to 16.4% (2017 ESCAPAD data, French Monitoring Centre for Drugs and Drug Addiction (OFDT))–, alcohol remains a substance that is widely experimented with and consumed by adolescents (see Inset opposite). Alcohol consumption in young adults is a pressing issue, especially as this age category is associated with a "new age in life" (Galland, 2001), between adolescence and adulthood, a transition that seems to have become increasingly prolonged over

## I

### The ESCAPAD survey's findings on alcohol consumption in young people aged 17

Alcohol consumption in young people at the dawn of their age of majority in civil law is a predictor of future drinking patterns. Although experimentation with alcohol amongst young people aged seventeen has continued to decrease since 2000, the same cannot be said about regular consumption of alcohol and heavy episodic drinking (HED: drinking 5 or more standard drinks on one occasion)\* which have fluctuated but decreased between 2014 and 2017. Young men were more likely to engage in regular and heavy episodic drinking than young women, regardless of the indicator, except for alcohol experimentation. According to data from 2014 and 2017 Surveys on Health and Consumption during the National Defence Preparation Day (ESCAPAD) [French Monitoring Centre for Drugs and Drug Addiction (OFDT)], amongst young people aged seventeen :

- **Alcohol is a substance that is widely experimented with.** In 2017, most young people (85.7%) had already consumed alcohol (2014: 89.3%), but only 8.4% (2014: 12.3%) consumed alcohol regularly\*. Young men were more likely to be regular consumers than young women: 12.0% compared with 4.6% (2014: 17.5% and 6.8%). However, the daily consumption of alcoholic beverages was uncommon: less than 1.3% (2014: 1.8%), 2.1% of young men compared with 0.1% of young women. Forty-four per cent of seventeen-year-olds were heavy episodic drinkers: 49.6% of young men and 38.1% of young women (2014: 48.8%, 54.6% of young men and 42.9% of young women); and 16.4% engaged in repeated HED\* (at least 3 or more drinking episodes in a month): 21.7% of young men and 10.9% of young women (2014: 21.8%, 28.3% of young men and 15.2% of young women).
- **Alcohol is consumed with friends, and sometimes in a family setting.** In 2017, the last HED episode occurred at a party on the weekend in 90.1% of the cases, with friends in 90.1% of the cases (2014: 89.4%) –only 2.5% were alone (2014: 1.2%). In three out of ten cases, that is to say 29.8% (2014: 9.7%), the last HED episode occurred in the presence of parents.
- **For some people, alcohol consumption is part of poly-substance use.** In 2014, 4.5% of young people aged seventeen smoked and drank regularly. The combination of alcohol and tobacco consumption was more common than the combination of alcohol and cannabis consumption (0.1%). Only 8% of respondents had never consumed alcohol, tobacco or cannabis.

time and is characterised by several sociological phenomena: an increase in the time spent in formal education and training, an extended "period of high expectations and dithering" and a "space-time" prior to graduation and founding a family (Le Bras, 1983), a prolonged cohabitation with parents, etc., which result in diverse situations and life trajectories (Moreau et al., 2019). We can therefore assume that alcohol consumption, which is closely linked to an individual's socio-cultural, family, and relational environment, also changes during this period.

The aim of this study was twofold: first, to analyse alcohol consumption in young adults aged 18-30 according to four graduated alcohol consumption profiles, in comparison with that in young peo-

ple aged 16-17 and that of their elders, and to chart the changes in alcohol consumption over a twelve-year period, from 2002 to 2014. Secondly, the prevalences of the different profiles were identified according to certain socio-economic and health statuses.

**Alcohol consumption in young adults aged 18-30: the age of maximum risk, significantly higher amongst men**

According to data from the 2014 European Health Interview Survey (EHIS), the gap at any age between men and women was significant, as the risk of both episodic and chronic alcohol consumption amongst men was significantly

higher than amongst women. That is why the analyses are always presented according to gender.

**The ways in which alcohol is consumed change over a lifetime**

Young adults aged 18-30 were those with the highest risk of alcohol consumption. Compared with the whole population of people aged 16 or over living in standard households, in all age groups, the whole population of young adults aged 18-30 – both men and women – was more at risk of problematic alcohol consumption: this was due to a greater proportion of young people at risk of heavy episodic drinking (men: 46.2% compared with 32.3% in all age groups; women: 26.2% compared with 14.6%). However, the proportion of

**SOURCES AND METHOD**

The data analysed in this study was obtained from the 2014 European Health Interview Survey (EHIS) and previous French biannual health surveys (Health, Health Care and Insurance Surveys (ESPS)) conducted between 2002 and 2012, as all these major studies used validated tests to question respondents about alcohol consumption. EHIS, which is now the only general health survey that is representative of the entire French population living in standard households in mainland France, was conducted by the Directorate for Research, Studies, Assessment and Statistics (French Ministry of Health) [Direction de la Recherche, des Études, de l'Évaluation et des Statistiques, DREES] and the Institute for Research and Information in Health Economics (IRDES) in 2014 and 2019.

In the seven major biannual studies based on these surveys (2002-2014), all the persons questioned aged 15 or 16 (depending on the year) or over (without an age limit) responded, via self-administered questionnaires, to the standard test AUDIT-C (Alcohol Use Disorders Identification Test-Consumption), which has been validated in France and consists of three questions on alcohol use during the previous twelve months: Q1. *How often did you have a drink containing alcohol in the past year?* Q2. *How many standard drinks\* did you have on a typical day when you were drinking in the past year?* Q3. *How often did you have six or more standard drinks on one occasion in the past year?* A standard drink\* contains 10 g of pure alcohol, regardless of the type of alcoholic beverage (see Figure on p.2).

The standard test AUDIT-C consists of the three first questions of the full 10-question AUDIT questionnaire, developed by the World Health Organisation (WHO). It is more sensitive and specific than other tests for identifying consumers at risk or alcohol-dependent persons, hence its usefulness during a general medicine consultation and the importance of using it in population-based surveys. The test made it possible to evaluate weekly alcohol consumption ("total volume") and classify individuals according to risk level using an algorithm (see Figure opposite).

Hence, the data from the 2014 ESPS-EHIS survey made it possible –based on the responses to the AUDIT-C test and the WHO's recommendations for safer alcohol consumption– to construct alcohol consumption profiles of respondents. Amongst

young people aged 18 to 30, the following four graduated risk profiles were identified: non-consumers of alcohol (NC), safe consumers (SC), at episodic risk consumers (ERC), and at chronic risk or alcohol-dependent consumers (CRC). As these terms suggest, the last two categories represent populations at risk of problematic drinking with distinct patterns: the former only exposed themselves to risks occasionally, but, sometimes, in a significant way (alcoholic coma, accidents, unprotected sex, fights, etc.), and even frequently; the latter exposed themselves to risks to their health and, above all, to their future health, in an almost permanent and detrimental way, on both a mental and somatic level (cardiovascular diseases, hepatic cirrhosis, cancer, psychosis, etc.).

In 2014, 15,213 persons were questioned about their patterns of drinking and were classified into one of four constructed alcohol consumption profiles (7,268 men and 7,945 women), amongst whom 2,626 were young adults aged 18-30 (1,286 men and 1,340 women). The individuals who were not classified into a profile, due in particular to missing data, were excluded from the analysis.

**Classification into four alcohol consumption profiles and prevalence in individuals aged 18-30 according to gender, 2014 (%)**

Alcohol consumption profiles	Classification algorithm according to the quantity and frequency of alcohol consumption (standard drinks*)		Percentage of persons aged 18-30 in 2014
	Weekly volume	6 or more drinks on one occasion	
At chronic risk consumers	Women ≥ 15 drinks Men ≥ 22 drinks	Or ≥ Once/week	2 11
At episodic risk consumers	Women ≤ 14 drinks Men ≤ 21 drinks	And ≤ Once/month	26 46
Safe consumers	Women ≤ 14 drinks Men ≤ 21 drinks	And Never	36 23
Non-consumers	Women 0 drink Men 0 drink	And Never	36 19

\*A standard drink contains around 10 g of alcohol

Source: EHIS-ESPS Survey 2014 (IRDES)

young adults aged 18-30 at risk of chronic alcohol consumption (including alcohol dependence) almost equalled that of the whole population of people aged 16 or over, for both men (11.3% compared with 11.6%) and women (2.0% compared with 2.4%).

Per age group, from the end of adolescence (in this case, people aged 16-17) to elderly people (≥80 yrs), the prevalences of episodic excessive alcohol consumption increased rapidly at the expense of non-consumption and safe consumption, and then only decreased very gradually. Men aged 50 or over had higher rates of chronic excessive alcohol consumption.

**In the transition to adulthood, excessive alcohol consumption increases in men and declines in women**

Amongst young adults aged 18-30, as amongst adolescents and the elderly, alcohol drinking behaviour was clearly related to gender. Taken as a whole, 57.5% of men aged 18-30 were at risk of excessive alcohol consumption, compared with 28.2% of women. Men and women were

more likely to have an episodic (46% and 26%) rather than a chronic drinking pattern (11% and 2%), that is to say risks that were 1.8 and 5.7 times greater in men. In contrast, almost three quarters of young women were not at risk of drink-related health problems (72%, half of whom did not consume alcohol), compared with only 42% of young men (19% of whom did not consume alcohol).

Per age group, the proportion at risk of excessive alcohol consumption therefore increased in men aged 18-24 (risk of episodic drinking: 42%; risk of chronic drinking: 12%) and peaked in the 25-30 age group (51% and 10% respectively). The risk decreased in the 31-49 age group, reaching the same level as that of the 18-24 age group. In the subsequent age groups, the risk of episodic drinking steadily decreased, reaching 6% in the 80 or over age group, mainly in favour of safe consumption, as the risk of chronic drinking varied around 12%, but with a peak of 15% in the 65-79 age group. Non-consumption produced a J-shaped curve with a maximum of 47% in minors and a minimum of 11% in the 50-64 age group.

**CONTEXT**

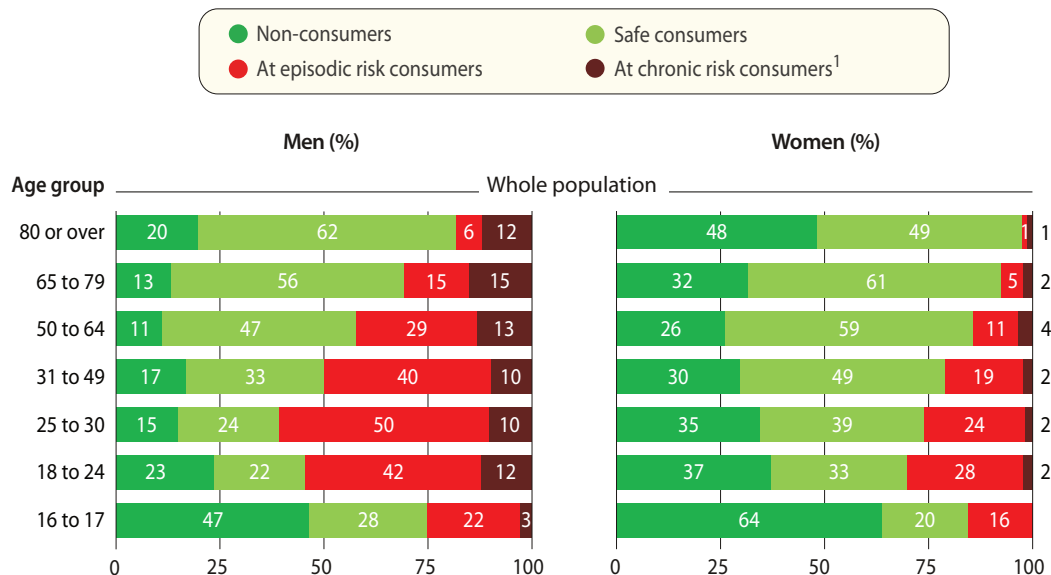
Recent analyses of the risk factors for external health (social status, societal changes, etc.) and internal health (personality, brain function, etc.) carried out by specialists in various scientific disciplines have been compiled in a collective work (Moreau et al., 2019). The results published in this article complement the initial analyses by adding issues that were not addressed in these analyses.

**Young women moderate their drinking at an earlier age and on a more long-term basis**

Amongst women, the proportion at risk of episodic drinking peaked at 28% in the 18-24 age group and then decreased very steadily, at an earlier age than men, decreasing to 24% in the 25-30 age group and only 1% in the elderly. Young women moved more quickly than young men to more controlled drinking, as the switch began at the age of 22-23. Very few women were at risk of chronic drinking: 2% in the 18-24 and 25-30 age groups;

G1

Alcohol consumption profiles throughout the life course according to age and gender, 2014 (%)



<sup>1</sup> including alcohol-dependent consumers.

Scope: France (except Guyana and Mayotte), population aged 16 or over.

Source: EHIS-ESPS Survey 2014 (IRDES).

[Download the data](#)

the highest proportion (4%) was in the 50-64 age group. Safe consumption was more common than non-consumption in the 25-30 age group (39%) and subsequently increased to 61% in the 65-79 age group; it then decreased slightly in the 80 or over age group. Overall, the proportion of non-consumption was twice that of men, in all age groups, and, according to age, it produced a U-shaped curve, with a maximum of 64% in the 16-17 age group, a proportion of 48% in the 80 or over age group, and a minimum proportion in the 50-64 age group (26%) (see Graph 1).

### From 2002 to 2014: a marginal decrease in risk in men but a slight increase in women

How has the risk of excessive alcohol consumption in young adults developed since the beginning of the twenty-first century? The IRDES Health, Health Care and Insurance Survey (ESPS) enabled us to observe the evolution in the prevalence of the risk of episodic and chronic drinking over a twelve-year period. Between 2002 and 2014, excessive consumption was broadly stable but converged slightly between men and women (see Graph 2).

In men aged 18-30, the overall risk of excessive alcohol consumption tended to decrease due to a decrease in chronic excessive alcohol consumption, whereas the overall risk in young women tended to increase due to an increased risk of episodic drinking.

### There was an increased risk of excessive alcohol consumption in the most advantaged social classes

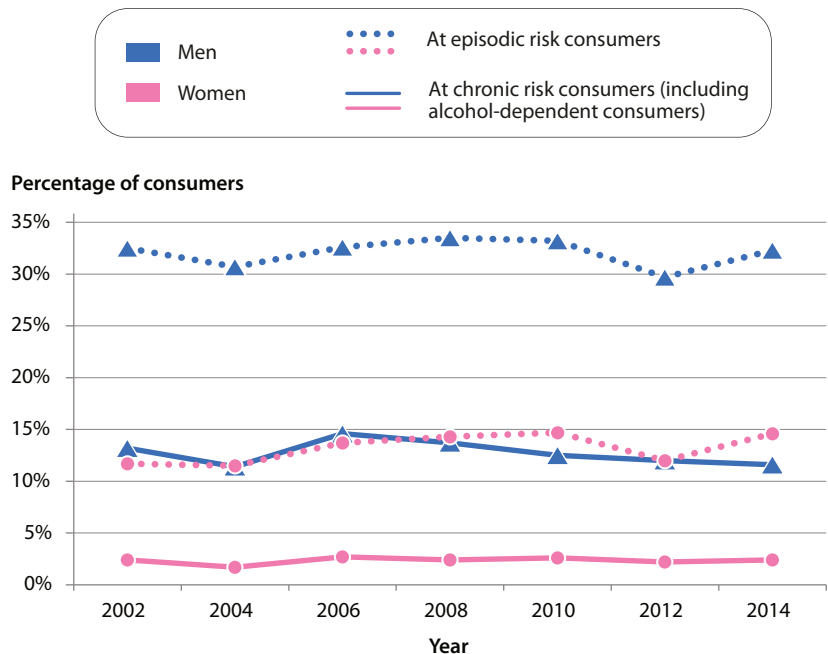
Although age is a key determinant of drinking behaviour, other socioeconomic factors (principal occupation, socio-professional category, educational level, monthly income, etc.) influence a generation's drinking behaviour. Only the results relating to statuses that were adequately represented are shown in this study.

### The risk of excessive alcohol consumption was higher in employed men than in students

According to data from the 2014 European Health Interview Survey, being a student, being in work, or unemployed

G2

## Evolution in the prevalence of episodic and chronic drinking according to gender, in individuals aged 18-30, 2002 to 2014 (%)



Scope: France (except Guyana and Mayotte), population aged 16 or over.

Source: EHIS-ESPS Survey 2014 (IRDES).

[Download the data](#)

impacts drinking behaviour. Since these statuses changed significantly between the ages of 18 and 30, particularly on the completion of higher education studies, these influences were particularly evident in the transition from the 18-24 age group to the 25-30 age group.

In men aged 18-24, the risk of excessive alcohol consumption was highest in employed men, who a priori had more disposable income on average than students and the unemployed, since 54% of employed men were episodic excessive drinkers and 16% were chronic excessive drinkers. Amongst students, these proportions were on average significantly lower (36% and 10% respectively), and even lower than the proportions of young unemployed men (39% and 12% respectively), as opposed to certain misconceptions that are sometimes relayed in the media, but which are disproved by the figures (Didier Nourrisson in Moreau et al., 2019).

In the 25-30 age group, the proportion of episodic excessive drinkers and that of chronic excessive drinkers decreased slightly in employed men (51% and 11% respectively). The students in this age

group were few and non-representative. However, unemployed men in this age group have their risks increased (48% and 9% respectively).

### Amongst women, students were as much at risk of excessive drinking as employed women

There was a difference between young women and men in the 18-24 age group. Apart from the previously identified lower prevailing risk, students were as much at risk as employed women, but there was a higher proportion of chronic excessive drinkers: 30% of the students were episodic excessive drinkers and 4% chronic excessive drinkers, and in employed women the proportions were 34% and 1% respectively. Young unemployed women were slightly less at risk (24% and 2% respectively).

As in men, the risk of excessive drinking decreased with age in employed women aged 25-30 (26% and 1% respectively) and increased with age in unemployed women (26% and 2% respectively). Housewives were relatively free of the risk of excessive drinking (15% were at risk of heavy episodic drinking and 1% at

risk of heavy chronic drinking) in favour of non-consumers of alcohol (61%) [see Graph 3].

### A pronounced social gradient in early adulthood (25-30)

A study of the professional categories provided a certain number of possible explanatory elements. In younger men aged 18-24, chronic excessive alcohol consumption was particularly prevalent in three professional categories: the intermediary professions (22%), unqualified workers (19%), and qualified workers (12%). Around half of unqualified (49%) and qualified workers (52%) and a slightly lower proportion of individuals in the intermediary professions (41%) were episodic heavy drinkers.

As age increased, in the 25-30 age group, the higher professional categories, requiring longer periods of study, emerged, and a gradient from the bottom upwards was clearly visible, as the overall risk (episodic and chronic) was highest in male and

female executives and men and women working in the intellectual professions. In men, there was an increased risk in managerial staff and people working in the intellectual professions (70%), in favour of both chronic excessive drinking (11%), and, above all, episodic excessive drinking (59%). Less at risk were unqualified workers (5% and 48%) and qualified workers (10% and 46%). The other professions, such as farmers, were not representative (insufficient numbers).

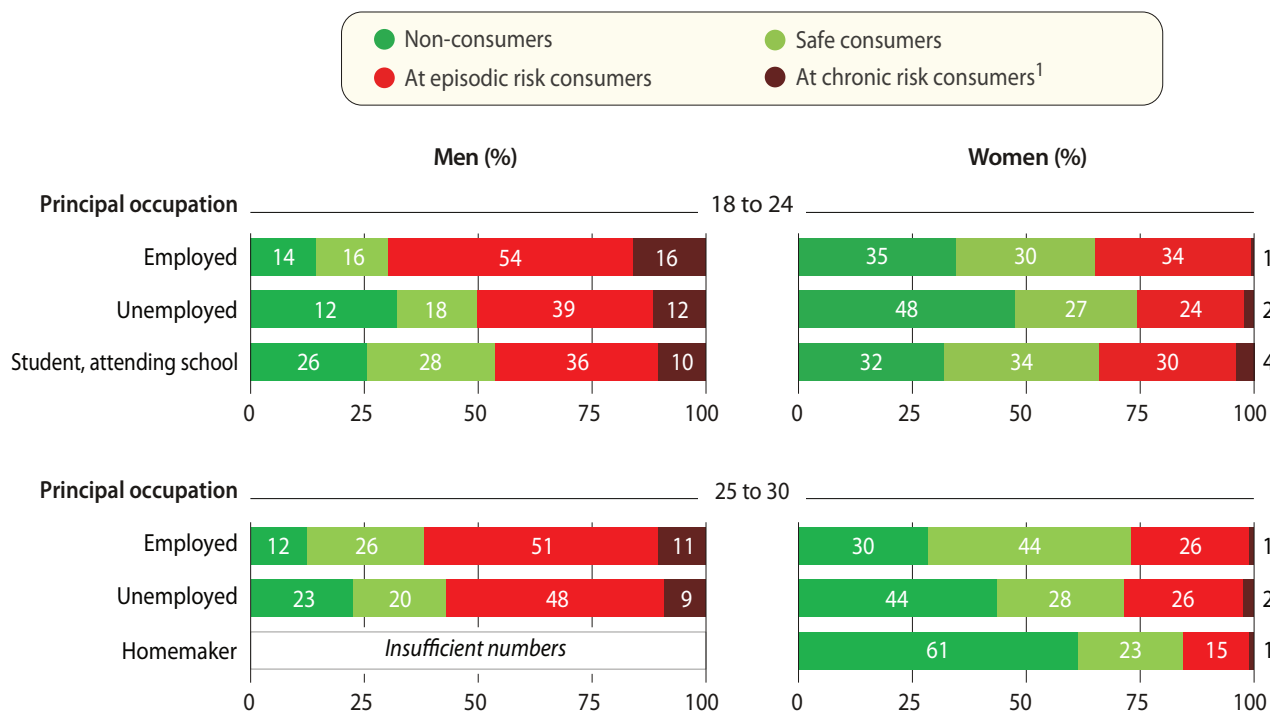
In contrast with men, the risk of excessive alcohol consumption decreased with age in women in most of the socioprofessional categories in the 25-30 age group. In women, the lowest risk was found in unemployed women who had never worked (episodic excessive drinking: 12%; chronic excessive drinking: 7%) and individuals in the middle of the social ladder (employees and the intermediary professions). However, female executives, 40% of whom were episodic excessive drinkers, stood out. The other professions, such as workers, were not representative.

### In men and women, the risk of excessive drinking increased with high educational attainment...

The educational level, a reflection of social status, is closely associated with risky alcohol consumption. In young men aged 18-24, both episodic and chronic excessive alcohol consumption increased almost linearly with educational attainment in those who had completed their studies. The results are consistent with the findings observed for the socio-professional categories: hence, 18% of young men with higher education qualifications were chronic excessive drinkers and 55% episodic excessive drinkers, totalling nearly three quarters of individuals at risk, in contrast with those who were less qualified (7% and 35% respectively). Young students had a much lower risk profile than highly qualified individuals who had completed their studies; the proportions were closer to those of less qualified individuals. In the 25-30 age group, the gradients remained even though chronic excessive drinking decreased in

G3

Alcohol consumption profiles according to the principal occupation, age and gender of young adults, 2014 (%)



<sup>1</sup> including alcohol-dependent consumers.

**Note:** The principal occupation statuses were not represented when the numbers were insufficient (< 50); depending on the cases, they may be homemakers, inactive people due to a disability or other reason, students, or individuals attending school.

**Scope:** France (except Guyana and Mayotte), population aged 16 or over.

**Source:** EHIS-ESPS Survey 2014 (IRDES).

[Download the data](#)

highly qualified men. The same was true for holders of a school leaving certificate (BEPC)/Professional Aptitude certificate (CAP)/Diploma of Professional Studies (BEP), in whom the decrease was offset by an increase in episodic heavy drinking.

The same risk gradients were also observed in women: in the 18-24 age group, episodic excessive drinking increased from 9% in less educated women to 37% in highly qualified women. However, women pursuing post-secondary education had risk rates that were similar to highly qualified women, in contrast with young men. In the 25-30 age group, episodic excessive drinking decreased in favour of safe consumption in highly qualified women, but in favour of non-consumption in women without qualifications (60% did not consume alcohol) [see Graph 4].

... and with the income level

The monthly income level, expressed in terms of net income per consumption unit (CU), that is to say taking into account the household composition according to the OECD scale, was also consistent with the previous results. In men aged 18-24, the risk of excessive drinking increased with the income level. It peaked at 68% in the fifth quintile, 19% of whom were chronic excessive drinkers. Men in the first quintile had an intermediate risk of excessive drinking (an overall risk of 53%, 7% of whom were chronic excessive drinkers). In the 25-30 age group, the distribution of profiles remained essentially the same according to income. The proportion at risk of chronic excessive drinking decreased slightly, except in the first and second quintiles, in which it increased.

In young women aged 18-24, the risk of excessive drinking was also lowest in the second quintile (18% were episodic excessive drinkers). From the third to the fifth quintile, episodic excessive drinking varied slightly above 30%, whereas safe alcohol consumption increased at the expense of non-consumption. In the 25-30 age group, episodic excessive drinking decreased in almost all the income brackets, in favour of safe alcohol consumption (first and third quintiles) and nonconsumption (fourth quintile).

The risk of excessive alcohol consumption was lower in the underprivileged

Benefitting from free Complementary Universal Health Insurance (*Couverture Maladie Universelle Complémentaire*, or CMU-C), which is an indicator of precarity, was linked to a lower risk of exces-

G4

Alcohol consumption profiles according to educational level, age and gender, 2014 (%)



<sup>1</sup> including alcohol-dependent consumers; <sup>2</sup> Certificate of primary studies (CEP); <sup>3</sup> Professional Aptitude certificate (CAP); <sup>4</sup> Diploma of Professional Studies (BEP).

**Note:** There were few or no holders of a certificate of primary studies (CEP). The "studying" variable was not represented when the numbers were insufficient (< 50).

**Scope:** France (except Guyana and Mayotte), population aged 16 or over.

**Source:** EHIS-ESPS Survey 2014 (IRDES).

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sive alcohol consumption, a fortiori in young people: for example, only 29% of young men aged 18-24 who benefited from free Complementary Universal Health Insurance (CMU-C) were at risk of excessive alcohol consumption (episodic or chronic), compared with 55% of non-beneficiaries; the difference amongst women of the same age was larger (7% and 34%). However, the risk of excessive alcohol consumption increased with age, particularly in men aged 25-30; the prevalences of their excessive alcohol consumption profiles were similar to those of non-beneficiaries of free Complementary Universal Health Insurance (CMU-C).

\* \* \* \*

Alcohol consumption in young adults aged 18-30 –the "space-time" prior to graduation and founding a family (Le Bras, 1983), which results in diverse situations and life trajectories– is therefore a pressing issue. Hence, alcohol consump-

tion, which is closely linked to an individual's socio-cultural, family, and relational environment, also changes during this period.

These findings, obtained from surveys representative of the French population, provide reliable data on the level of alcohol-related risk according to gender, age, and socio-economic status. It highlights the development of the risk of excessive alcohol consumption and the pronounced differences between men and women.

Furthermore, these findings run counter to certain preconceived ideas that students are always most at risk of excessive alcohol consumption: amongst men, they came third after young working people and the unemployed. However, female students had a risk level similar to that of working women aged 18-24.

Lastly, the Health, Health Care and Insurance Survey (ESPS)-which was

based on identical data collection in seven consecutive surveys over a period of more than ten years, which were representative of the entire population of persons aged 16 or over-has a definite advantage compared with other more targeted surveys. The data shows, between 2002 and 2014, a slight decrease in the risk of excessive alcohol consumption in young adult men, due to a decrease in chronic excessive drinking, and a slight increase in young adult women, due to an increase in episodic excessive drinking, with a consistently higher risk in men.

A more in-depth analysis will be conducted and presented in a forthcoming publication, by integrating, in addition to the alcohol-related risk, other behavioural factors that influence the current and future health status of young adults: smoking, nutrition (consumption of fruits and vegetables), and practice of physical and sport activities. ♦

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