

STATISTICS PRESS NOTICE – Socio-Demographic Associations of Alcohol-specific mortality in Northern Ireland



9:30am Thursday 25th March 2021

Associations of Alcohol-specific mortality in Northern Ireland

The Northern Ireland Statistics and Research Agency (NISRA) has today published research examining recent trends and socio-economic associations in alcohol-specific mortality in the Northern Ireland population.

Age-standardised mortality rates (ASMRs) are used to directly compare mortality rates for different groups, including males with females, or regions, using the age structure of a standard population. The alcohol-specific ASMR (per 100,000) in Northern Ireland, for persons aged 15-74 years, increased by 48% from 15.8 in 2001 to 23.4 in 2019. Between 2001 and 2019, male (m) mortality rates for alcohol-specific deaths have been approximately two times higher than female (f) rates. However, mortality rates for females have risen more sharply than for males since 2001, both where alcohol is the underlying cause of death (+41% m, +64% f) and where alcohol is a contributory cause (+76% m, +124% f).

For contributory alcohol deaths in younger persons (aged 16-44 years), the main underlying causes of death were drug-related (38%) and transport accidents (18%). Older adults (aged 45+ years) with alcohol as a contributory factor in deaths had most commonly a chronic condition as the underlying cause of death for example, circulatory (29%) and respiratory illness (16%).

There was notable geographic variation in alcohol deaths (combined underlying and contributory causes). The highest ASMRs (per 100,000) were evident in Belfast (59.9) and Derry and Strabane (49.2) Local Government Districts. There was a five-fold greater alcohol-specific (combined underlying & contributory causes) ASMR in the most deprived areas compared to the least deprived areas.

Alcohol deaths (combined underlying and contributory causes) are observed across a range of socio-economic groups, however, after taking account of other factors, the most at-risk groups are those in households without access to a car; males; those living alone having been separated/divorced or widowed; and persons aged 45-64 years. An excess risk of alcohol death (combined underlying and contributory causes) was associated with urban residence (22%) and with an indication of mental illness (20%).

Females aged 65-74 years (compared to females aged 16-44 years) had a 42% reduced likelihood of alcohol death while males aged 65-74 years had a 23% increased likelihood of alcohol death (compared to males aged 16-44 years).

The research has been funded by the [Economic & Social Research Council](#) via [ADR UK](#) (Administrative Data Research UK) and taken forward by NISRA, who together with the Administrative Data Research Centre Northern Ireland (comprising the Queen's University Belfast and Ulster University), form the ADR Northern Ireland (ADR NI).

Today's research findings follow a previous [NISRA-led published research report](#), published in March 2020, analysing the socio-economic associations with drug-related mortality in Northern Ireland.

NISRA

March 2021

NOTES TO EDITORS

1. The research report on alcohol-specific mortality can be found at:
<https://www.nisra.gov.uk/publications/alcohol-specific-deaths-northern-ireland-socio-demographic-analyses>
2. All media queries to Department of Finance Press Office at dof.pressoffice@finance-ni.gov.uk. The Executive Information Service operates an out of hours service **for media enquiries only** between 1800hrs and 0800hrs Monday to Friday and at weekends and public holidays. The duty press officer can be contacted on 028 9037 8110.
3. **Alcohol-specific deaths** are deaths resulting from health conditions that are a direct consequence of problematic alcohol use, e.g. alcoholic liver disease. Alcohol deaths extend beyond those deaths which can be directly attributed to alcohol. To gain a greater understanding of the overall alcohol mortality burden in Northern Ireland, as well as reporting on where alcohol was the underlying cause of death, **contributory alcohol** deaths where an alcohol-specific cause was recorded anywhere on the death certificate (but not listed as the underlying cause) have been included in the analyses.
4. Mortality rates generally increase with age. A population with a greater proportion of older people is expected to have more deaths per population. To adjust for different age profiles in different populations (e.g. different regions or countries), statistical techniques are used to adjust or 'standardize' mortality rates among populations to be compared. **Age-standardised mortality rates (ASMRs)** are presented per 100,000 people and are standardised to the [2013 European Standard Population](#).
5. All figures and rates in the research report are based on year of occurrence of the alcohol-specific death, as this was an appropriate means to undertake modelling based analyses. NISRA's official statistics on alcohol-specific deaths are not directly comparable to any figures included in this research report, as official deaths data for all UK countries are counted on the basis of the calendar year in which the death is registered rather than the year in which the death occurred.
6. ADR UK (Administrative Data Research UK) is a partnership transforming the way researchers access the UK's wealth of public sector data, to enable better informed policy decisions that improve people's lives. ADR UK is made up of three national partnerships (ADR Scotland, ADR Wales, and ADR NI) and the Office for National Statistics (ONS). It is funded by the Economic and Social Research Council which is part of the UK Research and Innovation.
7. ADR NI is a partnership between the Administrative Data Research Centre Northern Ireland (ADRC NI, comprising Queen's University Belfast and Ulster University), and the Northern Ireland Statistics and Research Agency (NISRA). Together they support the acquisition, linking and analysis of administrative data sets, developing cutting-edge research to improve knowledge, policymaking and public service delivery.
8. Further information on the statistics provided in this publication can be obtained from NISRA Customer Services at:
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