ALCOHOL AND INJURY OVERVIEW

In 2011, alcohol was reported as the greatest risk factor for injury in Australia, contributing to 21% of the overall injuries burden. Injury is defined as the intentional or unintentional harm to a person resulting from contact with an object, substance or another person, either through excessive energy or the sudden absence of vital elements, such as oxygen.

Leading injury areas associated with alcohol consumption include transport, suicide and self-harm, violence, and poisoning. Figure 1 represents the burden of alcohol use on injury in Australia in 2011, shown in disability-adjusted life years (DALY). DALY is a measure (in years) of healthy life years lost due to premature death, disability, or ill-health.

Alcohol consumption influences the risk of injury and injury severity. Both the volume of alcohol consumed and the pattern of drinking over time can influence injury risk. Even at moderate doses, alcohol consumption can impact risk-taking behaviour and psychomotor performance, including cognition, co-ordination, and reaction time, which can influence injury risk.

FIGURE 1. Burden of alcohol use on injury, Australia 2011

Alcohol contributed to 22.8% of injury hospitalisations for Aboriginal people in WA between 2000-2008, compared to 10.5% among non-Aboriginal people.

MALES ACCOUNTED FOR 57% OF ALL ALCOHOL-RELATED INJURY HOSPITALISATIONS BETWEEN 2000-2008

Alcohol-related injury represents a significant burden to the Western Australian (WA) community. In 2012, the total lifetime cost of alcohol-related injury in WA cost an estimated $1.9 billion due to health care costs, long term care needs, loss in paid productivity, and quality of life lost. Additionally, injury deaths and hospitalisations which could be attributed to alcohol involvement ($211,694 mean cost per event) had higher mean costs than those without alcohol involvement ($138,455 mean cost per event) in 2012.
Alcohol and specific injury areas in WA

Transport

In 2016, 32% of road fatalities (62 fatalities) in WA were related to alcohol. Additionally, from 2000-2008, 11.2% of hospitalisations related to land transport injuries were attributed to alcohol, equating to 4,517 hospitalisations.

The influence of alcohol on transport injuries has been attributed to a range of factors, including the impact on consumer’s response time, visual functioning, tracking ability, and alertness.

Violence

In WA from 2000 to 2008 alcohol contributed to 45.3% of hospitalisations due to interpersonal violence. In some regional WA areas, rates of violence are significantly higher than the state average, such as the Kimberly (895% greater than the state rate).

Alcohol can influence violence by impairing the consumer’s capacity to resolve conflicts verbally and increasing risk-taking behaviour, which can be compounded by a reduced fear of consequences.

Suicide and self-harm

In WA from 2000 to 2008 alcohol contributed to 30.7% of hospitalisations due to self-harm and suicide. Research suggests that alcohol consumption can increase psychological distress and aggressiveness, which can increase the risk for suicide and self-inflicted injuries.

Table 1 shows the injury related hospitalisations (2000-2008) and fatalities (2000-2007) in WA due to alcohol.

Table 1. The percentage of injury-related hospitalisations and fatalities in WA due to alcohol for each injury area.

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<tbody>
<tr>
<td>Violence</td>
<td>45.3%</td>
<td>44.4%</td>
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<tr>
<td>Suicide</td>
<td>30.7%</td>
<td>31.5%</td>
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<tr>
<td>Transport (land)</td>
<td>11.2%</td>
<td>23.2%</td>
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<tr>
<td>Drowning</td>
<td>6.3%</td>
<td>13.4%</td>
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<tr>
<td>Poisoning</td>
<td>1.7%</td>
<td>6.9%</td>
</tr>
<tr>
<td>Falls</td>
<td>12.5%</td>
<td>13.7%</td>
</tr>
<tr>
<td>Fires, burns and scalds</td>
<td>3.3%</td>
<td>31.8%</td>
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What populations are at heightened risk of alcohol-related injuries?

Young adults

Young adults (aged 15-24 years) are overrepresented in transport and violence alcohol-related hospitalisations. In WA between 2010 and 2016, 30% of all alcohol-related fatal crashes involved young drivers aged 25 years and under.

Aboriginal people

From 2000 to 2008, Aboriginal people in WA were twice as likely to be hospitalised due to an alcohol-related injury than non-Aboriginal people, with alcohol contributing to 22.8% of all Aboriginal people’s injury hospitalisations.


