



Preventing Harmful Alcohol Use

Alcohol can be a source of enjoyment and is an important part of the economy in many countries. Yet harmful alcohol use is a leading risk factor for premature death, injuries and many non-communicable diseases. Harmful alcohol use can also affect others, for example in the case of violence and foetal alcohol syndrome. These diseases and injuries, in turn, have an impact on healthcare budgets and the productivity of the labour force.



Australia consumes **10.5 litres of pure alcohol** per capita per year, roughly equivalent to 2.2 bottles of wine or 4.0 litres of beer per week per person aged 15 and over. In addition, in Australia, some population groups are at higher risk than others; specifically:



36% of adults engage in binge drinking at least once a month. This corresponds to drinking more than 80% of a bottle of wine or 1.5 litres of beer per occasion.



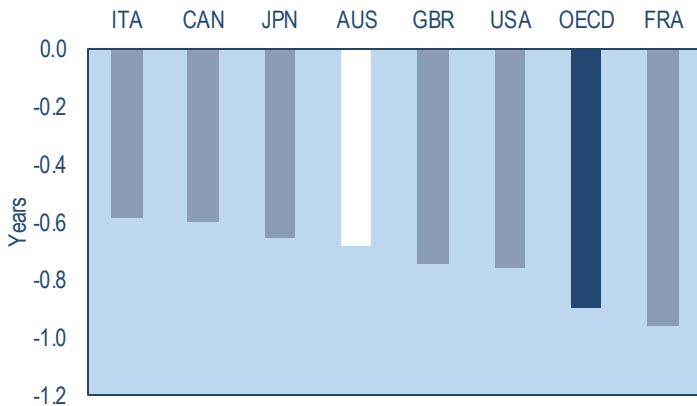
Men consume 16 litres of pure alcohol per capita per year while **women consume 5.2 litres** per capita per year



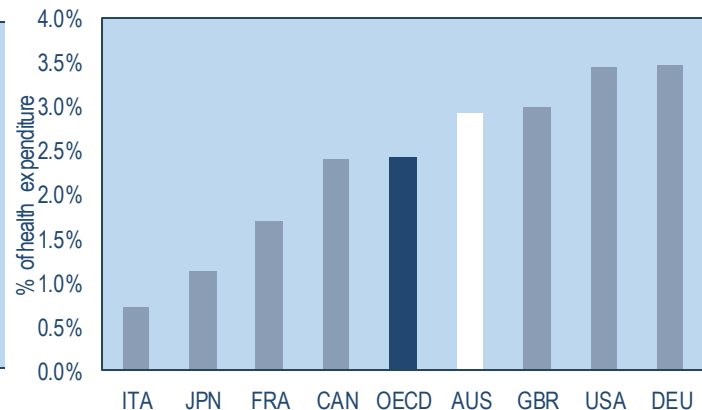
1.5% of adults are dependent on alcohol

Life expectancy is **0.7 years lower** over the next 30 years due to disease and injuries caused by drinking more than 1 drink per day for women and 1½ drinks per day for men, on average in the whole population, according to OECD simulations.

Impact on life expectancy

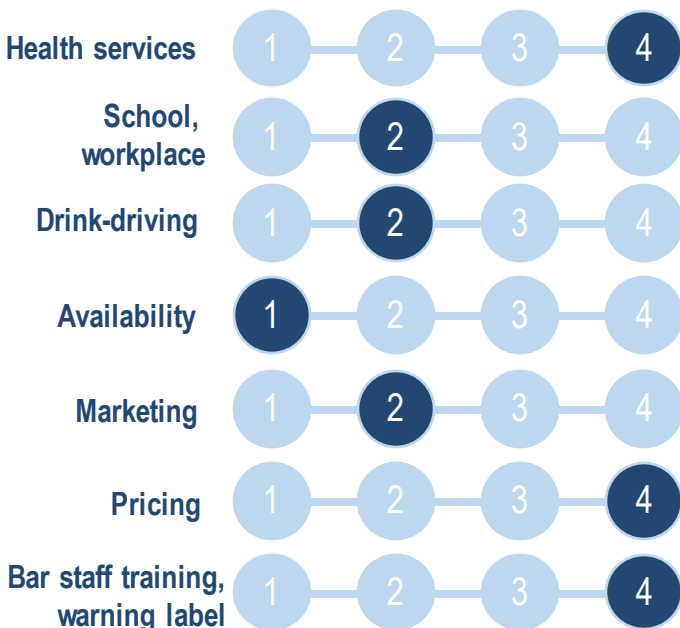


Impact on health expenditure



Based on current consumption patterns in Australia, OECD simulations estimate that diseases and injuries caused by drinking above 1-1½ drinks per day lead to treatment costs equal to **2.9% of health expenditure** and a reduction in the workforce productivity. Consequently, Australia's **GDP** is estimated to be **0.9% lower** on average between now and 2050, excluding any impact on the alcohol industry. Due to a lower GDP, and to maintain a constant public debt-to-GDP ratio, Australia has to raise additional revenues equivalent to an increase in tax of **AUD 267** per person per year.

Implementation level of policies to address harmful alcohol use in Australia



1-lower level of implementation, 4-higher level.
Countries with a maximum score can still enhance policy implementation and enforcement.

OECD analysis of WHO data reflects the implementation status across policy areas within the WHO's *Global Strategy to Reduce the Harmful Use of Alcohol*.

Australia performs well in certain policy areas, but there are opportunities for further action. Policy priorities could include:

- Improving alcohol **prevention and reduction activities** in schools and workplaces;
- Upscaling action to **tackle drink-driving** for example by enforcing sobriety checkpoints;
- Strengthening **restriction on availability** of alcohol to vulnerable and high-risk groups, for example by time or place;
- Strengthening **regulation of marketing** on industry sponsorship of sporting and youth events.

OECD analyses looked at enhanced policy package to tackle harmful alcohol use. The package contains many of the policy priorities for Australia, including:



Strengthening sobriety checkpoints to counter drink-driving



Complete ban on alcohol advertising to children via traditional and new media, sponsorships, branding and point-of-sale displays



Alcohol taxation



Strengthening screening and counselling in primary care



Strengthening regulation on alcohol advertising, sponsorships, branding and point-of-sale displays



Minimum unit pricing targeting cheap alcohol

In Australia, investing AUD 4 per person per year in the enhanced policy package to tackle harmful alcohol use will:

- prevent **1.6 million non-communicable diseases and injuries** by 2050;
- save **AUD 499 million** per year in health costs;
- increase employment and productivity by the equivalent of **14 thousand full-time workers** per year.

For every **AUD 1 invested** in the policy package, **AUD 16** are returned in benefits, not considering any impact on the alcohol industry.