



Foundation for Alcohol
Research & Education

A close-up photograph of water splashing, with droplets and ripples visible against a blurred background of light bokeh. The water is clear and reflects light, creating a dynamic and textured appearance.

Alcohol-related harms in Queensland

Foundation for Alcohol Research and Education

July, 2013

About the Foundation for Alcohol Research and Education

The Foundation for Alcohol Research and Education (FARE) is an independent charitable organisation working to prevent the harmful use of alcohol in Australia. Our mission is to help Australia change the way it drinks by:

- helping communities to prevent and reduce alcohol-related harms;
- building the case for alcohol policy reform; and
- engaging Australians in conversations about our drinking culture.

Over the last ten years FARE has have invested more than \$115 million, helped 750 organisations and funded over 1,400 projects addressing the harms caused by alcohol misuse.

FARE is guided by the [World Health Organisation's Global Strategy to Reduce the Harmful Use of Alcohol](#)^[1] for addressing alcohol-related harms through population-based strategies, problem-directed policies, and direct interventions.

If you would like to contribute to FARE's important work, call us on (02) 6122 8600 or email fare@fare.org.au. All donations to FARE over \$2 are tax deductible.

^[1] World Health Organisation (2010). *Global strategy to reduce the harmful use of alcohol*. Geneva: World Health Organization.

Contents

Summary	4
The approach	8
The findings	10
Alcohol-related hospitalisations	10
Alcohol-related emergency department presentations	11
Treatment episodes where alcohol was the principal drug of concern	12
Drink driving fatalities	13
Drink driving hospitalisations	14
References	15

Errata

Alcohol-related harms in Queensland – July 2013

On 19 August 2013, Queensland Department of Health advised that there was an error in the data previously provided. The Health Statistics Unit within the Queensland Department of Health performed an independent check on the original data provided and identified that those data contained an error. A code in the data program was not selected that included alcohol data, this was consistent error across all years. The amended data show slightly higher separations per year, however the overall trend remains largely unchanged as the error was present in all years of data provided.

Text underlined has been revised, September 2013

The first row of the table on page 5 to be replaced with

	Available data	Trend	Trend per 100,000
Alcohol-related hospitalisations	2002-03 to 2011-12	57 per cent increase	<u>31 per cent increase</u>

The section Alcohol-related hospitalisations on page 8 to be replaced with:

Alcohol-related hospitalisations

In 2011-12 there were 35,159 alcohol-related hospitalisations in Queensland, representing an increase of 57 per cent, from 22,460 in 2002-03.

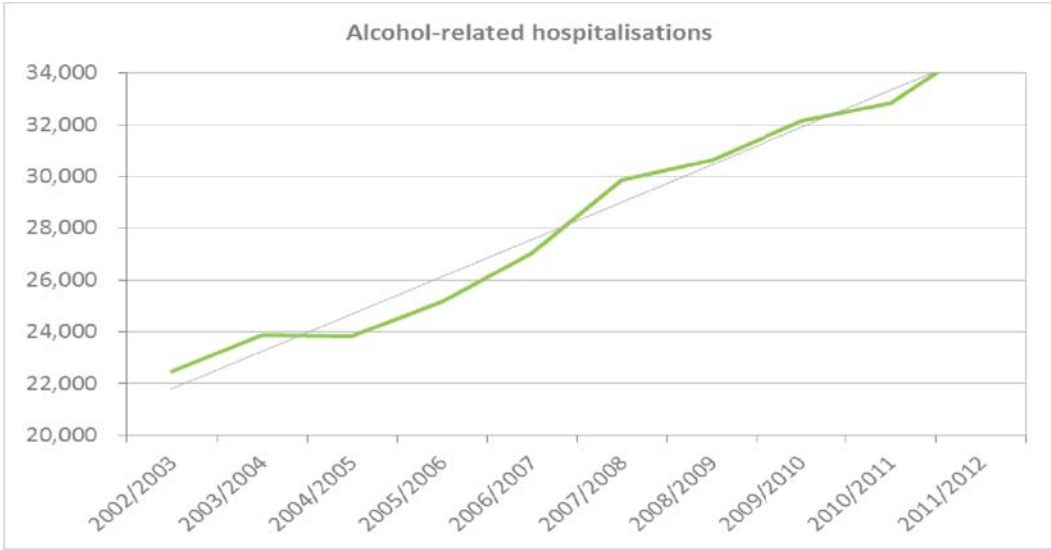
When examining trends in alcohol-related hospitalisations per 100,000 people residing in Queensland, an increase of 31 per cent was observed from 589.6 per 100,000 to 771 per 100,000 over the same time period.

The table below provides an overview of the total number of alcohol-related hospitalisations and number per 100,000 people from 2002-03 and 2011-12.

Year	Alcohol-related hospitalisations	Per 100,000 population
2002-03	<u>22,460</u>	<u>589.6</u>
2003-04	<u>23,866</u>	<u>611.8</u>
2004-05	<u>23,830</u>	<u>596.5</u>
2005-06	<u>25,158</u>	<u>615.0</u>
2006-07	<u>27,042</u>	<u>647.4</u>
2007-08	<u>29,885</u>	<u>699.9</u>
2008-09	<u>30,629</u>	<u>701.6</u>
2009-10	<u>32,152</u>	<u>726.7</u>
2010-11	<u>32,844</u>	<u>734.1</u>
2011-12	<u>35,159</u>	<u>771.0</u>

Source: Queensland Hospital Admitted Patient Data Collection, Department of Health, Queensland

The graph below demonstrates the change in the number of alcohol-related hospitalisations between 2002-03 and 2011-12.



Summary

This study provides an overview of the extent of alcohol-related harms in Queensland using five harm indicators. These indicators are alcohol-related hospitalisations, alcohol-related emergency department presentations, treatment episodes where alcohol was the principal drug of concern, drink driving road fatalities and drink driving hospitalisations. Alcohol related-violence is not addressed in this report because this data is not available for Queensland.

Data on alcohol-related harms was accessed from the relevant Queensland Government Agencies for the most recently available ten year period. However for two of the indicators, alcohol-related emergency department presentations and treatment episodes where alcohol was the principal drug of concern, data was not available for the full time period, so only the available data is reported.

The study identified an increase in harms for three of the five alcohol harm indicators (hospitalisations, emergency presentations and treatment episodes), and a decrease for the remaining two indicators (drink driving road fatalities and drink driving hospitalisations).

Alcohol-related hospitalisations have increased by 57 per cent between 2002-03 and 2011-12, alcohol-related emergency department presentations have increased by 31 per cent between 2007 and 2012 and treatment episodes where alcohol was the principal drug of concern have increased by 45 per cent between 2005-06 and 2010-11.

When examining changes in harms per 100,000 population, these increases are still observed, with alcohol-related hospitalisations increasing by 29 per cent, emergency department presentations increasing by 18 per cent and treatment episodes where alcohol is the principal drug of concern increasing by 30 per cent.

Conversely, between 2003 and 2012 drink driving fatalities have decreased by 44 per cent and drink driving hospitalisations have decreased by three per cent. It is important to note that this decrease was not linear, with an increase in drink driving fatalities and hospitalisations observed between 2003, and 2007 and 2008 respectively, followed by decreases.

Again, when examining changes in harms per 100,000 population, there was a 52 per cent decrease in drink driving fatalities and 10 per cent decrease in drink driving hospitalisations. An overview of these findings is presented in the table below.

	Available data	Trend	Trend per 100,000
Alcohol-related hospitalisations	2002-03 to 2011-12	57 per cent increase	29 per cent increase
Alcohol-related emergency department presentations	2007 to 2012	31 per cent increase	18 per cent increase
Treatment episodes where alcohol was the principal drug of concern	2005-06 to 2010-11	45 per cent increase	30 per cent increase
Drink driving fatalities	2003 to 2012	44 per cent decrease	52 per cent decrease
Drink driving hospitalisations	2003 to 2012	3 per cent decrease	10 per cent decrease

While the study provides a snapshot of the harms that exist as a result of alcohol in Queensland, it does not provide a comprehensive overview. This is partly due of the lack of available alcohol-related violence data in Queensland. This gap in data collection was also identified by the 2010 Queensland Legislative Assembly *Inquiry into alcohol-related violence*, which recommended that “the Government develop a comprehensive and consistent scheme involving all relevant departments for the collection and evaluation of data regarding alcohol-related violence.”¹

The collection and reporting of alcohol-related harm data is important to both informing developments in alcohol control policies and evaluating the effectiveness of alcohol control policies. This study demonstrates that the comprehensive approaches taken to reducing alcohol-related road traffic accidents, such the introduction of random breath testing and awareness raising campaigns, have resulted in reductions in harms. However the increases in alcohol-related hospitalisations, emergency presentations and alcohol treatment episodes demonstrate that further alcohol control policies are needed to target these areas of harm.

The approach

Queensland Government data sources were analysed to gain information on alcohol-related harms for the ten year period prior to the most recently available data. There were some datasets where the ten years of data was not available and so information is presented only for the available timeframe. Where data was not publically available, requests were made to the appropriate Agency to access the information. A summary of the data used in this analysis, the data sources and the timeframes available are provided in the table below.

Data source	Data type	Available data
Queensland Department of Health	Alcohol-related hospitalisations	2002-03 to 2011-12
	Alcohol-related emergency department presentations	2007 to 2012
Australian Institute of Health and Welfare	Treatment episodes where alcohol was the principal drug of concern	2005-06 to 2010-11
Queensland Department of Transport and Main Roads	Drink driving fatalities	2003 to 2012
	Drink driving hospitalisations	2003 to 2012

Data on alcohol-related violence is not available for Queensland and therefore could not be included in this analysis. More detailed information on the data used to inform this analysis is included in the sections below.

Alcohol-related hospitalisations

A request was made by FARE to the Queensland Department of Health for annual data on alcohol-related hospitalisations. The data was sourced from the Queensland Hospital Admitted Patient Data Collection.² The data included admitted patient episodes of care for diagnosis of alcohol-related conditions in public and private hospitals.

Alcohol-related hospital admissions were coded by the ICD10AM diagnosis or external causes which include acute conditions such as mental and behavioural disorders due to use of alcohol, external causes of alcohol poisoning, and chronic conditions such as alcoholic cardiomyopathy and alcoholic cirrhosis of liver. The data does not identify cases where assaults or injury was caused by a third party who was affected by alcohol.

Alcohol-related emergency department presentations

A request was made by FARE to the Queensland Department of Health for annual data on alcohol-related emergency presentations. The data was sourced from the Queensland Hospital Admitted Patient Data Collection.³ The data provided was for patients presenting with an EDI ICD Diagnosis Code of F10.0 Alcohol Intoxication, F10.3 Alcohol, Withdrawal Syndrome, F10.5 Alcoholic Hallucinoses and K29.2 Alcoholic Gastritis. A ten year trend could not be identified for this item as data collected prior to 2007 is not comparable to the current data. Data from 2008 onwards includes data from 27 reporting facilities, while in 2007 the data covers 25 facilities.

Treatment episodes where alcohol was the principal drug of concern

The Australian Institute of Health and Welfare (AIHW) report on the Alcohol and Other Drug Treatment Services National Minimum Data Set annually. The report includes data on alcohol and other drug treatment services, consumers accessing the services, drugs of concern and the types of treatment received. From this source, treatment episodes where alcohol is the principal drug of concern in Queensland were identified.

These treatment episodes are defined as “a period of contact, with defined dates of commencement and cessation, between a client and a treatment agency”⁴ where alcohol is the main substance which led them to seek treatment. A ten year trend could not be identified because as to 2005-2006, data for not-for-profit agencies was not collected and this data is therefore not comparable.⁵

Drink driving fatalities and hospitalisations

A request was made by FARE to the Department of Transport and Main Roads for annual data on alcohol-related road accidents within Queensland which resulted in fatalities and hospitalisations. The data was sourced from the Queensland RoadCrash Database. A valid road traffic crash, for the purpose of the RoadCrash database, is an accident that has been reported to the Police which resulted from the movement of at least one road vehicle on a road or road related area. A drink driving incident is defined as a road crash involving a driver or rider with an illegal Blood Alcohol Concentration (BAC) according to their licence level, vehicle type or purpose of vehicle use.⁶

Queensland population figures

In addition to providing the numbers of people affected by each indicator of alcohol related harm, data was also provided as people affected per 100,000 Queensland residents. Queensland population figures were sourced from Australian Bureau of Statistics (ABS) Estimated Resident Population (ERP).⁷ The ERP is calculated on a quarterly basis and provides population information for the years where there has not been a census.

The findings

Alcohol-related hospitalisations

In 2011-12 there were 33,977 alcohol-related hospitalisations in Queensland, representing an increase of 57 per cent, from 21,625 in 2002-03.

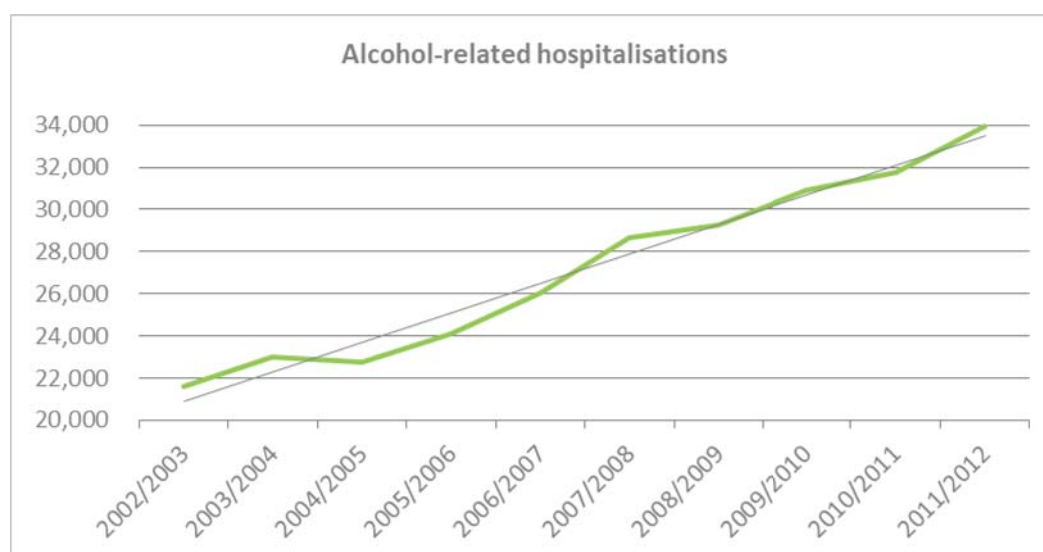
When examining trends in alcohol-related hospitalisations per 100,000 people residing in Queensland, an increase of 29 per cent was observed from 577.7 per 100,000 to 744.2 per 100,000 over the same time period.

The table below provides an overview of the total number of alcohol-related hospitalisations and number per 100,000 people from 2002-03 and 2011-12.

Year	Alcohol-related hospitalisations	Per 100,000 population
2002-03	21,625	577.7
2003-04	22,996	600.4
2004-05	22,752	580.6
2005-06	24,088	601.0
2006-07	26,050	633.7
2007-08	28,664	679.3
2008-09	29,294	676.7
2009-10	30,920	702.0
2010-11	31,738	708.9
2011-12	33,977	744.2

Source: Queensland Hospital Admitted Patient Data Collection, Department of Health, Queensland

The graph below demonstrates the change in the number of alcohol-related hospitalisations between 2002-03 and 2011-12.



Alcohol-related emergency department presentations

In 2012 there were 91,783 alcohol-related emergency department presentations in Queensland, representing an increase of 31 per cent, from 70,170 in 2007.

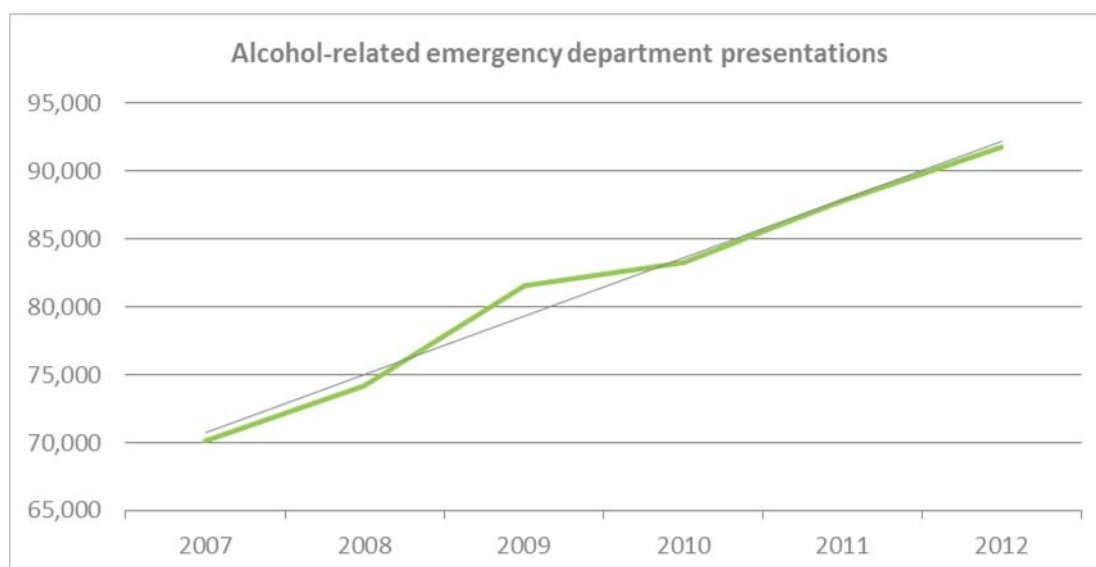
When examining trends in alcohol-related emergency department presentations per 100,000 people residing in Queensland, an increase of 18 per cent was observed from 1,686.8 per 100,000 to 1,990.6 per 100,000 over the same time period.

The table below provides an overview of the number of alcohol-related emergency department presentations and per 100,000 population between 2007 and 2012.

Year	Emergency presentations	Per 100,000 population
2007	70,170	1,686.8
2008	74,211	1,735.7
2009	81,560	1,867.4
2010	83,285	1,877.1
2011	87,843	1,944.1
2012	91,783	1,990.6

Source: Queensland Hospital Admitted Patient Data Collection, Department of Health, Queensland

The graph below demonstrates the change in the number of alcohol-related emergency department presentations between 2007 and 2012.



Treatment episodes where alcohol was the principal drug of concern

In 2010-11 there were 9,772 alcohol treatment episodes where alcohol was the principal drug of concern in Queensland, representing an increase of 45 per cent from 6,740 in 2005-06.

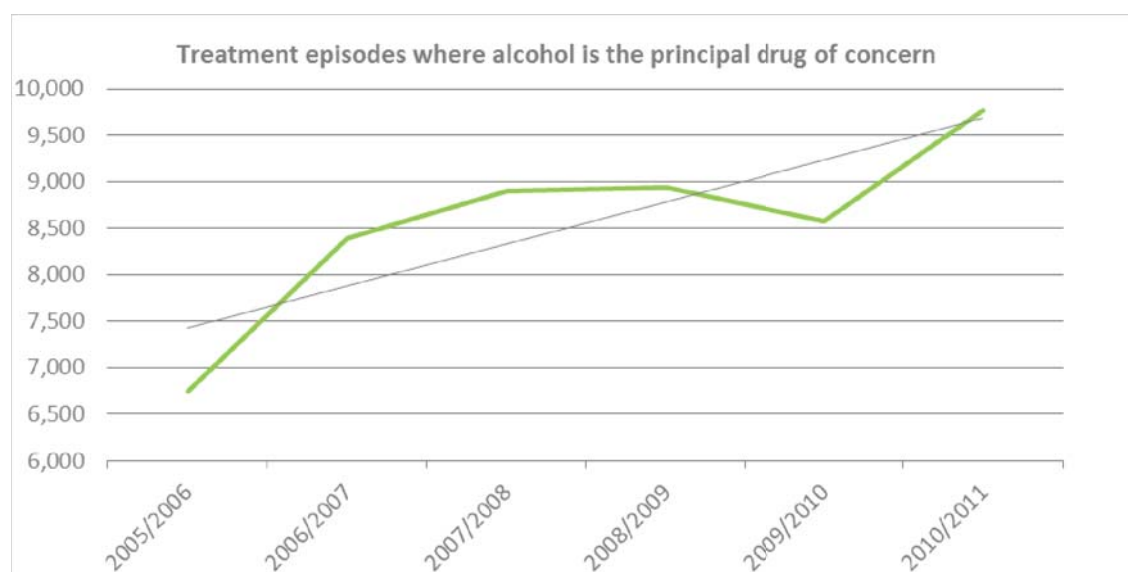
When examining trends in treatment episodes where alcohol was the principal drug of concern per 100,000 people residing in Queensland, a 30 per cent increase was observed from 168.2 per 100,000 to 218.3 per 100,000 persons over the same time period.

The table below provides an overview of the number of treatment episodes where alcohol was the principal drug of concern, the treatment episodes per 100,000 Queensland residents and the percentage of all alcohol and other drug treatment episodes where alcohol was the principal drug of concern.

Year	Alcohol treatment episodes total (No.)	Percentage of all treatment episodes that involved alcohol (%)	Per 100,000 population
2005-06	6,740	27.9	168.2
2006-07	8,386	33.7	204.0
2007-08	8,900	33.8	210.9
2008-09	8,944	35.8	206.6
2009-10	8,586	37.6	194.7
2010-11	9,772	38.2	218.3

Source: Alcohol and other drug treatment services 2010-11: State and territory findings. Australian Institute of Health and Welfare, Canberra.

The graph below demonstrates the changes in the number of treatment episodes where alcohol is the principal drug of concern between 2005-06 and 2010-11.



Drink driving fatalities

In 2012 there were 45 drink driving road fatalities in Queensland, representing a decrease of 44 per cent from 80 in 2003. Drink driving fatalities increased between 2003 and 2007 and declined from 2007 to 2012.

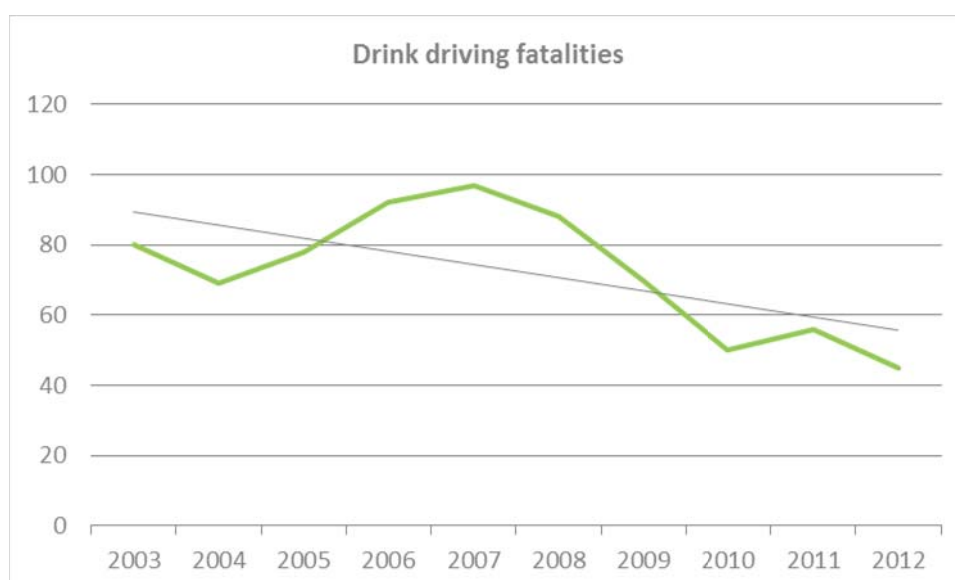
When examining trends in drink driving fatalities per 100,000 people residing in Queensland, a 44 per cent decrease was observed from 2.1 per 100,000 persons to 1 per 100,000 persons over the same time period.

The table below provides an overview of the number of drink driving fatalities and the percentage of all road fatalities where drink drivers or riders were involved.

Year	Drink driving fatalities	Percentage of road fatalities that involved drink drivers or riders (%)	Per 100,000 population
2003	80	25.8	2.1
2004	69	22.2	1.8
2005	78	23.6	2.0
2006	92	27.5	2.3
2007	97	26.9	2.3
2008	88	26.8	2.1
2009	70	21.1	1.6
2010	50	20.1	1.1
2011	56	20.8	1.2
2012	45	16.1	1.0

Source: The Department of Transport and Main Roads

The graph below demonstrates the changes in the number of road fatalities that were a result of drink driving between 2003 and 2012.



Drink driving hospitalisations

In 2012 there were 562 drink driving hospitalisations in Queensland, representing a decrease of three per cent from 582 in 2003. Drink driving hospitalisations increased between 2003 and 2008 and declined from 2007 to 2012.

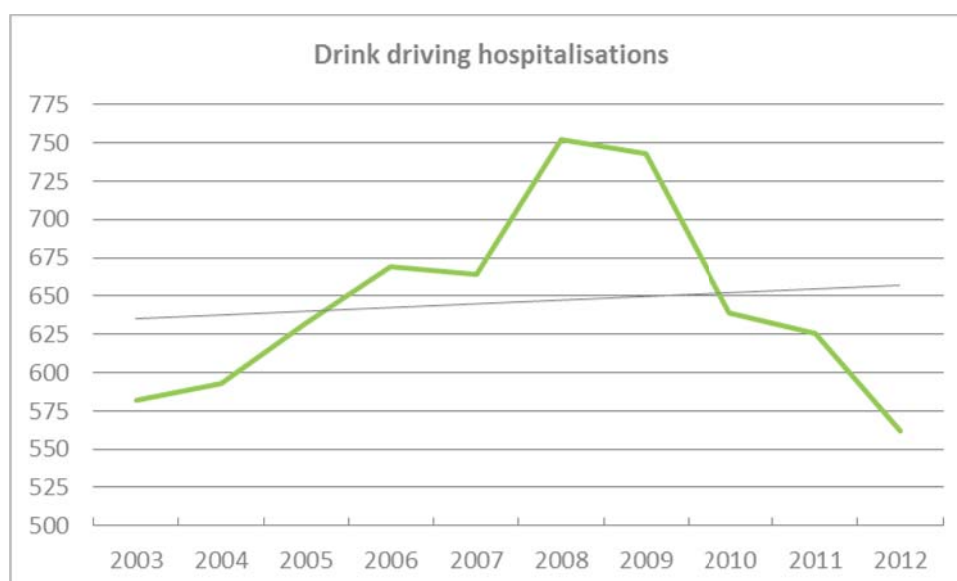
When examining trends in drink driving fatalities per 100,000 people residing in Queensland, a 10 per cent decrease was observed from 15.4 per 100,000 persons to 12.2 per 100,000 persons.

The table below provides an overview of drink driving casualties that resulted in hospitalisation and as a proportion of all hospitalised crash casualties.

Year	Drink driving hospitalisations	Percentage of hospitalised crash casualties that involved drink drivers or riders (%)	Per 100,000 population
2003	582	10.0	15.4
2004	593	9.5	15.3
2005	632	10.0	15.9
2006	669	11.4	16.5
2007	664	11.0	16.0
2008	752	11.0	17.6
2009	743	11.1	17.0
2010	639	9.8	14.4
2011	626	9.9	13.9
2012	562	8.7	12.2

Source: The Department of Transport and Main Roads

The graph below demonstrates the changes in drink driving crashes that resulted in hospitalisations between 2003 to 2012.



References

- 1 Legislative Assembly of Queensland. (2010). Law, justice and safety Committee Inquiry into alcohol-related violence, Final Report 2010. Brisbane: Parliament of Queensland.
- 2 Queensland Health. (2013). Admitted Patient Episodes of Care for Diagnosis of Alcohol Related Conditions, Public and Private Acute Hospitals, Queensland, 2002/2003 to 2011/2012. Statistics provided to FARE by Queensland Health.
- 3 Queensland Health. (2013). Queensland Alcohol related presentation to the Emergency Department. Statistics provided to FARE by QLD Health.
- 4 Australian Institute of Health and Welfare. (2013). Alcohol and other drug treatment services in Australia 2010–11: state and territory findings. Canberra: AIHW.
- 5 Australian Institute of Health and Welfare. (2013). Alcohol and other drugs (AODT-NMDS) data cubes. Accessed at: <http://www.aihw.gov.au/alcohol-and-other-drug-treatment-services-data-cubes/>
- 6 Department of Transport and Main Roads. (2012). 2011 Fatal road traffic crashes in Queensland: A report on the road toll. Queensland: Queensland Government.
- 7 Australian Bureau of Statistics. (2012). Australian Demographic Statistics. Cat. No. 3101.0, Table 4 (Estimated Resident Population, States and Territories (Number)). Accessed at: <http://www.abs.gov.au/AUSSTATS/abs@.nsf/DetailsPage/3101.0Jun%202012?OpenDocument>.



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