



Women and Alcohol

Alcohol use in Australia

Alcohol use in Australia has been declining over recent years. On a per capita basis, for persons aged 15 years and over, there were 9.7 litres of pure alcohol available for consumption in 2015–16. This figure is slightly more than the amount in 2014–15 (9.5 litres) but still less than that in the mid-1970s (13.1 litres). The current figure compares to the Organisation for Economic Co-operation and Development (OECD) average of 9.6 litres.¹

Alcohol is consumed on a weekly basis by 35.8% of Australians aged 14 years and over, and daily by 5.9%.² The regular use of alcohol is associated with a range of medical problems including liver cirrhosis, pancreatitis, heart disease and brain damage. Over 20% of the injury burden in Australia is attributable to alcohol use.³

Women are less likely to consume alcohol on a daily (4.2%) or weekly (31.0%) basis when compared with men (7.6% and 40.7% respectively).² It is noted that women are harmed more quickly and with lower levels of alcohol than men.⁵ Studies show that women score amongst the highest with respect to negative consequences experienced from alcohol consumption.⁶

The use of licit substances is an accepted part of Australian and most other western societies The regular use of alcohol and tobacco by adults is acceptable to 3 out of 4 and 2 out of 5 Australians respectively.⁴

Most people in Australia drink at levels that do not place them at lifetime risk of harm. For most age groups, however, about 1 in 5 people drink at levels that exceed the lifetime risk guidelines set by the National Health and Medical Research Council.² According to the most recent Victorian Public Health Survey, when compared with all Victorian women, a significantly higher proportion of women at 'increased lifetime risk' of alcohol-related harm have the following characteristics: born in Australia, speak English at home, have completed a university or other tertiary institute degree, are employed, and have a total annual household income of \$40,000 or more.⁷ This picture of women at risk is important for health/service planners and policy makers to see as it differs from the commonly perceived stereotype of problematic alcohol users.

It is estimated that roughly 13% of children live in a home with at least one adult who misuses alcohol.⁸

Women's alcohol consumption over the life course

Alcohol remains the most common substance used by young people, with 76% of secondary students reporting having consumed it at some time.⁹ Figures for Victoria, however, show a decline over time in the proportion of girls who drink alcohol:

- from 27% in 1984 to 9% in 2011 for the 12–15 years age bracket; and
- from 47% in 1984 to 31% in 2011 for the 16–17 years age bracket.⁹

Research has unequivocally established the fact that alcohol consumption is dangerous to the developing adolescent brain, and that young people who begin drinking at an early age are more susceptible to adverse health and social outcomes. The good news is that more young people, overall, are deferring their first alcohol use and engaging in less risky drinking. This is positive change reflected across Australia partly explains why the proportion of all crime committed by young people is decreasing.¹⁰

When considering the alcohol consumption patterns of women over the life course:

- young women (18–23 years) are less likely than older women to abstain from alcohol consumption, and are more likely than older women to consumer higher quantities of alcohol when they drink;¹¹
- older women with a higher household incomes are more likely than other women to continue to drink after learning of their pregnancy;¹²
- for women in their prime child-rearing age (25–44 years), alcohol is the leading cause of disease burden.³

The use of alcohol during pregnancy increases the risk of harm to a foetus. Foetal disorders include facial anomalies, congenital abnormalities, and neurological developmental and social-emotional problems.⁴ As medical evidence mounts and societal acceptance of drinking during pregnancy decreases, there is a danger that pregnant women with problematic alcohol use could fail to seek assistance due to perceived shame and fear of child protection involvement.¹²

Violence against women: Alcohol as a reinforcing factor

Australia’s shared framework for action on violence against women, *Change the Story*, names gender inequality as the necessary social context in which violence against women occurs. Gender inequality refers to the unequal value afforded to men and women in society, and the unequal distribution of power, resources and opportunity between them. Other factors, such as alcohol, can interact with and reinforce the gendered drivers; for example, in increasing the severity or frequency of violence. But alcohol alone cannot predict or drive violence against women.¹³ For more on violence against women, see Women’s Health East’s [website](#) (fact sheets series).

Research shows that consuming high levels of alcohol can put women at risk of experiencing sexual aggression including sexual coercion, unwanted sexual contact, attempted rape and rape.¹⁴ Younger women are particularly vulnerable to unwanted sex^{11,14} and are more likely to be judged harshly if it occurs when they have been drinking.^{15,16} A survey of Australian secondary students found that, of Year 10 to 12 female students who were sexually active, 47% reported that they had experienced unwanted sex because they were ‘too drunk or too high’.¹⁷

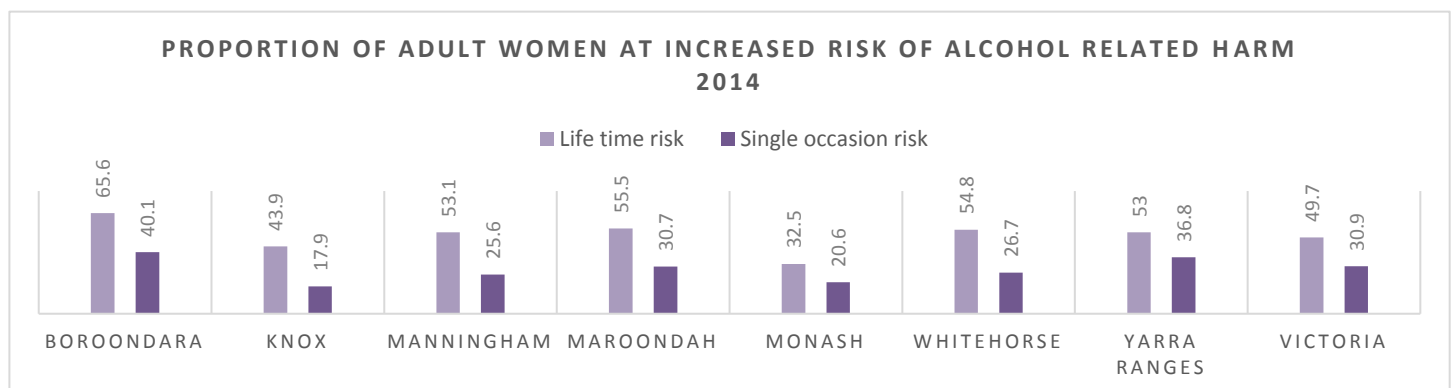
Figures show that 23% of all family violence incidents reported to Victoria Police involve alcohol.¹⁸ Alcohol also features strongly in domestic violence murders, with over one third (37%) of all Australian intimate partner homicides between 2010 and 2012 involving alcohol consumption by either the victim or the offender.¹⁹ The Royal Commission into Family Violence noted the inter-relationship between alcohol and family violence severity and frequency, and recommended closer collaboration between alcohol and other drugs services and family violence services.²⁰

Gender analysis of women’s alcohol use

While we have access to sex-disaggregated data to show differences in alcohol consumption patterns, limited studies exist that provide in-depth analysis of the social contexts for women’s behaviours around alcohol. Further research must be done to explain the quantitative data. The limited research that is available suggests that women’s alcohol use could be connected to gender roles in contemporary society, with women perceiving alcohol use as a way to challenge stereotyped notions of passive femininity – a license to take risks and be more bold or assertive.¹¹ Without a fuller understanding of the context of women’s alcohol use, health/service planners and policy makers lack the evidence needed to make sound decisions regarding women and alcohol.

Alcohol use in the Eastern Metropolitan Region (EMR)

Across the EMR, 2.7% of adult females are at increased risk of alcohol related injury weekly.²¹ Boroondara has the highest proportion of adult females at risk of alcohol-related harm through over-consumption on a single occasion; it also has the highest proportion of adult females at increased lifetime risk of alcohol related harm.²²



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