

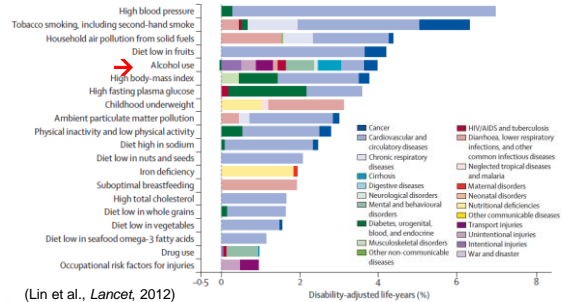


Harms from the drinking of relatives, friends & others: Initial findings from a 9-country study

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The burden from alcohol is mostly measured in terms of health effects on the drinker: 6th as global risk to health

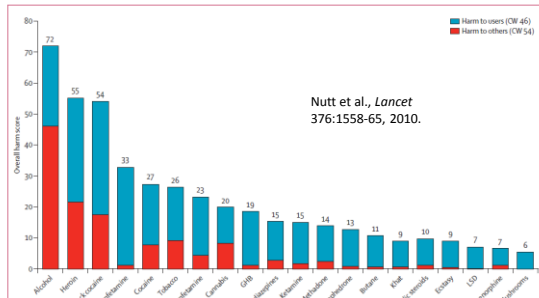


(Lin et al., *Lancet*, 2012)

But there are also harms to others, about equally important as harms to the drinker.



Ratings by psycho-pharmacologists of intrinsic harmfulness: **harm to others** made alcohol the most harmful substance



Nutt et al., *Lancet* 376:1558-65, 2010.

→ Alcohol's harm to others as one of 4 streams of work in WHO's Global Strategy to Reduce the Harmful Use of Alcohol



The Harm to Others from Drinking – A WHO/Thai Health international collaborative research project

"This aim of this research project is to measure and analyse the harm to others from drinking in low-income and middle-income countries, in terms of the situation in each society and also in cross-national analyses. The project is developing a master model for application in six countries, but it is expected that the master protocol will be more widely applied in future projects, including in developed countries."

-- WHO, *Global Status Report on Alcohol & Health*, 2014, p. 17.

Two windows on alcohol's harm to others: social response agency registers, and population surveys; looking here at survey data



- WHO/TH STUDY MODELLED ON AUSTRALIAN & NZ 2008 SURVEYS
- 6+1 COUNTRIES IN WHO/TH STUDY:
Chile, Nigeria, India, Sri Lanka, Thailand, Vietnam; Laos
- PLUS, IN THIS ANALYSIS:
Australia, New Zealand

Surveys in whole country or selected regions; survey N at least 1500. Response rate >90% except in NZ (64%) & Australia (35%)

Interpersonal harm resulting from another's drinking in the last 12 months: 1. specific harms from "known drinkers"



- Known drinkers: partner, household member, family, friend**
- harmd you physically
 - threatened or afraid at home or private setting
 - forced or pressed into something sexual
 - left home to stay somewhere else
 - house, car or property damaged
 - passenger in a car with drinking driver
 - emotionally hurt or neglected
 - stopped seeing the person
 - they failed to do what they were counted on to do

Interpersonal harm resulting from another's drinking in the last 12 months:
2. specific harms from a stranger's drinking



Strangers ("someone you did not know")
 harmed you physically
 responsible for a traffic accident involving your house, car or property damaged
 called your names or insulted you
 made you afraid when encountered them
 felt unsafe in a public place
 kept awake at night by drunken noise

Interpersonal harm resulting from another's drinking in the last 12 months:
3. summary measures (used here)



Overall degree of harm scores (on a scale of 0-10; approx. for Australia) from known drinkers from strangers' drinking

Scores based on specific harm items
 Whether harmed (any specific harm) by known drinker by stranger
 Mean no. of specific harms, among those with any by known drinker by stranger

In the tables, countries are in descending order of national p.c. income.

Degree of harm; % with any specific harm, and number if so.
 Family/friend harms > in Thailand, Vietnam, < in Nigeria, Laos;
 Stranger harms > in richest 3 countries, but more serious in Thailand.
 Red: high in column; Green: low in column.



	Avg. degree of harm (0-10)			Known drinker		Stranger	
	Known	Stranger	Average	Any harm	# of harms	Any harm	# of harms
Australia	1.5	1.6	1.6	26	2.5	60	2.0
New Zealand	-	-	-	17	2.5	53	1.9
Chile	1.7	1.7	1.7	36	2.5	55	1.9
Thailand	3.1	2.2	2.6	60	2.3	59	2.0
Sri Lanka	1.8	0.9	1.4	44	2.8	31	1.8
Nigeria	0.7	0.6	0.7	24	2.3	18	1.3
Vietnam	2.9	1.3	2.3	47	2.3	28	1.6
India	1.5	1.4	1.5	58	2.5	53	2.4
Laos	0.5	0.9	0.7	30	2.7	34	1.7

Any specific harm: **Gender diff's** not often signific.; for known drinkers, higher for F in Australia & NZ, for M in India & Sri L.; for strangers, higher for M in Vietnam, for F in Thailand & India



	Known drinkers		Strangers' drinking	
	Male resp.	Female	Male resp.	Female
Australia	22	28*	58	61
New Zealand	14	19*	51	54
Chile	39	33	53	57
Thailand	65	57	55	62*
Sri Lanka	49*	39	32	31
Nigeria	25	22	17	18
Vietnam	46	49	31*	24
India	63*	54	46	57*
Laos	34	27	33	36

*significantly higher than other gender

Any specific harm by **age group**: from known drinkers, more to young (not Sri Lanka, Nigeria, Vietnam; from strangers, more to young in the richer 3, Thail. & Sri L., to old in India



Age group:	Known drinkers			Strangers' drinking		
	18-29	30-49	50+	18-29	30-49	50+
Australia	36	28	21*^	75	66*	52*^
New Zealand	25	19*	13*^	67	56*	44*^
Chile	43	33*	29*	67	50*	42*
Thailand	76	63*	53*^	71	65	49*^
Sri Lanka	45	47	40	38	31	29*
Nigeria	20	25	26	18	17	28
Vietnam	51	49	42	32	26	29
India	66	58*	51*	47~	53	56
Laos	38	30	23*	37	34	33

Signif. lower than:
 * 18-29
 ^ 30-49
 ~ 50-65

SOME CONCLUSIONS:
1. VARIATIONS BY SOCIETY



- Across diverse nations and cultures, substantial proportions of adults report being harmed by another's drinking in the last year.
- Reports of harm and of level of harm were generally lower in Laos and Nigeria than elsewhere, and higher in Thailand and in India. The average degree of harm score ranged more than 3-fold from 0.7 for Nigeria and Laos, to 2.3 for Vietnam and 2.6 for Thailand.
- Any harm from strangers was also high (though the degree of harm was not) in the three societies with the highest incomes – Australia, New Zealand and Chile.

SOME CONCLUSIONS:

2. VARIATIONS BY GENDER & AGE GROUP



- Gender differences in any harm were not great, though significant in one direction or the other in >½ of the comparisons.
- Age differences in experiencing harm were significant in 46% of the comparisons, most often in the direction of higher harms for adults under 30.
- But differences by age were concentrated in Australia, New Zealand, Chile, Thailand, and (though in both directions) in India. There were no significant differences by age group in Nigeria and Vietnam.

SOME CONCLUSIONS:

3. VARIATIONS BY SOCIETAL CHARACTERISTICS



- Other ongoing analyses of the 9 surveys find few clear variations in levels of reported harm from others' drinking; for instance not
 - by national income (except for high rates of reported harm from strangers in the three richer countries),
 - by per capita consumption, or
 - by rates of abstinence in the total population and among women
- Clearly having heavy drinkers among one's family and friends is associated with experiencing more interpersonal alcohol-related harm, but societal-level factors and patterns predicting harm from others' drinking mostly remain to be identified.

SOME LIMITATIONS



- Although labelled here with their country's name, the fieldwork sites were regions rather than the whole country in most of the countries included
- While the data were carefully collected and managed in each site, and meticulously brought together in a common archive, there were some variations between sites in field procedures, skip instructions, etc. These will affect comparisons, though probably only with minor effect for the analyses and comparisons reported here.
- The attribution of the harm to drinking is made by the respondent, and will be affected by cultural differences in the extent and conditions under which an alcohol attribution for the harm will be accepted. In further analysis of this and associated studies, we aim to study this aspect further.

FUTURE DEVELOPMENTS



- With ThaiHealth, WHO is moving into Phase II of its study. Phase I included a scoping study on social and health agencies' degree of recognition and handling of the role of others' drinking in their caseloads; Phase II will pursue this further with systematic data collection on and from specific cases in caseloads in low- and middle-income countries -- analysing data from this "other window" on alcohol's harm to others and developing workable methods for routine recording of the dimension.
- Researchers in many countries are now studying alcohol's harm to others, whether through population surveys, qualitative studies, or register and linkage studies. International consortia such as GENACIS and RARHA have taken up the topic. Researchers in the field are loosely linked by the International Group for the Study of Alcohol's Harm to Others (IGSAHO), coordinated by Anne-Marie Laslett (A.Laslett@latrobe.edu.au).
- It is time for a new Australian population survey of Alcohol's Harm to Others -- the survey used in this paper is from 2008. We would welcome ideas and discussion on how it might be financed.

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Thanks! ... Any questions?

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