# National Healthcare Agreement: PI 05-Levels of risky alcohol consumption, 2022

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# National Healthcare Agreement: Pl 05-Levels of risky alcohol consumption, 2022

## Identifying and definitional attributes

Metadata item type: Indicator

Indicator type: Progress measure

**Short name:** PI 05-Levels of risky alcohol consumption, 2022

**METEOR** identifier: 740886

Registration status: Health, Standard 24/09/2021

**Description:** Proportion of adults at risk of long-term harm from alcohol.

Indicator set: National Healthcare Agreement (2022)

Health, Standard 24/09/2021

Outcome area: **Prevention** 

Health, Standard 07/07/2010

## Collection and usage attributes

Population group age

from:

18 years

Computation description:

Data on persons 'at risk of long-term alcohol-related harm' is based on the 2009 National Health and Medical Research Council (NHMRC) guideline 'for healthy men and women, drinking no more than two standard drinks on any day reduces the lifetime risk of harm from alcohol-related disease or injury' and has been operationalised as: for both males and females, an average of more than 2 standard drinks per day in the last week.

From the 2020–21 National Health Survey (NHS) onwards, alcohol consumption will be reported against the 2020 NHMRC guidelines that healthy men and women should drink no more than 10 standard drinks a week and no more than 4 standard drinks on any one day.

Rates are directly age-standardised to the 2001 Australian population.

Analysis by remoteness and Socio-Economic Indexes for Areas (SEIFA) Index of Relative Socio-Economic Disadvantage (IRSD) is based on usual residence of person.

Presented as a percentage.

95% confidence intervals and relative standard errors are calculated for rates. Rate ratios are derived by dividing the age standardised rate for Aboriginal and Torres Strait Islander people by the age standardised rate for non-Indigenous people.

Computation: Crude rate: 100 × (Numerator ÷ Denominator)

**Numerator:** Number of persons aged 18 and over assessed as having an alcohol consumption

pattern that puts them at risk of long-term alcohol-related harm.

Numerator data elements: Data Element / Data Set-

**Data Element** 

Person—age

**Data Source** 

ABS 2017-18 National Health Survey (NHS)

Guide for use

Data source type: Survey

#### Data Element / Data Set

**Data Element** 

Person—alcohol consumption amount

**Data Source** 

ABS 2017-18 National Health Survey (NHS)

Guide for use

Data source type: Survey

#### Data Element / Data Set

**Data Element** 

Person—alcohol consumption frequency

**Data Source** 

ABS 2017-18 National Health Survey (NHS)

Guide for use

Data source type: Survey

#### Data Element / Data Set

**Data Element** 

Person—age

**Data Source** 

ABS 2018-19 National Aboriginal and Torres Strait Islander Health Survey (NATSIHS)

Guide for use

Data source type: Survey

### Data Element / Data Set

**Data Element** 

Person—alcohol consumption amount

**Data Source** 

ABS 2018-19 National Aboriginal and Torres Strait Islander Health Survey (NATSIHS)

Guide for use

Data source type: Survey

### Data Element / Data Set

Data Element

Person—alcohol consumption frequency

**Data Source** 

ABS 2018-19 National Aboriginal and Torres Strait Islander Health Survey (NATSIHS)

Guide for use

Data source type: Survey

#### **Denominator:**

Population aged 18 and over.

# Denominator data elements:

Data Element / Data Set-

**Data Element** 

Person—age

**Data Source** 

ABS 2017-18 National Health Survey (NHS)

Guide for use

Data source type: Survey

### Data Element / Data Set

**Data Element** 

Person—age

**Data Source** 

ABS 2018-19 National Aboriginal and Torres Strait Islander Health Survey (NATSIHS)

Guide for use

Data source type: Survey

#### Disaggregation:

State and territory, by:

- sex by age (not reported)
- Indigenous status
- remoteness (Australian Statistical Geography Standard (ASGS) 2016 Remoteness Structure)
- 2016 SEIFA IRSD quintiles (not reported)
- disability status (not reported)

Nationally, by (all not reported):

- sex by remoteness (ASGS 2016 Remoteness Structure)
- 2016 SEIFA IRSD deciles
- remoteness (ASGS 2016 Remoteness Structure) by 2016 SEIFA IRSD deciles.

Some disaggregation may result in numbers too small for publication.

# Disaggregation data elements:

#### Data Element / Data Set-

**Data Element** 

Person-sex

**Data Source** 

ABS 2017-18 National Health Survey (NHS)

Guide for use

Data source type: Survey

### Data Element / Data Set

**Data Element** 

Person-age

**Data Source** 

ABS 2017-18 National Health Survey (NHS)

Guide for use

Data source type: Survey

#### Data Element / Data Set

**Data Element** 

Person—area of usual residence

**Data Source** 

ABS 2017-18 National Health Survey (NHS)

Guide for use

Data source type: Survey

Used for disaggregation by state/territory, remoteness and SEIFA IRSD

#### Data Element / Data Set

**Data Element** 

Person—disability status

**Data Source** 

ABS 2017-18 National Health Survey (NHS)

Guide for use

Data source type: Survey

#### Data Element / Data Set

Data Element

Person—Indigenous status

**Data Source** 

ABS 2017-18 National Health Survey (NHS)

Guide for use

Data source type: Survey

#### Data Element / Data Set

Data Element

Person-sex

**Data Source** 

ABS 2018-19 National Aboriginal and Torres Strait Islander Health Survey (NATSIHS)

Guide for use

Data source type: Survey

### Data Element / Data Set

Data Element

Person—age

Data Source

ABS 2018-19 National Aboriginal and Torres Strait Islander Health Survey (NATSIHS)

Guide for use

Data source type: Survey

#### Data Element / Data Set

**Data Element** 

Person—area of usual residence

**Data Source** 

ABS 2018-19 National Aboriginal and Torres Strait Islander Health Survey (NATSIHS)

Guide for use

Data source type: Survey

Used for disaggregation by state/territory

#### Comments:

Most recent data available for 2022 National Healthcare Agreement performance reporting: 2017–18 (total population, non-Indigenous: NHS); 2018–19 (Indigenous only: NATSIHS).

NO NEW DATA FOR 2022 REPORTING.

National Aboriginal and Torres Strait Islander Social Survey (NATSISS) or National Aboriginal and Torres Strait Islander Health Survey (NATSIHS) data may be used for analysis, dependent upon which survey is most recent and whether the data are comparable with NHS data.

Data on persons 'at risk of long-term alcohol-related harm' had previously been defined according to the 2001 NHMRC guidelines: for males, an average of more than 4 standard drinks per day in the last week, and for females, an average of more than 2 standard drinks per day in the last week.

Data for the non-Indigenous population in the Northern Territory should be interpreted with caution as the NHS excludes Very Remote areas and discrete Aboriginal and Torres Strait Islander communities. These exclusions are unlikely to affect national estimates, and will only have a minor effect on aggregate estimates produced for individual states and territories, excepting the Northern Territory where around 20% of the population lived in Very Remote areas in the 2017–18 reporting period.

For the 2017–18 NHS and the 2018–19 NATSIHS, age standardised 95% confidence intervals and RSEs are not available. Please refer to associated crude 95 per cent confidence intervals and RSEs.

Further details on alcohol consumption among Indigenous Australians are available from the Aboriginal and Torres Strait Islander Health Performance Framework (measure 2.16: Risky alcohol consumption).

# Representational attributes

Representation class: Percentage

Data type:RealUnit of measure:PersonFormat:N[NN].N

# Indicator conceptual framework

Framework and dimensions:

Health behaviours

## **Data source attributes**

Data sources:

**Data Source** 

ABS 2017-18 National Health Survey (NHS)

Frequency

Every 3 years

Data custodian

Australian Bureau of Statistics

**Data Source** 

ABS 2018-19 National Aboriginal and Torres Strait Islander Health Survey (NATSIHS)

Data custodian

Australian Bureau of Statistics

## Accountability attributes

Reporting requirements: National Healthcare Agreement

Organisation responsible

for providing data:

Australian Bureau of Statistics

collection required:

Further data development / Specification: Final, the measure meets the intention of the indicator.

#### Source and reference attributes

Australian Institute of Health and Welfare 2020. Aboriginal and Torres Strait Reference documents:

Islander Health Performance Framework. Canberra: AlHW. Viewed 19 February

2021, https://indigenoushpf.gov.au/

National Health and Medical Research Council (NHRMC) 2001. Australian Alcohol

Guidelines: Health Risks and Benefits (2001). Canberra: NHMRC

NHMRC 2009. Australian Guidelines to Reduce Health Risks from Drinking

Alcohol. Canberra: NHMRC. Viewed 26 September 2019,

https://www.nhmrc.gov.au/about-us/publications/australian-guidelines-reduce-

health-risks-drinking-alcohol

NHMRC 2020. Australian guidelines to reduce health risks from drinking alcohol. Canberra: NHMRC. Viewed 29 March 2021, https://www.nhmrc.gov.au/health-

advice/alcohol

## Relational attributes

# Related metadata references:

Supersedes <u>National Healthcare Agreement: PI 05–Levels of risky alcohol consumption, 2021</u>

Health, Standard 03/07/2020

See also <u>Australian Health Performance Framework: PI 1.2.1–Rates of current daily smokers, 2020</u>

Health, Standard 13/10/2021

See also Australian Health Performance Framework: PI 1.2.3—Levels of risky alcohol consumption, 2020

Health, Standard 13/10/2021

See also <u>Australian Health Performance Framework: PI 1.3.1–Prevalence of overweight and obesity, 2020</u>

Health, Standard 13/10/2021

See also <u>Australian Health Performance Framework: PI2.1.6–Potentially avoidable deaths, 2020</u>

Health, Superseded 31/03/2023

See also <u>Australian Health Performance Framework: PI2.1.6–Potentially avoidable deaths, 2021</u>

Health, Superseded 02/02/2024

See also National Healthcare Agreement: PI 03—Prevalence of overweight and obesity, 2022

Health, Standard 24/09/2021

See also National Healthcare Agreement: PI 04—Rates of current daily smokers, 2022

Health, Standard 24/09/2021

See also National Healthcare Agreement: PI 16—Potentially avoidable deaths, 2022

Health, Standard 24/09/2021

See also National Indigenous Reform Agreement: PI 04-Levels of risky alcohol consumption, 2020

Indigenous, Standard 23/08/2019