

Australian's Alcohol Use is Decreasing but has Alcohol-related Absenteeism?

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Introduction:

Over the past 20 years, the proportion of Australians abstaining from alcohol has increased with past year use decreasing. Alcohol consumption has been traditionally associated with increased absenteeism in the workforce. Whether a concurrent reduction in workers' alcohol-related absenteeism has occurred is unknown. The present study explored this issue.

Method:

Secondary analysis of the 2001 and 2019 National Drug Strategy Household Survey was undertaken. Prevalence of 'past year alcohol use, and mean annual days absent due to: injury or illness; and specific alcohol use were estimated for employed Australians. Mean absenteeism was calculated for alcohol abstainers and consumers. Differences across alcohol use groups and from 2001 to 2019 were analysed.

Results:

Employed Australian's alcohol use decreased from 89.6% (2001) to 84.9% (2019). There was no significant difference in the mean injury/illness-related absenteeism between abstainers (4.91 days per/annum) and consumers (5.81 days) in 2001 whilst group differences were significant in 2019 (abstainers: 5.96 days; consumers: 7.66 days). Over time, abstainers' injury/illness-related absenteeism did not change; whilst those who consumed alcohol were absent an extra 1.84 days in 2019 than in 2001. For alcohol-specific absenteeism, there was no significant difference in the mean absenteeism between 2001 (0.41 days) and 2019 (0.39 days) for those consuming alcohol. When data for both absenteeism types were combined, alcohol-attributed absenteeism increased 254% between 2001 (0.41 days) and 2019 (1.04 days).

Discussions and Conclusions:

Despite a 6% decline in past year alcohol use, alcohol-attributed absenteeism increased 254%. Rising alcohol-related absenteeism can contribute significant costs to workplaces, particularly when inflation and population growth are considered.

Implications for Practice or Policy:

To reduce costs to workplaces, a multifaceted approach which addresses: health promotion and behavioural change strategies; training on the impacts of alcohol use; implementation of workplace alcohol policies; and links to alcohol counselling and treatment.

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