

Alcohol Use in New Zealand

Analysis of the 2004 New Zealand
Health Behaviours Survey –
Alcohol Use

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This report was written by
Niki Stefanogiannis (Senior Advisor, Public Health Medicine),
Kylie Mason (Advisor, Statistics/GeoHealth) and
Li-Chia Yeh (Advisor, Statistics) of
Public Health Intelligence, Ministry of Health.

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Foreword

Alcohol is the most commonly used recreational drug in New Zealand, with the majority of adults consuming alcohol at least occasionally. However, the misuse of alcohol can cause a wide range of harms to the individual, to their family/whānau, and to the wider community.

Minimising the harm caused by alcohol and illicit and other drug use to individuals and the community is a priority objective in the New Zealand Health Strategy, which was launched in 2000 by the Minister of Health. Robust and appropriate evidence is needed in order to monitor trends and inequalities, project future needs for health services, and evaluate the effectiveness and efficiency of current approaches.

Public Health Intelligence (PHI), the epidemiology group of the Ministry of Health, carries out the Ministry's statutory responsibility to monitor and report on the state of New Zealanders' health. As part of this, PHI runs the New Zealand Health Monitor, an integrated programme of health surveys and cohort studies, which includes population-based surveys on health behaviours such as alcohol use, tobacco use and drug use. These surveys are an important part of the focus of the *National Drug Policy 2007–2012* on data collection, research and evaluation to support alcohol, tobacco and other drug policy interventions and service development.

This report presents the findings from one of these surveys in the New Zealand Health Monitor, the 2004 Health Behaviours Survey – Alcohol Use, which investigated alcohol use in the New Zealand population. It provides valuable information about alcohol consumption in New Zealand, including the frequency of drinking occasions and the amount of alcohol consumed during each occasion. The report also explores the harms experienced by people due to alcohol, not only from their own drinking, but also from other people's drinking.

Comments about the report are welcome, and should be sent to Public Health Intelligence, Ministry of Health, PO Box 5013, Wellington.



Barry Borman
Manager (Epidemiologist)
Public Health Intelligence

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Executive Summary

Background

This report describes alcohol use in New Zealand using the results of the 2004 New Zealand Health Behaviours Survey – Alcohol Use (2004 HBS–AU). This survey is part of the New Zealand Health Monitor programme, a co-ordinated cycle of population-based health-related surveys.

The purpose of the 2004 HBS–AU was to provide information on alcohol consumption and drinking patterns, as well as problems relating to one's own or someone else's drinking. Differences in alcohol use between males and females, Māori and non-Māori and across age groups are reported.

Methodology

The target population for the 2004 HBS–AU survey was the New Zealand population aged 12–65 years living in private residential dwellings. The survey was a computer-assisted telephone interview (CATI) survey, with a sample size of 9847 respondents. A stratified sample design was used, with increased sampling of Māori. The survey interviews were carried out between September 2003 and August 2004, and resulted in an overall weighted response rate for the survey of 59%.

The survey design and data collection for the 2004 HBS–AU were carried out by the Centre for Social and Health Outcomes Research and Evaluation (SHORE) and Te Ropu Whariki, of Massey University. Public Health Intelligence (PHI), the epidemiology group in the Ministry of Health, analysed the survey data and prepared this report.

Overview of results

The results of this survey show that the majority of New Zealanders had consumed alcohol at least once in the last 12 months. Analysis shows markedly different drinking patterns for different age groups, for both amount of alcohol consumed during and frequency of drinking occasions. Although people aged 18–24 years did not consume alcohol as frequently as people aged 55–65 years, they were significantly more likely to consume large amounts of alcohol on a typical drinking occasion.

Males were significantly more likely to have consumed alcohol in the last 12 months compared to females. Among drinkers, males were significantly more likely to consume alcohol four or more times a week on average, compared to females. Male and female drinkers had similar rates of drinking large amounts of alcohol on a typical drinking occasion. However, males were significantly more likely to consume large amounts of alcohol and to drink enough to feel drunk at least weekly, compared to females.

Non-Māori were significantly more likely to have consumed alcohol in the last 12 months compared to Māori. Among past-year drinkers, non-Māori consumed alcohol significantly more frequently than Māori. However, Māori drinkers were significantly more likely to consume a large amount of alcohol on a typical drinking occasion, and to consume a large amount of alcohol at least weekly, compared to non-Māori drinkers.

Alcohol consumption caused a wide range of self-reported problems and harms for drinkers. The respondents' alcohol consumption had caused them harms such as affecting their work or study, and resulting in them doing things they regretted later, such as having unprotected sex.

However, the survey found that it was not only the drinkers who were affected by drinking. People had also experienced problems as a result of someone else's drinking, including physical assault, sexual harassment, and impacts on their family life, social life and financial position.

Key results

Prevalence of alcohol consumption

- An estimated 81.2% (95% confidence interval: 80.1–82.3) of New Zealanders aged 12–65 years had consumed alcohol in the last 12 months.
- Males were significantly more likely to have consumed alcohol in the last 12 months (82.5%; 80.9–84.0) than females (78.4%; 76.8–80.0).
- Non-Māori were significantly more likely to have consumed alcohol in the last 12 months (81.3%; 80.0–82.6) than Māori (74.2%; 72.8–75.7).
- 1.8% (1.4–2.2) of people aged 12–65 years had produced home-made alcohol (beer, wine and/or spirits) in the last 12 months.
- Among people who had travelled overseas in the last 12 months, 63.0% (60.2–65.9) had bought duty-free alcohol into New Zealand at least once in the last 12 months.

Drinking patterns

Among New Zealanders aged 12–65 years who had consumed alcohol in the last 12 months, it was found that:

- 14.7% (13.6–15.7) consumed large amounts of alcohol at least once a week (for males this represents more than six standard drinks on one drinking occasion; for females this represents more than four standard drinks on one drinking occasion)
- males were significantly more likely to have consumed large amounts of alcohol at least once a week (19.7%; 18.1–21.4) compared to females (11.1%; 9.7–12.5)
- Māori were significantly more likely to have consumed large amounts of alcohol at least once a week (21.0%; 19.7–22.3) compared to non-Māori (14.7%; 13.5–15.9)
- overall, 9.5% (8.6–10.3) had consumed enough alcohol to feel drunk at least once a week

- 20.7% (19.3–22.1) had done at least some of their driving under the influence of alcohol in the last 12 months.

Alcohol-related problems

- Two in five past-year drinkers (37.7%; 36.3–39.2) reported that they had felt the effects of alcohol after drinking the night before, more than once in the last 12 months.
- 15.1% (14.0–16.1) of past-year drinkers aged 12–65 years had felt the effects of alcohol while at work, study or engaged in household duties, more than once in the last 12 months.
- Rates for self-reported problems from own alcohol use among drinkers were significantly higher for males in general than females, and were also significantly higher for Māori in general than non-Māori.
- 5.7% (5.1–6.3) of New Zealanders aged 12–65 years had experienced physical assault as a result of someone else’s drinking during the last 12 months.
- 5.3% (4.7–5.9) of New Zealanders aged 12–65 years had experienced sexual harassment as a result of someone else’s drinking during the last 12 months.
- 2.2% (1.8–2.6) of New Zealanders aged 12–65 years had received help to reduce their level of alcohol consumption in their lifetime.
- 1.0% (0.7–1.2) of New Zealanders aged 12–65 years had wanted help to reduce their alcohol consumption during their lifetime, but had not received it.

Alcohol and youth

- 55.7% (51.8–59.7) of youth aged 12–17 years had consumed alcohol in the last 12 months (‘youth drinkers’).
- Among youth, there were no significant differences between males and females, or between Māori and non-Māori, in the prevalence of alcohol consumption in the last 12 months.
- Among youth drinkers, 12.4% (9.4–15.3) consumed large amounts of alcohol at least once a week.
- Māori youth drinkers were significantly more likely to have consumed large amounts of alcohol at least once a week (23.8%; 19.6–28.0) compared to non-Māori youth drinkers (9.8%; 6.4–13.2).
- Among youth drinkers, 62.5% (57.4–67.5) had had alcohol purchased for them by someone else in the last 12 months.

Alcohol and pregnancy

- 82.4% (71.6–93.1) of female drinkers aged 16–39 years who were currently pregnant reported stopping drinking alcohol during their pregnancy.
- 79.2% (73.9–84.6) of female drinkers aged 16–39 years who were planning a pregnancy had stopped drinking alcohol while planning a pregnancy.

Chapter 1: Introduction and Methodology

Introduction

This report presents the key results of the 2004 New Zealand Health Behaviours Survey – Alcohol Use (2004 HBS–AU) and describes alcohol use in the New Zealand population.

The 2004 HBS–AU is part of the New Zealand Health Monitor programme, a co-ordinated cycle of population-based health-related surveys. The New Zealand Health Monitor includes the New Zealand Health Survey, and health behaviour surveys on tobacco use, alcohol use and drug use.

The purpose of the 2004 HBS–AU survey was to provide information on alcohol consumption and drinking patterns, as well as problems relating to one's own or someone else's drinking. Differences in alcohol use between males and females, Māori and non-Māori and across age groups are reported.

This report is descriptive, and as such is intended to stimulate hypothesis formulation and further analysis. The report aims to inform work in alcohol and related fields, as well as to meet the needs of a broader audience, such as the New Zealand public.

Background

One of the Ministry of Health's key population health objectives in the New Zealand Health Strategy is to minimise the harm caused by alcohol and illicit and other drug use to both individuals and the community (Minister of Health 2000).

Alcohol is the most commonly used recreational drug in New Zealand. Its misuse results in mortality and morbidity, as well as considerable harm to society (ALAC and Ministry of Health 2001).

Alcohol causes a range of adverse effects on health, including cirrhosis of the liver, pancreatitis, endocrine disorders, cardiomyopathy, gastritis, high blood pressure, haemorrhagic stroke, and cancers of the mouth, pharynx, larynx, oesophagus, breast and liver. Alcohol also contributes to death and injury on the roads, drowning, suicide, assaults and domestic violence, other non-traffic-related mortality and morbidity, and some mental health disorders and sexual health problems.

High levels of alcohol use are also associated with alcohol dependence and abuse, and alcohol during pregnancy can lead to birth defects in infants, including foetal alcohol syndrome.

In older people, moderate alcohol consumption can protect against ischaemic heart disease, ischaemic stroke, vascular dementia and type 2 diabetes.

Methodology

The 2004 HBS–AU was funded by the Ministry of Health as part of the New Zealand Health Monitor. The data collection and processing of this survey were carried out by the Centre for Social and Health Outcomes Research and Evaluation (SHORE) and Te Ropu Whariki, of Massey University. Public Health Intelligence (PHI), the epidemiology group in the Ministry of Health, analysed the survey data and prepared this report.

The following section describes the survey methodology for the 2004 HBS–AU survey. The details of the survey design, data collection and questionnaire were summarised from SHORE’s methodology report (SHORE 2004).

Survey design

The 2004 HBS–AU was carried out with a computer-assisted telephone interview (CATI) system with 9847 respondents, from September 2003 to August 2004. The target population for the survey was the New Zealand population aged 12–65 years living in private residential dwellings. The survey population included all New Zealanders aged 12–65 years living in private residential dwellings with a connected landline telephone.

A stratified sample design was used to reflect the New Zealand population on the basis of level of urbanisation and geographic regions. The strata, when combined, covered the whole of New Zealand. Two levels of urbanisation were used for the stratification:

- metropolitan areas and large cities, such as Auckland urban area, Hamilton, Christchurch and Wellington
- smaller main urban areas, large towns, small towns and rural areas.

Three different sample frames were utilised to obtain both a full coverage of the population and an increased sample of Māori respondents, to allow equal explanatory power for this group. These sample frames included:

- a random digit dialling (RDD) sample from the general population
- an RDD Māori screened sample
- a sample from the full electoral roll of people who identified as having Māori ancestry.

Data collection

Telephone numbers were randomly selected within each stratum so that all households had an equal chance of being called. Within each household, one or more respondents were randomly selected by the computer for an interview. Each selected telephone number was tried at least 10 times in an effort to reach those people seldom at home.

The telephone interviews for the survey were carried out using the SHORE and Te Ropu Whariki in-house CATI system. Interviews for this survey were conducted throughout New Zealand by a staff of trained interviewers.

The total sample size for the survey was 9847 respondents, which included 4378 Māori and 5469 non-Māori respondents (Table 1). Overall, the weighted response rate for this survey was 59%.

Table 1: Sample sizes for 2004 Health Behaviours Survey – Alcohol Use

Sample	Māori	Non-Māori	Total
RDD (random digit dialling) general sample	840	5469	6309
RDD Māori sample	676	0	676
Electoral roll published Māori sample	2862	0	2862
Total	4378	5469	9847

Source: SHORE 2004

Questionnaire

The questionnaire used in the 2004 HBS–AU was based on previous national New Zealand surveys on alcohol use undertaken in 1995 and 2000 (Habgood et al 2001; Wyllie et al 1996). The questionnaire was tested with pre-testing, cognitive testing and a pilot survey.

The questionnaire for the 2004 survey included sections on:

- alcohol consumption in the last 12 months
- frequency of drinking large amounts of alcohol
- drunkenness
- home-made alcohol
- purchase of duty-free alcohol
- social supply of alcohol
- harm from own and other’s drinking
- help-seeking
- youth drinking.

Other questions were also included in the questionnaire but have not been analysed for this report. These included questions on alcohol advertising, tobacco use, drug use and violence. Analyses of these questions were not the focus of this report, and therefore were not included.

Weighting

Survey weights allow the sample to be used to produce estimates for the entire population. Each eligible person aged 12–65 years selected into the sample represented a number of other eligible people in the population. Therefore, each eligible person selected had a weight to indicate how many population members were represented by that person. Weighting takes into account the individual probability of selection, but allows one to calibrate the survey weights to independent known population totals.

The final survey weights were calculated by several steps. First, inverse probability weights were calculated for households within each of the three samples, taking into account the differential non-response between the strata.

Next, the three different samples were combined using a yield method, in which each sample was proportionally weighted on the basis of the achieved sample sizes (SHORE 2004). The survey weights were then adjusted for the selection of one respondent per household. A key assumption in this process was that the electoral roll population and the landline population were similar, with respect to the variables in the study.

The final stage involved post-stratification: matching the summed survey weights with 2001 Census population figures, for groups based on sex, age and ethnicity.

Data reliability

Two types of error are possible in an estimate based on a sample survey: sampling error and non-sampling error.

Estimates from this survey are subject to sampling error or variability because they are based on information relating to a sample of persons rather than a full enumeration. That is, they may differ from the estimates that would have been produced if all the information had been obtained for all people. The method for calculating the sampling errors is outlined below.

Other inaccuracies are referred to as non-sampling errors, and may occur in any enumeration, regardless of whether it is a sample or full enumeration. Possible non-sampling errors include coverage errors, response bias and measurement errors. Although these cannot be measured, it is useful to be aware of these when interpreting the results of the survey. Significant effort is made to reduce non-sampling error by carefully designing and testing the survey, questionnaire and interview processes, and ensuring quality control of the procedures and data.

In the 2004 HBS–AU, coverage errors may have occurred due to the use of telephone (CATI) interviews, which cannot reach people who do not have a household landline phone. This includes people who have a cellphone but no landline, and people who have had their landline phone disconnected.

Response bias may have occurred if there was differential non-response; that is, if the survey was less likely to be answered by certain people, such as people who have alcohol problems, or people who have not used alcohol in the last 12 months. The interview introduction is an important part of trying to ensure that people take part in the survey.

Measurement error might also have occurred in this survey. Many of the analyses in this report used self-reported information, which may have produced some inaccuracies. Measurement errors include recall error, under- and over-reporting (which may be influenced by the respondent's perception of what is socially desirable) and item non-response (if the respondent does not answer certain questions). Furthermore, the complex processes used to calculate some derived variables in this survey rely on

certain assumptions. For example, the calculation of respondents' alcohol consumption in this analysis used average values for the percentage alcohol content of drinks and the size of drink containers.

Replicate survey weights

Sampling errors for survey estimates from this survey were calculated using a replication method, called the delete-a-group jack-knife method (Kott 1998). This method was selected because it produces accurate and consistent variance estimates and is easy to apply.

The idea behind the delete-a-group jack-knife method is to estimate the variances of survey estimates (eg, prevalence rates) by first dividing the sample into G random groups. G subsamples are produced by deleting one group at a time from the full sample. Each subsample is then reweighted to the population, based on the same weighting estimation methodology as for the full sample.

For this survey, 100 random groups were chosen ($G = 100$). These G groups were formed by sorting the full sample by sample frame and strata. Within each stratum, PSUs (primary sampling units, in this case, households) were then sorted randomly. From this list of the full sample, PSUs were then assigned consecutively to the G groups. For this method, it was assumed that the component samples were taken from a single population.

The formula for calculating the variance of an estimate, y , using the delete-a-group jack-knife method is:

$$\text{Variance}(y) = \frac{(G-1)}{G} \times \sum_g (y_g - y)^2$$

where:

- y = weighted estimate from the full sample
- y_g = weighted estimate, having applied the weights for replicate group g
- G = 100 (the number of replicate groups)
- g = 1, 2, ..., G .

The 95% confidence intervals can be calculated from the variance:

$$\text{Sampling error}(y) = 1.96 \times \sqrt{\text{variance}(y)}$$

$$\text{Confidence interval}(y) = y \pm \text{sampling error}(y)$$

Ninety-five percent confidence intervals

Ninety-five percent confidence intervals are used in this report to represent the sampling error for a prevalence rate. Ninety-five percent confidence intervals are presented in brackets after estimates in the text, and as error bars in graphs.

The confidence interval is influenced by the sample size of the group. When the sample size is small, the confidence interval becomes wider.

The differences between variables are commented on in the text when they were found to be statistically significant at the 5% level. When the confidence intervals of two groups do not overlap, the difference in rates between the groups is statistically significant at the 5% level. However, in some cases when the confidence intervals of two groups overlap, there may still be a statistically significant difference in rates, which can be tested using a two-tailed t-test.

Age-standardisation

Crude rates have been presented in this report for estimates for the total population, and for individual age groups. However, when comparing population sub-groups it is important to note that age is an important determinant of patterns of alcohol use. Therefore, when making comparisons between males and females, and between different ethnic groups, the different age distributions of the comparison populations must be taken into account.

Age-standardised weights have been created for this survey, in addition to the above New Zealand population survey weights ('crude' weights). Age-standardisation was performed by the direct method using the World Health Organization (WHO) world population age distribution (Ahmad et al 2000). The age-standardised weights have been standardised by age group (12–24, 25–34, 35–44, 45–54, 55–65), by Māori/non-Māori and by sex.

By using age-standardised weights when comparing sex or ethnic groups, any differences between ethnic groups for either sex cannot be attributed to differences in the age structure, because this factor has been accounted for.

Ethnicity

In this survey, respondents were asked which ethnic groups they belonged to, with a maximum of two ethnic groups able to be selected. Comparisons of prevalence rates have been carried out between Māori and non-Māori using prioritised ethnicity. This method of reporting ethnicity means that if a respondent selected Māori as one of their ethnic groups, they were assigned to the Māori category. All other respondents who reported an ethnicity were categorised as being non-Māori.

Denominator populations

When interpreting the results in this report it is important to note the denominator for each prevalence rate. The denominator defines the group of people that the prevalence rate, proportion or percentage refers to.

Denominators used in the results presented in this report include:

- New Zealanders: New Zealand population aged 12–65 years
- total population: New Zealand population aged 12–65 years
- drinkers: New Zealanders aged 12–65 who had consumed alcohol in the last 12 months

- youth: New Zealand population aged 12–17 years
- youth drinkers: New Zealanders aged 12–17 years who had consumed alcohol in the last 12 months.

Relative sampling errors

Relative sampling errors (RSEs) give an indication of the precision of an estimate (or prevalence rate). They are defined as the standard error of an estimate, divided by the estimate. Estimates with a relative sampling error of 0.5 or higher have been noted in the text with an asterisk. These estimates are considered to be unreliable and should be interpreted very cautiously.

Liability

Care and diligence have been taken to ensure the information in this document is accurate and up to date. However, we accept no liability for the accuracy of the information, its use or the reliance placed on it.

How to interpret results – tables

Tells us what the table is about, including what the denominator is (in this case it is drinkers), and whether the rates are crude or age-standardised rates.

Prevalence or other rate (eg, proportion of population with the condition or behaviour (prevalence))

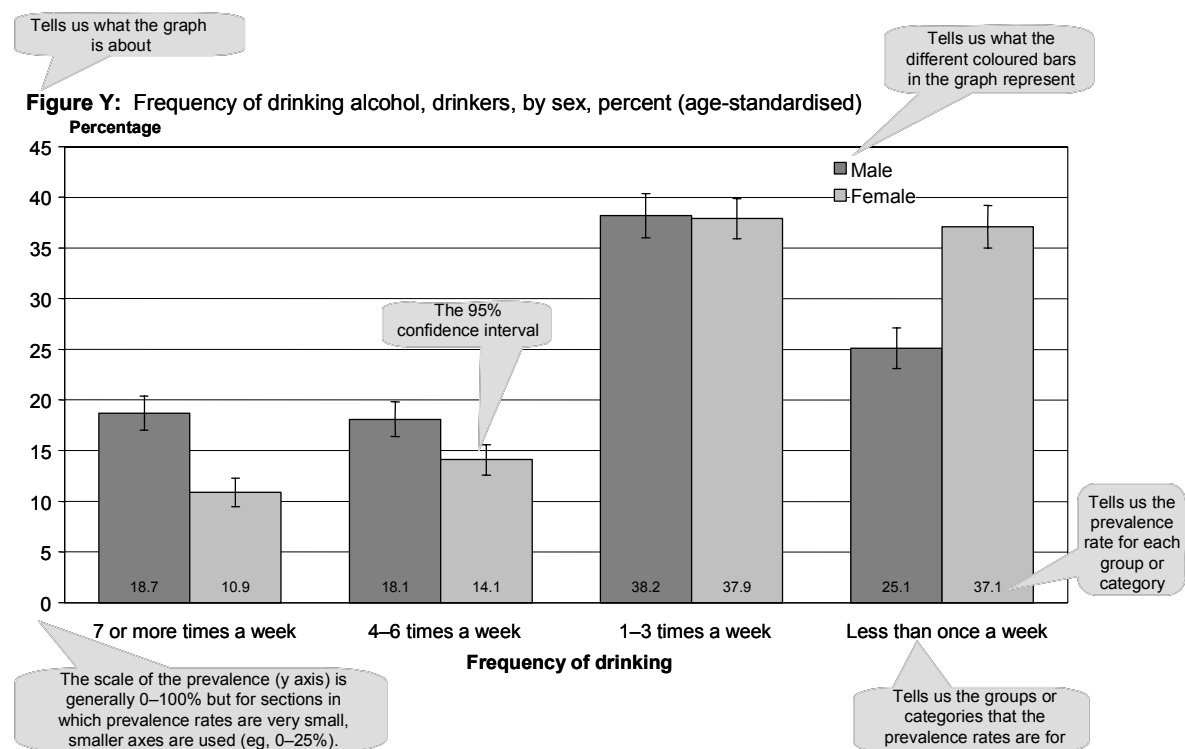
Table X: Drinking large amounts of alcohol at least once a week, drinkers, percent (age-standardised)

	Female	Male	Māori	Non-Māori
Drinking large amounts of alcohol at least once a week	11.1 (9.7–12.5)	19.7 (18.1–21.4)	21.0 (19.7–22.3)	14.7 (13.5–15.9)

Tells us about the indicator

The 95% confidence interval

How to interpret results – figures



Definitions of terms

Drinkers

In this report, the term ‘drinkers’ refers to people who have consumed alcohol in the last 12 months.

Drinking large amounts of alcohol

Drinking large amounts of alcohol is defined as drinking more than six (for males) or four (for females) standard drinks on one drinking occasion, based on the recommendations of the World Health Organization (WHO), through the AUDIT (Alcohol Use Disorders Identification Test).

Frequency of drinking

The frequency of drinking is reported in this document as the average number of times alcohol was consumed per week. This was calculated from the number of times alcohol was reported to have been consumed in the last 12 months by respondents.

It is important to note that in this analysis, each location of drinking is recorded as a different drinking occasion. This means that if a person drinks alcohol at three different locations in one evening (eg, their own home, someone else’s home and at a pub), this is counted as three different drinking occasions. The method used to calculate the frequency of drinking is described in Appendix 2.

Home-made alcohol

This refers to the home production of beer, wine and/or spirits.

In the last 12 months

This refers to the 12 months prior to the respondent answering the survey. The survey interviews were carried out between September 2003 and August 2004.

Standard drink

In New Zealand, a standard drink is defined as the amount of beverage that contains 10 grams (or 12.67 millilitres) of absolute (pure) alcohol (ALAC 2004).

This definition of a standard drink differs from the definition used in the previous national surveys on alcohol use in New Zealand (Habgood et al 2001; Wyllie et al 1996), where a standard drink referred to 15 grams of absolute alcohol.

Typical drinking occasion

Respondents were asked how much alcohol they consumed on a typical drinking occasion at various locations. A typical drinking occasion was defined as one drinking occasion that would be most typical of their drinking. More details on the method used to calculate the number of standard drinks consumed on a typical drinking occasion are available in Appendix 2.

Chapter 2: Prevalence of Alcohol Consumption

Prevalence of alcohol consumption in the last 12 months

Overall, an estimated 81.2% (80.1–82.3) of New Zealanders aged 12–65 years had consumed alcohol in the last 12 months. For the purposes of this report, these people will be defined as ‘drinkers’; that is, people who had consumed alcohol in the last 12 months.

Comparing groups using age-standardised rates, males were significantly more likely to have consumed alcohol in the last 12 months (82.5%; 80.9–84.0) than females (78.4%; 76.8–80.0) (Table 2).

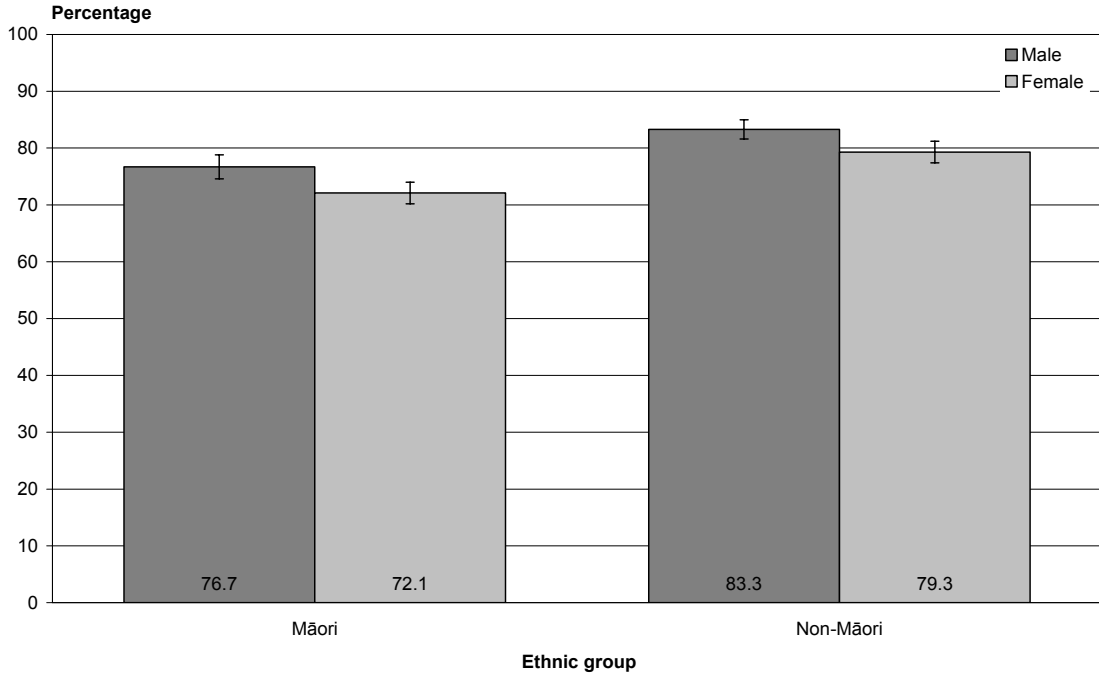
Non-Māori were significantly more likely to have consumed alcohol in the last 12 months (81.3%; 80.0–82.6) compared to Māori (74.2%; 72.8–75.7) (Table 2).

Table 2: Prevalence of alcohol consumption in the last 12 months, total population, by sex and ethnic group, percent (age-standardised)

	Female	Male	Māori	Non-Māori
Prevalence of alcohol consumption in the last 12 months	78.4 (76.8–80.0)	82.5 (80.9–84.0)	74.2 (72.8–75.7)	81.3 (80.0–82.6)

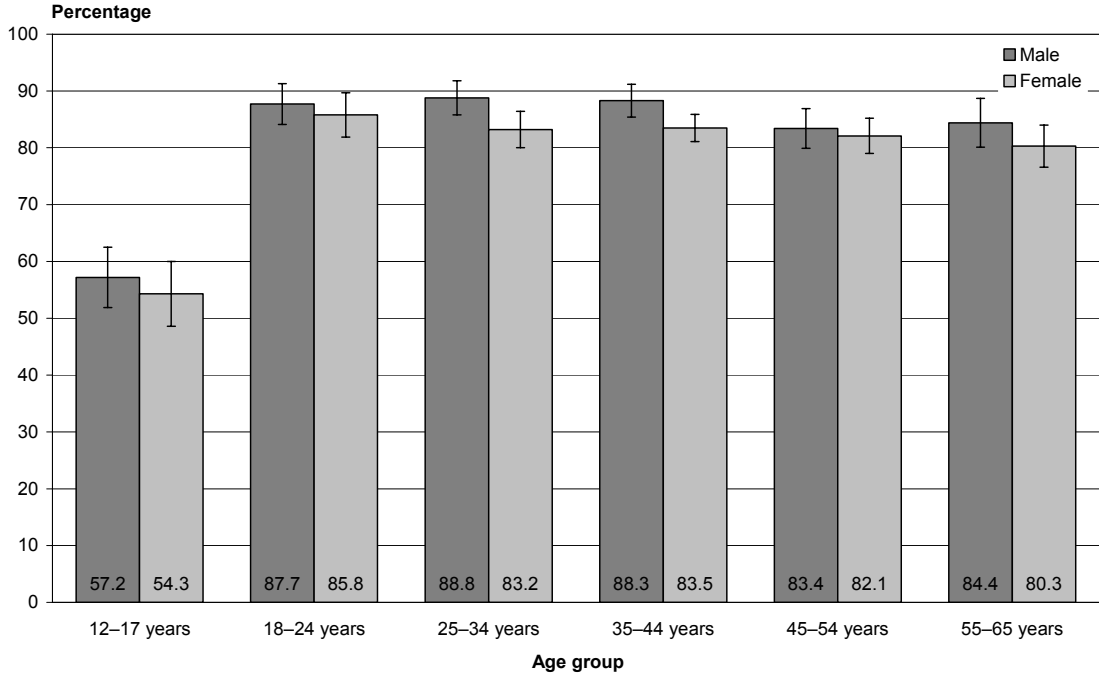
Figure 1 shows that Māori females were significantly less likely to have consumed alcohol in the last 12 months compared to all other groups. Non-Māori males were significantly more likely to have consumed alcohol in the last 12 months than all other groups.

Figure 1: Prevalence of alcohol consumption in the last 12 months, total population, by sex and ethnic group, percent (age-standardised)



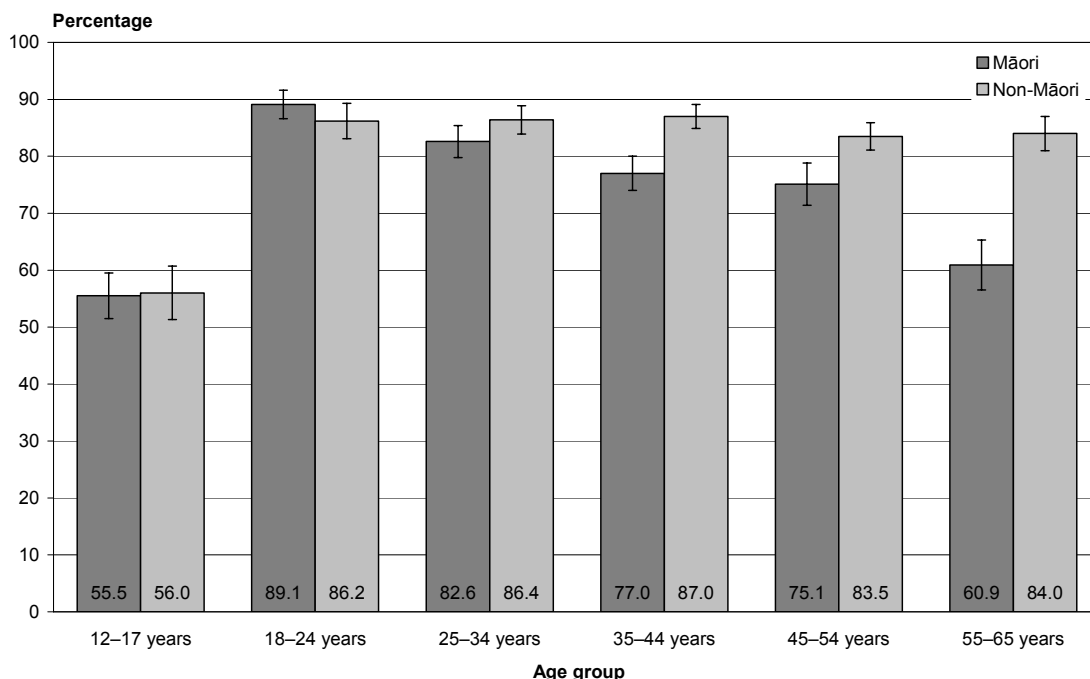
People aged 12–17 years were significantly less likely than all other age groups to have consumed alcohol in the last 12 months (Figure 2). In the age groups 25–34 and 35–44 years, males were significantly more likely than females to have consumed alcohol in the last 12 months. There were no significant differences between males and females for all other age groups.

Figure 2: Prevalence of alcohol consumption in the last 12 months, total population, by age group and sex, percent (crude)



Among people aged 25–65 years, non-Māori were significantly more likely than Māori to have consumed alcohol in the last 12 months (Figure 3). People aged 12–17 years and Māori aged 55–65 years were significantly less likely than all other age groups to have consumed alcohol in the last 12 months.

Figure 3: Prevalence of alcohol consumption in the last 12 months, total population, by age and ethnic group, percent (crude)



Type of alcohol consumed in the last 12 months

An estimated 79.2% (78.1–80.3) of drinkers had consumed wine at least once in the past year (Table 3). Beer (including low-alcohol beer and home brew) was the second most common alcoholic drink consumed by drinkers (74.3%; 73.1–75.6), followed by spirits/liqueurs/mixed cocktails (72.9%; 71.5–74.2).

Table 3: Prevalence of alcohol consumption in the last 12 months, drinkers, by type of alcohol, percent (crude)

Type of alcohol consumed in last 12 months	Total
Wine	79.2 (78.1–80.3)
Beer	74.3 (73.1–75.6)
Spirits	72.9 (71.5–74.2)
Ready-to-drink (RTD) alcoholic drinks	45.9 (44.3–47.4)
Sherry	21.7 (20.3–23.1)

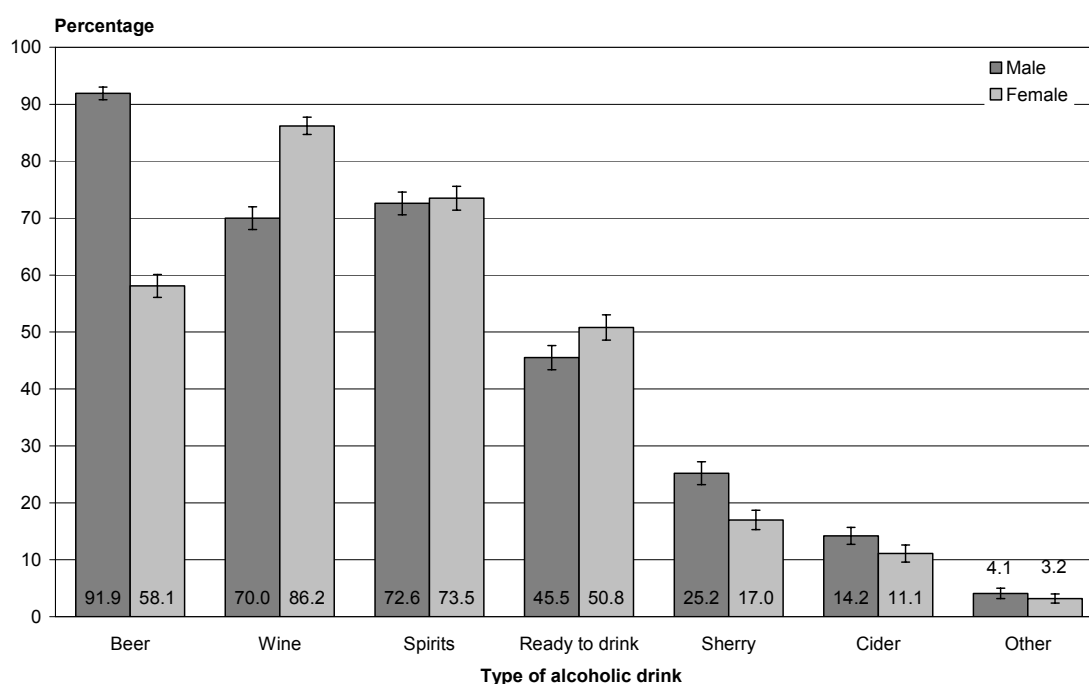
Cider	12.2 (11.2–13.3)
Other	3.5 (2.9–4.0)

Note: Beer includes low-alcohol beer and home brew; spirits includes liqueurs and mixed cocktails; sherry includes port and vermouth.

Using age-standardised rates to compare groups, male drinkers were significantly more likely to have consumed beer in the last 12 months compared to female drinkers (Figure 4). However, female drinkers were significantly more likely to have consumed wine in the last 12 months than male drinkers. Female drinkers were significantly more likely to have consumed spirits than beer in the last 12 months.

Among the lesser-consumed beverages, females were significantly more likely to have consumed 'ready-to-drink' alcoholic drinks than males, and males were significantly more likely to have consumed sherry and cider compared to females.

Figure 4: Prevalence of alcohol consumption in last 12 months, drinkers, by type of alcohol and sex, percent (age-standardised)

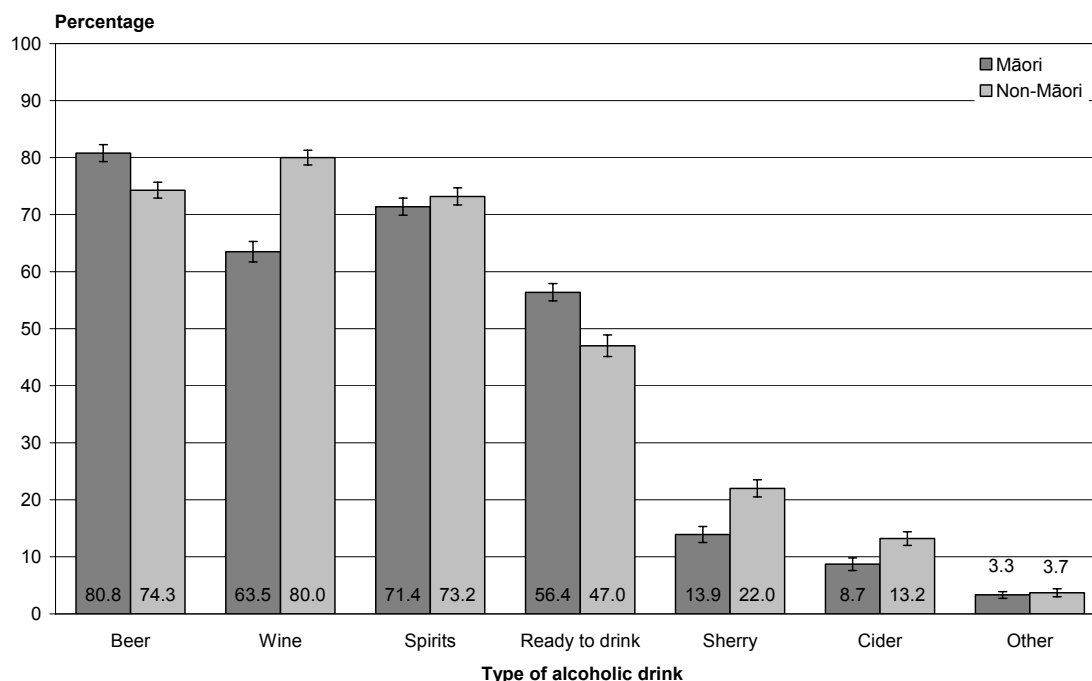


Note: Beer includes low-alcohol beer and home brew; spirits includes liqueurs and mixed cocktails; sherry includes port and vermouth.

Māori drinkers were significantly more likely to have consumed beer in the last 12 months compared to non-Māori, while non-Māori were significantly more likely to have consumed wine in the last 12 months compared to Māori (Figure 5).

Among the lesser-consumed beverages, Māori were significantly more likely to have consumed ready-to-drink alcoholic drinks than non-Māori, and non-Māori were significantly more likely to have consumed sherry and cider compared to Māori.

Figure 5: Prevalence of alcohol consumption in the last 12 months, drinkers, by type of alcohol and ethnic group, percent (age-standardised)



Note: Beer includes low alcohol beer and home brew; spirits includes liqueurs and mixed cocktails; sherry includes port and vermouth.

Analysis of the types of alcohol consumed in the last 12 months by age groups shows that drinkers aged 18–24 years were significantly more likely to have consumed spirits and ready-to-drink alcoholic drinks in the last 12 months compared to all other age groups. For crude rates of the consumption of types of alcohol in the last 12 months by age group, see Appendix 1.

Home-made and duty-free alcohol

Overall, an estimated 1.8% (1.4–2.2) of New Zealanders aged 12–65 years had produced home-made alcohol (beer, wine and/or spirits) in the last 12 months.

Using age-standardised rates for comparisons, males (3.0%; 2.3–3.7) were significantly more likely than females (0.6%; 0.3–0.9) to have made alcohol in the last 12 months. Non-Māori were significantly more likely to have made alcohol in the last 12 months (1.9%; 1.4–2.3) than Māori (1.1%; 0.7–1.4).

Of New Zealanders who had travelled overseas in the last 12 months, 63.0% (60.2–65.9) had brought duty-free alcohol into New Zealand at least once. There were no significant differences between males and females, or between Māori and non-Māori, in the purchase of duty-free alcohol.

Chapter 3: Drinking Patterns

Frequency of drinking alcohol

Respondents were asked the number of times they had consumed alcohol in the last 12 months, by different types of location. In the following analysis the frequency of drinking represents the number of drinking occasions in the last 12 months, presented as the average number of drinking occasions per week. A drinking occasion refers to drinking alcohol at one location; therefore, drinking alcohol at three locations in one evening is recorded as three drinking occasions (see Appendix 2 for more details).

The following results have been presented for drinkers only; that is, people who had consumed alcohol in the last 12 months.

Overall, an estimated 15.4% (14.3–16.4) of New Zealand drinkers consumed alcohol seven or more times a week on average in the last 12 months (Table 4).

Approximately one in six New Zealand drinkers (16.2%; 15.1–17.3) consumed alcohol on average four to six times a week. An estimated 38.2% (36.7–39.7) of drinkers consumed alcohol on average one to three times a week. A further 30.2% (28.9–31.6) of drinkers consumed alcohol less than once a week.

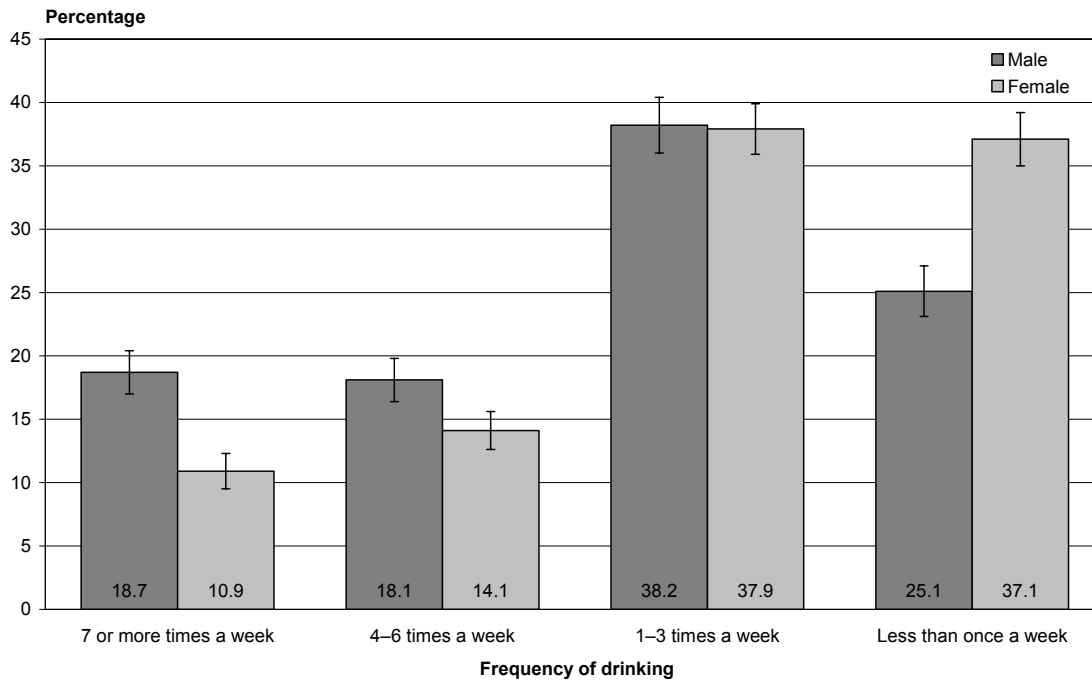
Table 4 shows that for people aged 18–65 years, the most common frequency of drinking alcohol was one to three times a week. An estimated one in four drinkers aged 55–65 years (25.9%; 22.1–29.6) drank alcohol seven or more times a week. Drinkers aged 12–17 years were the least frequent users of alcohol, with over half (58.7%; 54.1–63.3) of drinkers within this age group drinking alcohol less than once a week on average.

Table 4: Frequency of drinking alcohol, drinkers, by age group, percent (crude)

Frequency	Total	Age group					
		12–17 years	18–24 years	25–34 years	35–44 years	45–54 years	55–65 years
7 or more times a week	15.4 (14.3–16.4)	4.2 (2.2–6.1)	15.4 (12.9–18.0)	12.2 (10.0–14.5)	13.6 (11.3–16.0)	18.3 (15.4–21.1)	25.9 (22.1–29.6)
4–6 times a week	16.2 (15.1–17.3)	6.4 (3.8–9.0)	18.3 (15.4–21.2)	17.9 (15.5–20.2)	17.0 (14.5–19.4)	18.0 (15.1–20.9)	14.5 (11.4–17.5)
1–3 times a week	38.2 (36.7–39.7)	30.7 (26.3–35.1)	40.1 (35.9–44.3)	39.7 (36.8–42.7)	43.8 (40.8–46.8)	36.5 (33.2–39.8)	31.5 (27.7–35.3)
Less than once a week	30.2 (28.9–31.6)	58.7 (54.1–63.3)	26.2 (22.8–29.6)	30.2 (27.2–33.2)	25.6 (23.0–28.3)	27.2 (24.4–30.1)	28.2 (24.4–31.9)

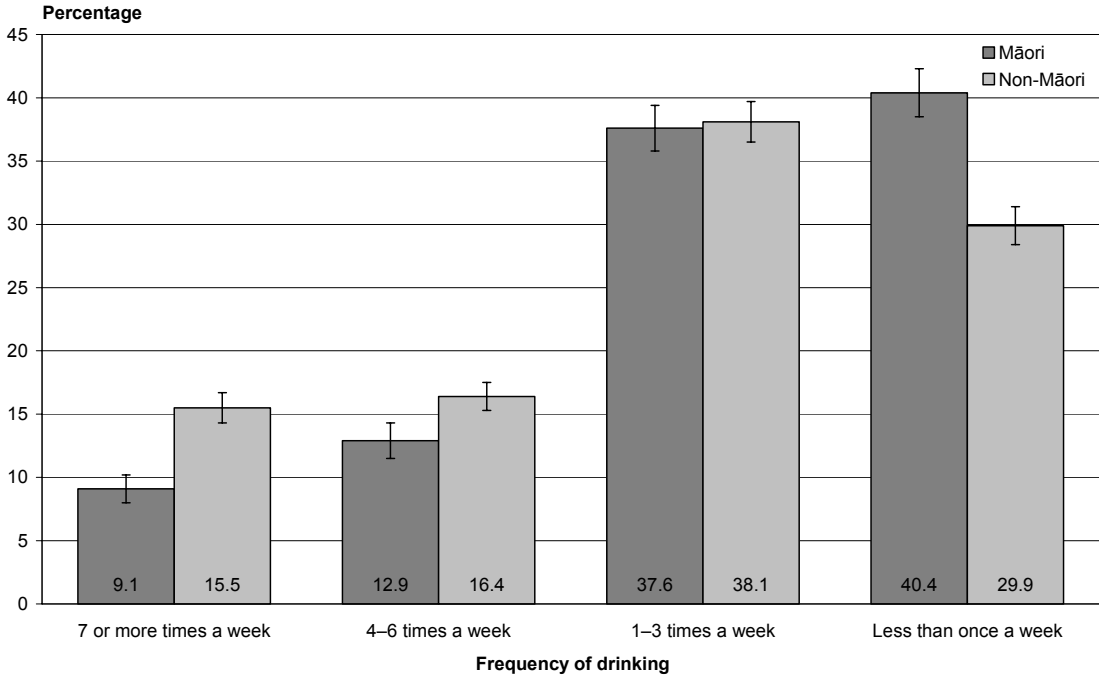
Age-standardised rates show that male drinkers were significantly more likely than female drinkers to drink alcohol four or more times a week (Figure 6). A significantly higher proportion of females consumed alcohol less than once a week compared to males.

Figure 6: Frequency of drinking alcohol, drinkers, by sex, percent (age-standardised)



Among drinkers, non-Māori were significantly more likely than Māori to drink alcohol four or more times a week (Figure 7). Māori were significantly more likely to consume alcohol less than once a week, compared to non-Māori.

Figure 7: Frequency of drinking alcohol, drinkers, by ethnic group, percent (age-standardised)



Drinking large amounts of alcohol on a typical drinking occasion

Respondents were asked how much alcohol they consumed on a typical drinking occasion.

The World Health Organization (WHO), through the AUDIT (Alcohol Use Disorders Identification Test), recommends that on any one drinking occasion no more than the following number of standard drinks should be consumed:

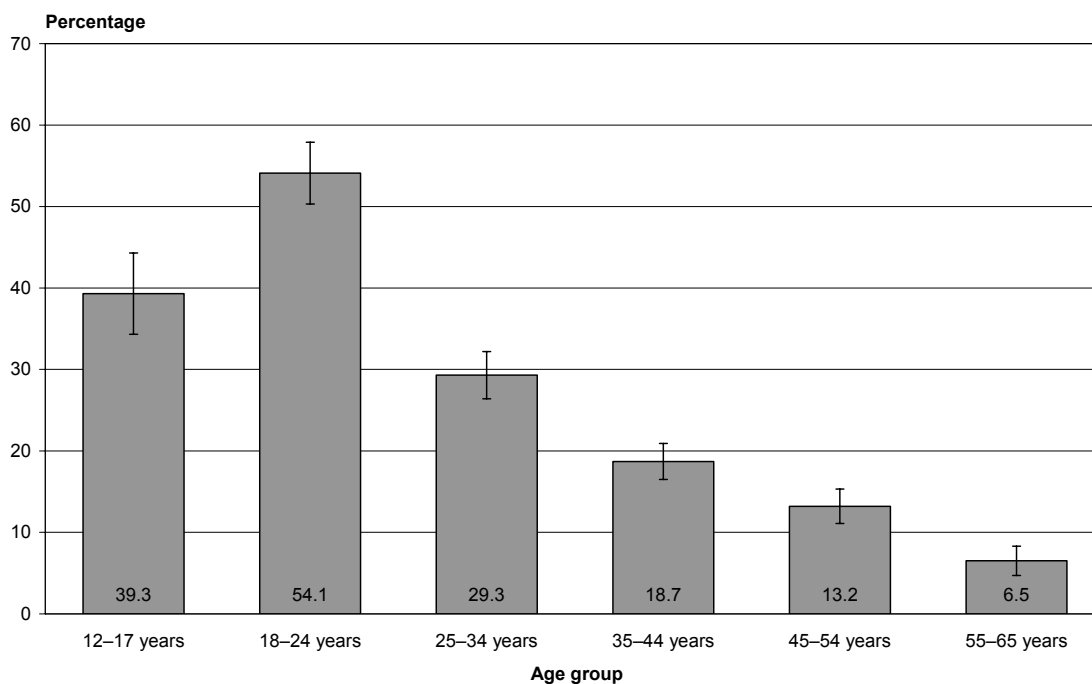
- six standard drinks for males
- four standard drinks for females.

Drinking more than this amount of alcohol on one drinking occasion is defined as drinking large amounts of alcohol. Alcohol consumption at this level is potentially hazardous and harmful, and is associated with increased risk of alcohol-related harm.

Overall, an estimated 24.7% (23.6–25.8) of New Zealand drinkers aged 12–65 years consumed large amounts of alcohol on a typical drinking occasion.

One in two drinkers aged 18–24 years consumed large amounts of alcohol on a typical drinking occasion (Figure 8). Approximately two in five drinkers aged 12–17 years consumed large amounts of alcohol on a typical drinking occasion. The proportion of drinkers who consumed large amounts of alcohol on a typical drinking occasion decreased with increasing age for all age groups between 18 and 65 years.

Figure 8: Prevalence of drinking large amounts of alcohol on a typical drinking occasion, drinkers, by age group, percent (crude)



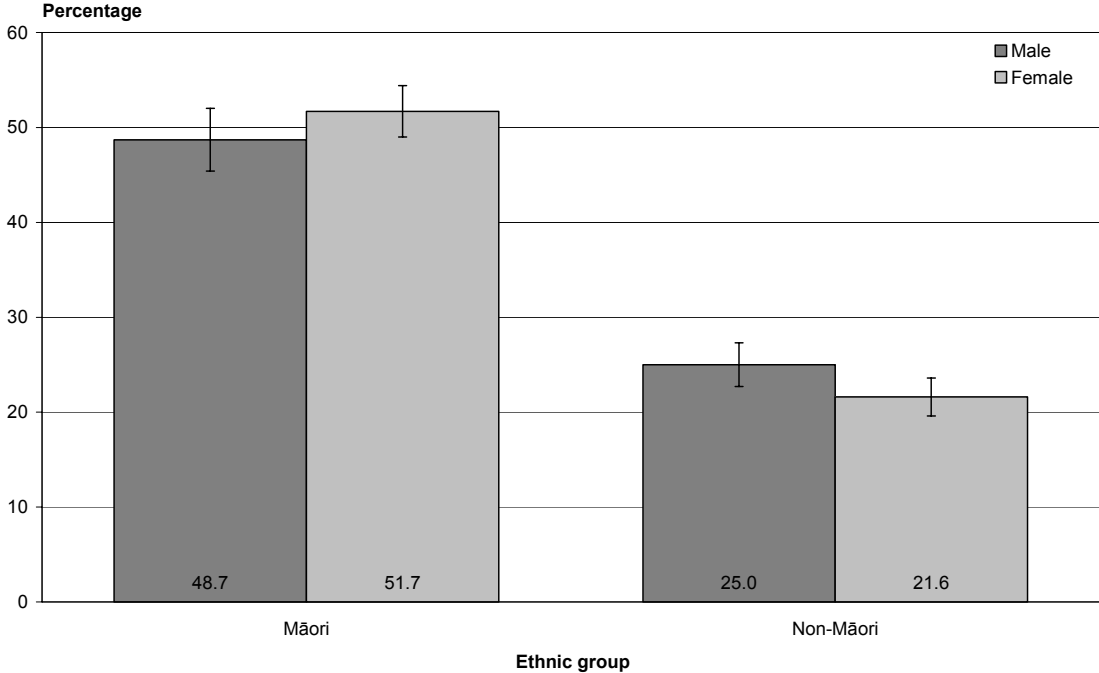
Using age-standardised rates to compare groups, Māori were significantly more likely to consume large amounts of alcohol on a typical drinking occasion (50.3%; 48.1–52.4) compared to non-Māori (23.3%; 22.0–24.6) (Table 5). Overall, there were no significant differences between males and females in the proportions drinking more than the recommended number of alcoholic drinks on a typical drinking occasion.

Table 5: Prevalence of drinking large amounts of alcohol on a typical drinking occasion, drinkers, by sex and ethnic group, percent (age-standardised)

	Female	Male	Māori	Non-Māori
Drinking large amounts of alcohol on a typical drinking occasion	25.1 (23.3–26.9)	27.8 (25.7–29.9)	50.3 (48.1–52.4)	23.3 (22.0–24.6)

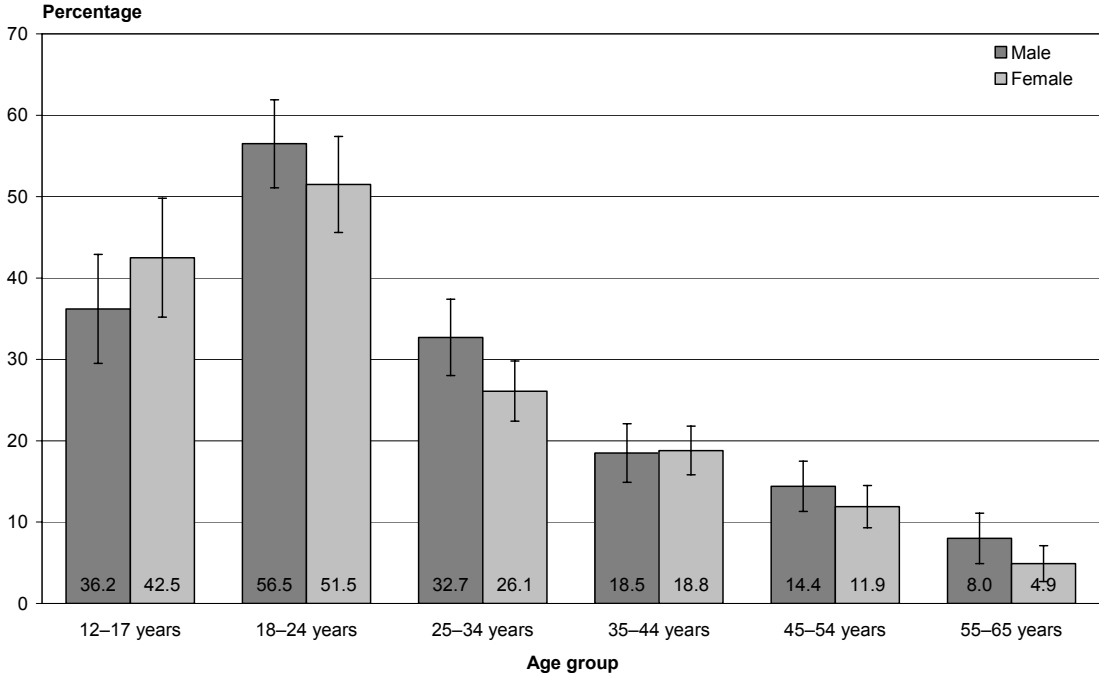
Among non-Māori drinkers, males were significantly more likely than females to drink large amounts of alcohol on a typical drinking occasion (Figure 9).

Figure 9: Prevalence of drinking large amounts of alcohol on a typical drinking occasion, drinkers, by sex and ethnic group, percent (age-standardised)



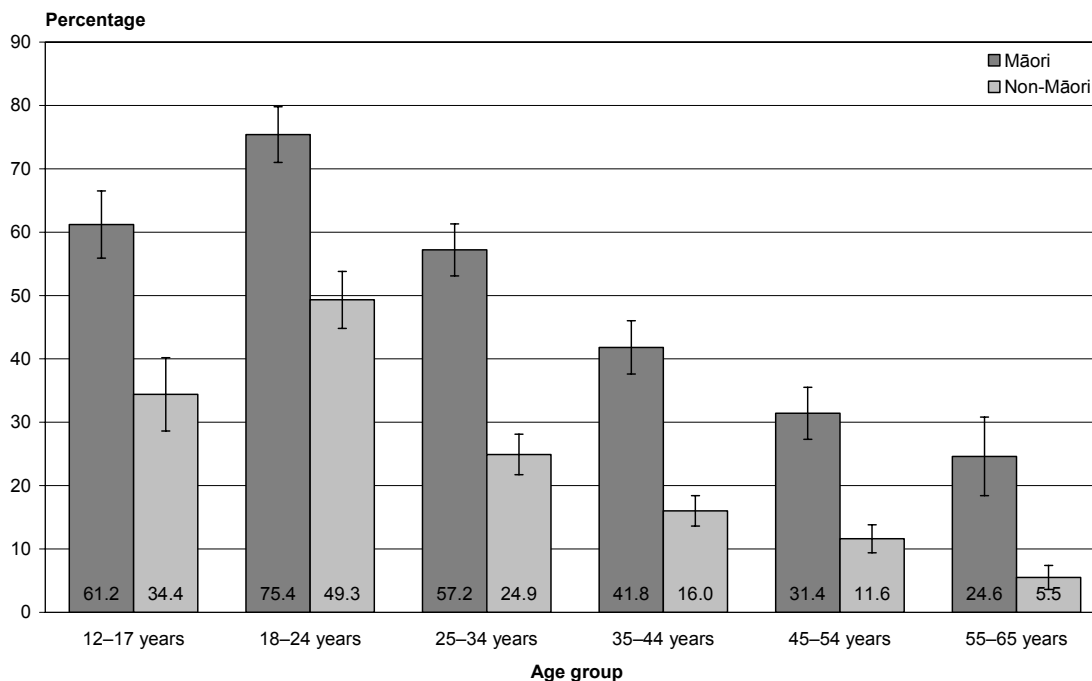
Among drinkers aged 25–34 years, males were significantly more likely than females to drink large amounts of alcohol on a typical drinking occasion (Figure 10). However, there were no other significant differences between males and females by age group.

Figure 10: Prevalence of drinking large amounts of alcohol on a typical drinking occasion, drinkers, by sex and age group, percent (crude)



For all age groups, Māori drinkers were significantly more likely to consume large amounts of alcohol on a typical drinking occasion compared to non-Māori (Figure 11).

Figure 11: Prevalence of drinking large amounts of alcohol on a typical drinking occasion, drinkers, by ethnic and age group, percent (crude)

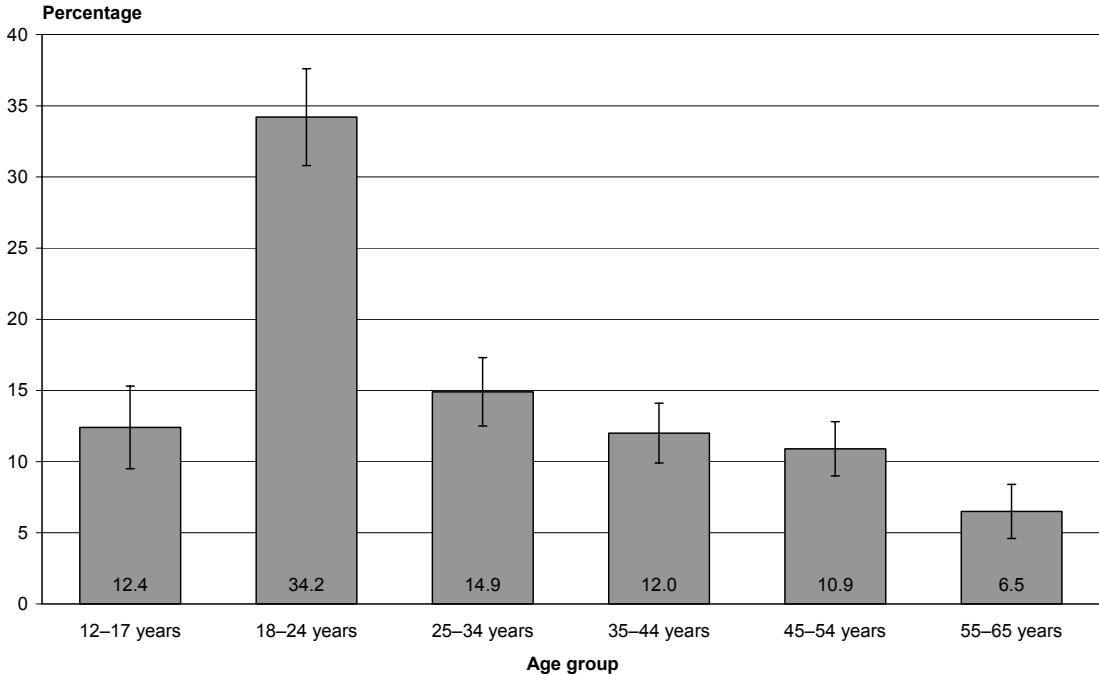


Drinking large amounts of alcohol at least once a week

Drinkers were asked how often they drank large amounts of alcohol in the last 12 months. Overall, 14.7% (13.6–15.7) of drinkers consumed large amounts of alcohol at least once a week.

New Zealand drinkers aged 18–24 years were significantly more likely than all other age groups to drink large amounts of alcohol at least once a week (Figure 12). Drinkers aged 55–65 years were significantly less likely than drinkers in all other age groups to drink large amounts of alcohol at least once a week.

Figure 12: Drinking large amounts of alcohol at least once a week, drinkers, by age group, percent (crude)



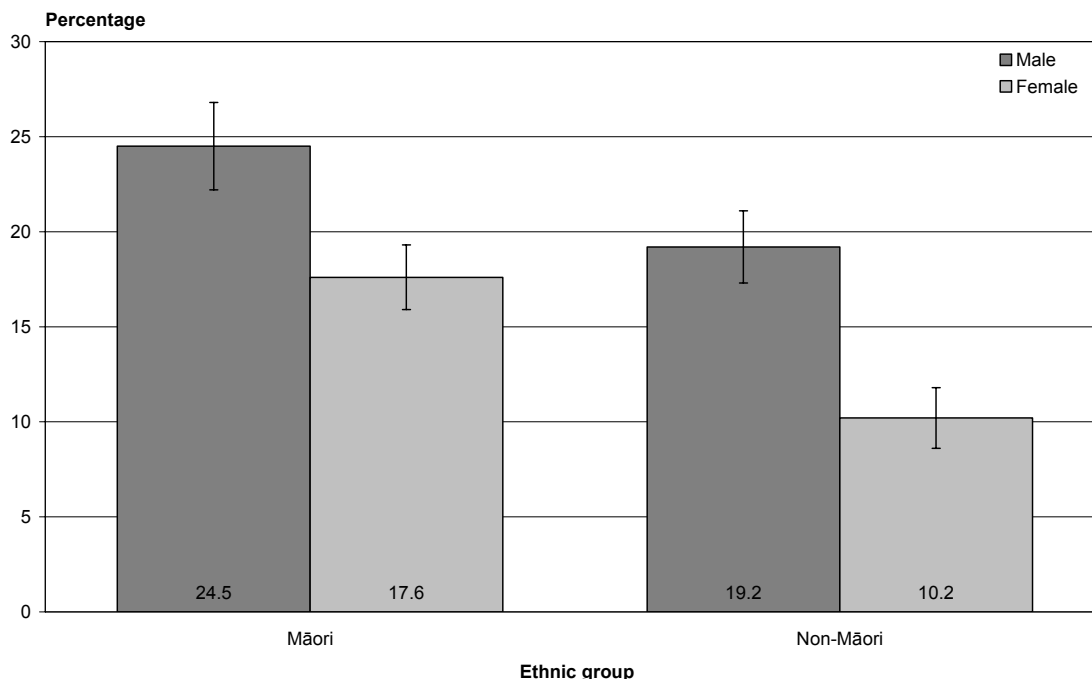
Among drinkers, males were significantly more likely to drink large amounts at least once a week (19.7%; 18.1–21.4) compared to females (11.1%; 9.7–12.5), when comparing age-standardised rates (Table 6). Māori were significantly more likely to drink large amounts of alcohol at least once a week (21.0%; 19.7–22.3) compared to non-Māori (14.7%; 13.5–15.9).

Table 6: Drinking large amounts of alcohol at least once a week, drinkers, percent (age-standardised)

	Female	Male	Māori	Non-Māori
Drinking large amounts of alcohol at least once a week	11.1 (9.7–12.5)	19.7 (18.1–21.4)	21.0 (19.7–22.3)	14.7 (13.5–15.9)

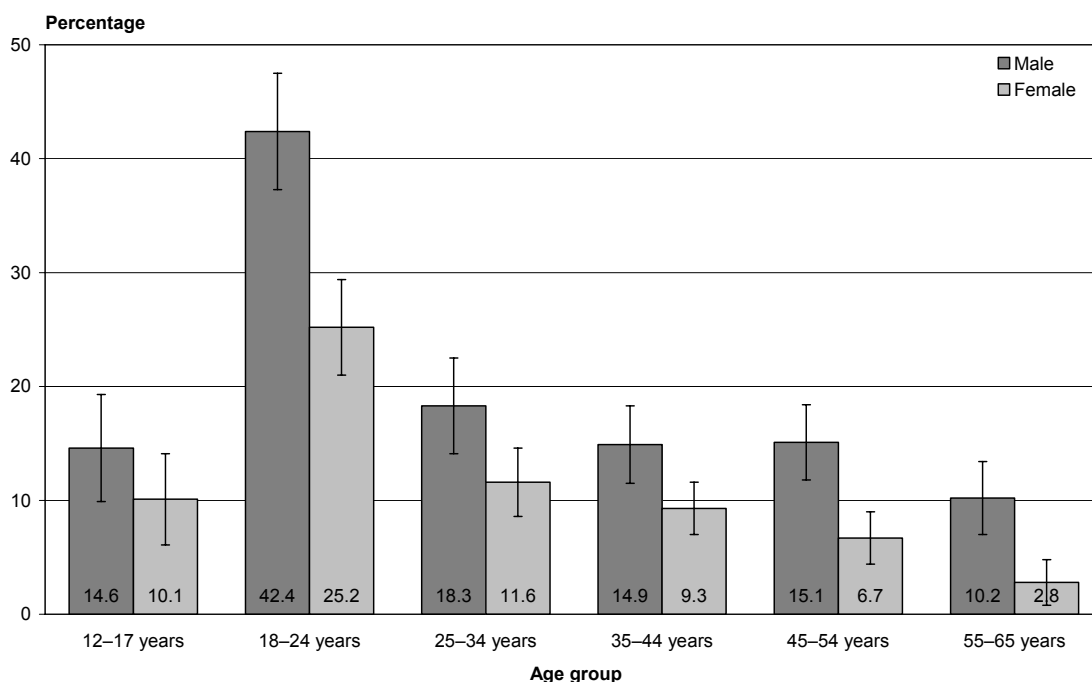
Among both Māori and non-Māori, males were significantly more likely than females to drink large amounts of alcohol at least once a week (Figure 13). However, for both males and females, Māori were significantly more likely to drink large amounts of alcohol at least once a week compared to non-Māori.

Figure 13: Drinking large amounts of alcohol at least once a week, drinkers, by sex and ethnic group, percent (age-standardised)



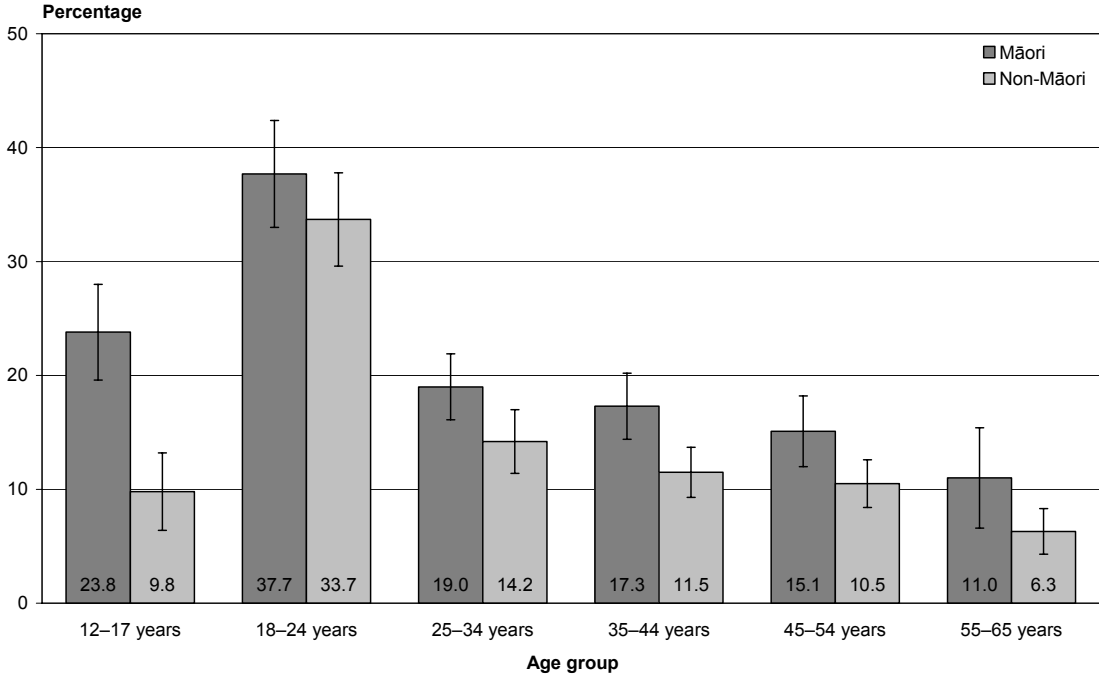
Among all drinkers except those aged 12–17 years, males were significantly more likely than females to drink large amounts of alcohol at least once a week (Figure 14). In particular, among drinkers, males aged 18–24 years were significantly more likely than all other people to drink large amounts of alcohol at least once a week.

Figure 14: Drinking large amounts of alcohol at least once a week, drinkers, by sex and age group, percent (crude)



Among all drinkers except those aged 18–24 years and 55–65 years, Māori were significantly more likely than non-Māori to drink large amounts of alcohol at least once a week (Figure 15).

Figure 15: Drinking large amounts of alcohol at least once a week, drinkers, by ethnic and age group, percent (crude)



Drinking enough to feel drunk at least once a week

Drinkers were asked how often they drank enough alcohol to feel drunk. Overall, 9.5% (8.6–10.3) of drinkers consumed enough alcohol to feel drunk at least once a week.

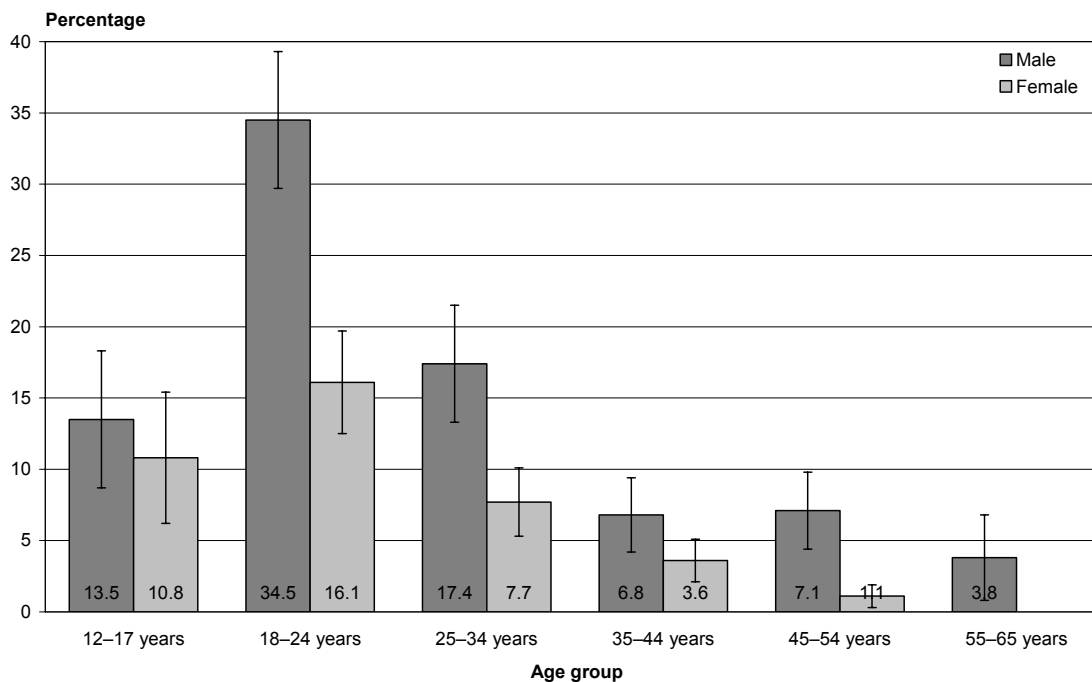
Using age-standardised rates to compare groups, males were significantly more likely to drink enough alcohol to feel drunk at least once a week (14.3%; 12.7–15.9) compared to females (6.4%; 5.3–7.4) (Table 7). Māori were significantly more likely to drink enough to feel drunk at least once a week (14.0%; 12.8–15.3) compared to non-Māori (9.8%; 8.7–10.9).

Table 7: Drinking enough alcohol to feel drunk at least once a week, drinkers, percent (age-standardised)

	Female	Male	Māori	Non-Māori
Drinking enough alcohol to feel drunk at least once a week	6.4 (5.3–7.4)	14.3 (12.7–15.9)	14.0 (12.8–15.3)	9.8 (8.7–10.9)

Males aged 18–24 years were significantly more likely than any other group to drink enough to feel drunk at least once a week (Figure 16). Among those aged 18–54 years, males were significantly more likely than females to drink enough to feel drunk at least once a week.

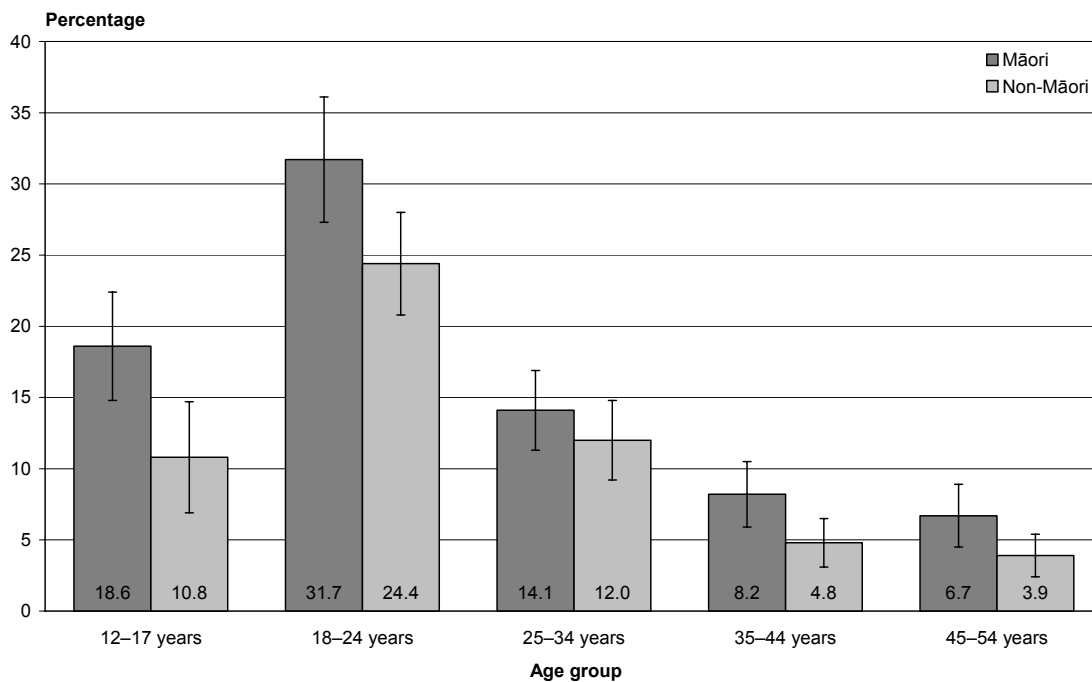
Figure 16: Drinking enough alcohol to feel drunk at least once a week, drinkers, by sex and age group, percent (crude)



Note: The result for females aged 55-65 years was suppressed due to low numbers.

Figure 17 shows that for all age groups except 25-34 years, Māori were significantly more likely than non-Māori to feel drunk at least weekly.

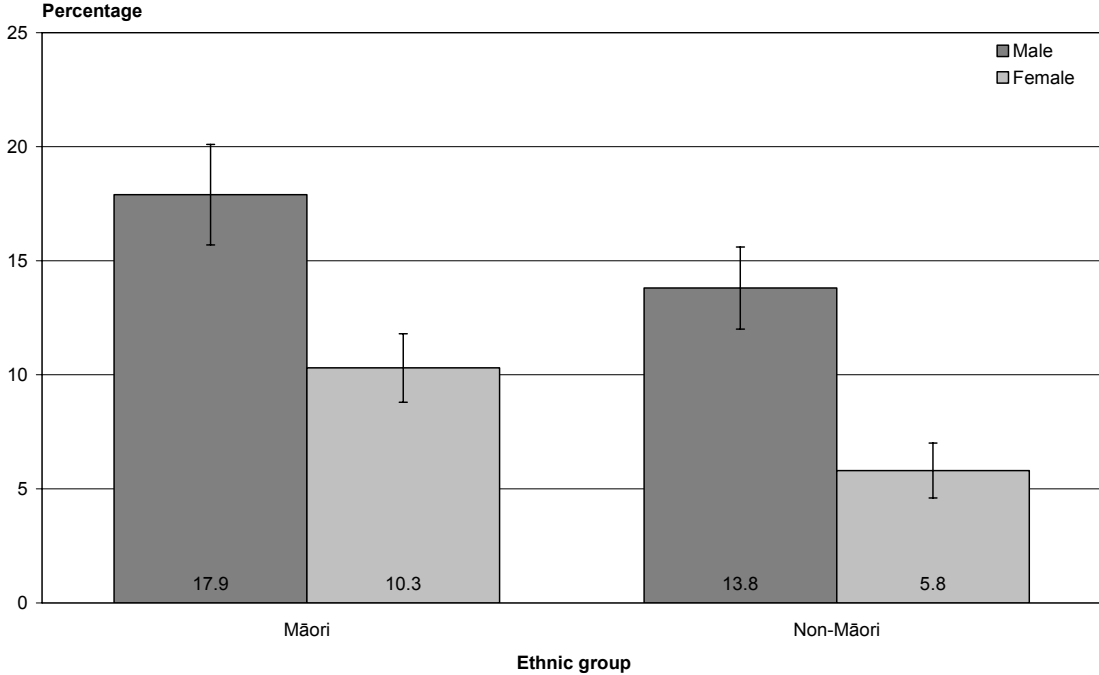
Figure 17: Drinking enough alcohol to feel drunk at least once a week, drinkers, by age and ethnic group, percent (crude)



Note: The results for people aged 55-65 years were suppressed due to low numbers.

Figure 18 shows that male Māori were significantly more likely to drink enough to feel drunk at least once a week than male non-Māori and females (both Māori and non-Māori). Among both Māori and non-Māori, males were significantly more likely than females to drink enough to feel drunk at least once a week.

Figure 18: Drinking enough alcohol to feel drunk at least once a week, drinkers, by sex and ethnic group, percent (age-standardised)



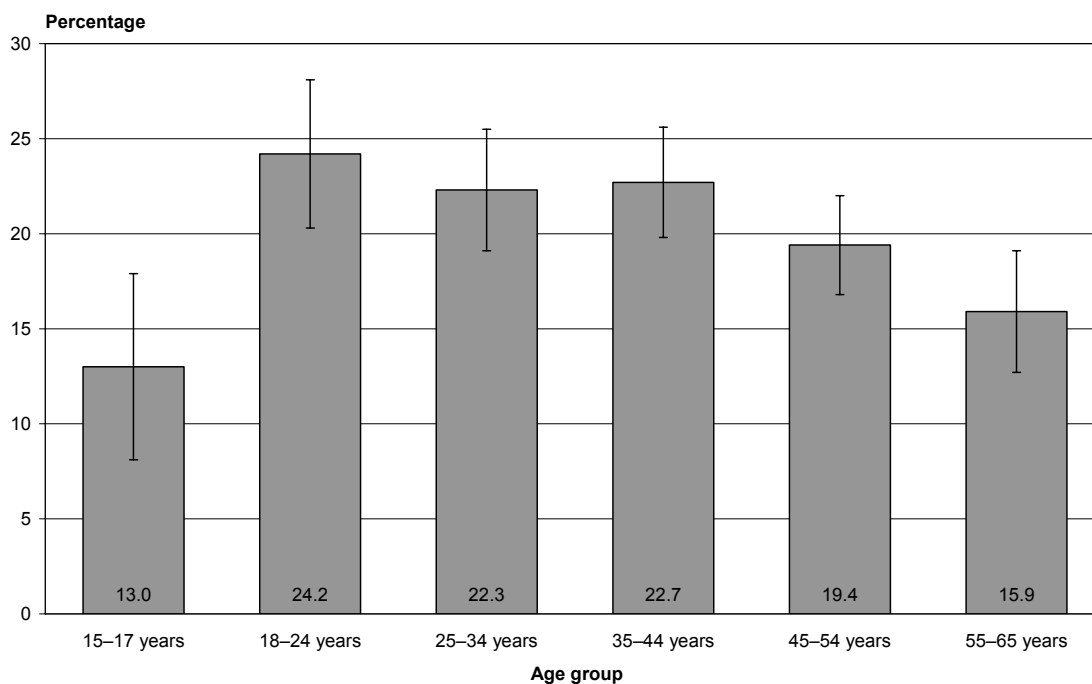
Drinking and driving

Drinkers were asked whether they did ‘none’, ‘hardly any’, ‘some’, ‘most’ or ‘all’ of their driving while under the influence of alcohol, and were also given the option to state that they did not drive.

One in five drinkers who drove did at least some (includes ‘hardly any’, ‘some’, ‘most’ or ‘all’) of their driving under the influence of alcohol (20.7%; 19.3–22.1).

Figure 19 shows that drinkers younger than 18 years who could drive were significantly less likely to have driven while under the influence of alcohol compared to drinkers aged 18–54 years.

Figure 19: Prevalence of driving under the influence of alcohol among drinkers who drive, by age group, percent (crude)



Male drinkers were significantly more likely to do at least some of their driving while under the influence of alcohol (27.3%; 25.0–29.7) than female drinkers (13.9%; 12.2–15.5), when comparing these groups using age-standardised rates (Table 8). There were no significant differences between Māori and non-Māori.

Table 8: Prevalence of driving under the influence of alcohol among drinkers who drive, by sex and ethnic group, percent (age-standardised)

	Female	Male	Māori	Non-Māori
Driving under the influence of alcohol	13.9 (12.2–15.5)	27.3 (25.0–29.7)	18.8 (17.3–20.4)	20.9 (19.3–22.5)

Chapter 4: Location of Alcohol Consumption

Location of drinking alcohol

People who had consumed alcohol in the last 12 months ('drinkers') were asked the locations at which they had consumed alcohol at least once in the last 12 months. The most common locations were private homes (Table 9). Overall, 92.0% (91.2–92.7) of drinkers had consumed alcohol at their own home in the last 12 months, and 84.8% (83.7–85.8) had consumed alcohol at someone else's home.

There were significant differences between age groups in location of alcohol consumption. Drinkers aged 12–17 years were significantly less likely to have consumed alcohol in their own home in the last 12 months compared to drinkers aged 25–65 years. A high proportion of drinkers aged 18–24 years (70.6%; 66.9–74.4) had consumed alcohol in nightclubs in the last 12 months, although they were significantly less likely to have consumed alcohol in restaurants, cafes and coffee shops compared to older age groups. Drinkers aged 12–24 years were significantly more likely than other people to have consumed alcohol in private motor vehicles in the last 12 months.

Comparing age-standardised rates (Table 10) shows that, among drinkers, males were significantly more likely than females to have consumed alcohol in the last 12 months at:

- pubs/hotels/taverns
- workplaces
- outdoor public places
- nightclubs
- sports events
- sports clubs
- other clubs, groups and meetings
- private motor vehicles.

Females were significantly more likely than males to have consumed alcohol at a restaurant, café or coffee shop in the last 12 months.

Among drinkers, non-Māori were significantly more likely than Māori to have consumed alcohol:

- at their own home or someone else's home
- in restaurants/cafes/coffee shops
- in outdoor public places
- at theatres or movies.

By comparison, Māori were significantly more likely than non-Māori to have consumed alcohol at:

- nightclubs
- sports clubs
- other clubs, groups and meetings
- private motor vehicles
- marae.

Table 9: Location of drinking alcohol at least once in the last 12 months, drinkers, by age group, percent (crude)

Location	Total	Age group					
		12–17 years	18–24 years	25–34 years	35–44 years	45–54 years	55–65 years
Own home	92.0 (91.2–92.7)	83.7 (80.0–87.3)	83.0 (80.1–85.9)	92.3 (90.4–94.1)	95.7 (94.5–97.0)	95.5 (94.2–96.8)	94.0 (92.2–95.8)
Someone else's home	84.8 (83.7–85.8)	73.7 (69.0–78.5)	88.2 (85.9–90.5)	88.5 (86.1–90.8)	88.3 (86.2–90.4)	84.1 (81.8–86.5)	78.3 (74.4–82.3)
Restaurants/café/ coffee shops	70.9 (69.4–72.4)	28.7 (23.7–33.7)	59.3 (55.6–63.1)	76.4 (73.2–79.6)	79.6 (77.2–82.0)	79.5 (77.0–82.0)	74.1 (70.1–78.1)
Pubs/hotels/taverns	60.0 (58.6–61.4)	11.9 (8.9–14.9)	79.3 (76.4–82.3)	75.7 (73.1–78.4)	64.9 (62.0–67.8)	56.1 (52.8–59.3)	45.1 (41.0–49.2)
Special events, such as festivals, music events and dance parties	35.1 (33.6–36.7)	49.4 (44.5–54.4)	55.8 (51.7–59.9)	37.1 (33.2–40.9)	28.7 (26.2–31.2)	27.6 (24.6–30.6)	24.0 (20.4–27.7)
Workplaces	32.1 (30.7–33.4)	11.9 (8.6–15.3)	33.9 (30.2–37.6)	41.2 (37.6–44.7)	35.4 (32.6–38.3)	32.9 (29.4–36.3)	21.0 (17.3–24.7)
Outdoor public places, such as beaches and parks	28.2 (26.7–29.8)	44.5 (39.7–49.3)	35.6 (31.2–39.9)	29.3 (25.8–32.8)	27.8 (25.3–30.2)	25.2 (21.9–28.5)	15.3 (12.1–18.5)
Nightclubs	24.2 (22.9–25.5)	8.7 (6.0–11.4)	70.6 (66.9–74.4)	39.4 (35.8–43.1)	15.1 (12.8–17.4)	8.0 (6.3–9.8)	3.7 (2.2–5.3)
Sports events, races or boating	25.2 (23.7–26.7)	16.7 (12.9–20.5)	28.8 (25.3–32.3)	30.8 (27.3–34.2)	27.3 (24.7–29.8)	23.5 (20.4–26.6)	17.9 (14.5–21.3)
Sports clubs	21.5 (20.2–22.8)	11.9 (9.0–14.9)	26.6 (23.4–29.8)	25.8 (22.5–29.2)	21.7 (19.4–24.0)	21.2 (18.2–24.1)	16.3 (12.9–19.7)
Other clubs, groups and meetings	21.2 (20.0–22.4)	8.3 (5.7–10.9)	13.9 (11.5–16.4)	20.1 (17.3–22.8)	21.4 (18.8–24.0)	27.8 (24.5–31.0)	28.9 (25.5–32.3)
Private motor vehicle	8.7 (7.8–9.5)	22.0 (17.6–26.3)	27.7 (24.2–31.2)	6.9 (5.0–8.8)	4.5 (3.2–5.8)	2.1 (1.2–3.1)	–
Plane trips within New Zealand	6.0 (5.3–6.8)	1.5 (0.3–2.6)	4.3 (2.7–5.9)	8.9 (6.7–11.0)	6.4 (4.7–8.1)	6.0 (4.3–7.6)	5.8 (3.9–7.8)
Theatres/movies	5.9 (5.1–6.8)	1.5 (0.3–2.8)	5.5 (3.7–7.3)	5.6 (3.8–7.4)	6.6 (5.1–8.1)	7.3 (5.3–9.3)	7.2 (4.6–9.7)
Marae	2.8 (2.4–3.1)	3.3 (2.4–4.3)	3.9 (3.1–4.7)	3.3 (2.7–4.0)	2.3 (1.8–2.9)	2.7 (1.9–3.5)	1.4 (0.8–2.0)

Note: A dash (–) indicates that numbers were too low for reliable estimation.

Table 10: Location of drinking alcohol at least once in the last 12 months, drinkers, by sex and ethnic group, percent (age-standardised)

Location	Female	Male	Māori	Non-Māori
Own home	91.2 (90.0–92.3)	91.6 (90.1–93.1)	85.1 (83.8–86.4)	92.3 (91.3–93.2)
Someone else's home	84.2 (82.9–85.5)	84.8 (83.0–86.7)	78.7 (77.2–80.2)	85.3 (84.1–86.5)
Restaurants/cafes/coffee shops	72.7 (70.8–74.6)	66.2 (64.0–68.4)	50.1 (48.2–51.9)	72.0 (70.3–73.7)
Pubs/hotels/taverns	56.1 (54.1–58.1)	64.2 (62.2–66.3)	59.4 (57.5–61.2)	60.2 (58.6–61.8)
Special events, such as festivals, music events and dance parties	36.2 (34.1–38.2)	37.0 (34.6–39.4)	38.5 (36.6–40.4)	36.3 (34.4–38.2)
Workplaces	23.2 (21.4–25.0)	40.8 (38.4–43.1)	30.9 (29.2–32.5)	32.2 (30.6–33.8)
Outdoor public places, such as beaches and parks	25.8 (23.8–27.7)	32.2 (29.9–34.6)	25.6 (24.0–27.2)	29.4 (27.6–31.3)
Nightclubs	24.1 (22.0–26.3)	29.1 (26.8–31.3)	32.7 (31.1–34.2)	25.7 (24.1–27.4)
Sports events, races or boating	17.4 (15.7–19.1)	33.1 (31.0–35.2)	26.4 (24.7–28.2)	25.1 (23.4–26.8)
Sports clubs	15.4 (13.7–17.0)	27.7 (25.6–29.8)	31.5 (29.9–33.2)	20.2 (18.7–21.7)
Other clubs, groups and meetings	18.1 (16.6–19.6)	22.8 (21.1–24.5)	26.0 (24.3–27.6)	19.7 (18.4–21.0)
Private motor vehicle	7.2 (6.1–8.4)	12.3 (10.7–14.0)	13.2 (12.0–14.4)	9.2 (8.1–10.3)
Plane trips within New Zealand	5.1 (4.1–6.0)	6.8 (5.7–8.0)	5.0 (4.1–5.8)	6.0 (5.2–6.9)
Theatres/movies	6.2 (5.1–7.3)	5.3 (4.1–6.5)	3.3 (2.7–4.0)	6.1 (5.1–7.0)
Marae	2.6 (2.2–3.0)	2.9 (2.4–3.3)	18.4 (17.1–19.8)	0.7 (0.4–1.0)

Location of drinking large amounts of alcohol

Drinkers who had consumed large amounts of alcohol at least once in the last 12 months were also asked the locations at which they had consumed large amounts of alcohol during this time.

The most common location for drinking large amounts of alcohol were private homes (Table 11). Overall, 47.2% (45.0–49.4) of drinkers who had consumed large amounts of alcohol in the last 12 months had done so in their own home, while 41.5% (39.4–43.5) of drinkers had consumed large amounts of alcohol in someone else's home.

Overall, 16.4% (15.0–17.8) of drinkers had consumed large amounts of alcohol at pubs, hotels and/or taverns in the last 12 months.

Among drinkers who had consumed large amounts of alcohol at least once in the last 12 months:

- people aged 12–17 years were significantly more likely to have consumed large amounts of alcohol at someone else's house (72.3%; 66.5–78.2) compared to all other age groups
- people aged 18–24 years (21.6%; 17.9–25.3) and 25–34 years (23.7%; 20.1–27.3) were significantly more likely than other age groups to have consumed large amounts of alcohol at pubs, hotels and/or taverns
- people aged 18–24 years were significantly more likely (17.3%; 14.3–20.3) than all other age groups to have consumed large amounts of alcohol in nightclubs.

A comparison using age-standardised rates (Table 12) showed that, among drinkers who had consumed large amounts of alcohol at least once in the last 12 months:

- males were significantly more likely to have consumed large amounts of alcohol at pubs, hotels and/or taverns (20.2%; 17.9–22.4) compared to females (13.3%; 11.5–15.0)
- males were also significantly more likely to have consumed large amounts of alcohol at sports clubs and workplaces compared to females
- non-Māori were significantly more likely to have consumed large amounts of alcohol in someone else's home, and in restaurants, cafes and coffee shops, compared to Māori
- Māori were significantly more likely to have consumed large amounts of alcohol in sports clubs and other clubs, compared to non-Māori.

Table 11: Location of drinking large amounts of alcohol in the last 12 months, among drinkers who had consumed large amounts of alcohol at least once in the last 12 months, by age group, percent (crude)

Location	Total	Age group					
		12–17 years	18–24 years	25–34 years	35–44 years	45–54 years	55–65 years
Own home	47.2 (45.0–49.4)	28.3 (22.5–34.1)	36.4 (32.1–40.8)	44.2 (39.8–48.7)	53.6 (49.7–57.4)	59.1 (54.3–63.9)	58.2 (49.9–66.4)
Someone else's home	41.5 (39.4–43.5)	72.3 (66.5–78.2)	44.5 (40.0–49.0)	38.5 (34.7–42.3)	38.4 (34.7–42.0)	35.0 (30.1–39.9)	35.2 (28.1–42.3)
Pubs/hotels/ taverns	16.4 (15.0–17.8)	–	21.6 (17.9–25.3)	23.7 (20.1–27.3)	16.3 (13.5–19.0)	10.7 (7.7–13.7)	7.1 (3.3–10.8)
Nightclubs	5.4 (4.6–6.3)	–	17.3 (14.3–20.3)	5.9 (4.2–7.5)	1.7 (0.6–2.9)	–	–
Restaurants/ cafés/coffee shops	3.6 (2.8–4.4)	–	–	4.6 (2.4–6.8)	3.9 (2.4–5.4)	5.4 (2.9–7.9)	6.7 (3.1–10.3)
Special events, such as festivals, music events and dance parties	3.0 (2.4–3.7)	3.1 (1.0–5.2)	0.9 (0.2–1.7)	2.8 (1.4–4.2)	4.9 (3.2–6.6)	2.1 (0.8–3.4)	4.9 (2.1–7.7)
Sports clubs	2.2 (1.7–2.7)	–	1.6 (0.7–2.4)	2.0 (1.0–3.1)	2.3 (1.3–3.4)	3.0 (1.4–4.6)	2.8 (0.5–5.1)
Workplaces	2.0 (1.4–2.5)	–	1.0 (0.1–1.8)	3.2 (1.9–4.5)	2.3 (1.1–3.5)	2.3 (0.8–3.8)	–
Other clubs, groups and meetings	2.0 (1.5–2.5)	–	–	1.1 (0.2–2.0)	1.9 (1.0–2.8)	4.8 (2.9–6.7)	4.9 (2.3–7.6)
Outdoor public places, such as beaches and parks	1.1 (0.7–1.5)	5.5 (2.5–8.6)	–	–	–	–	–
Sports events, races or boating	0.5 (0.2–0.8)	–	–	–	–	–	–
Private motor vehicle	0.3 (0.1–0.5)	1.7 (0.4–3.1)	–	–	–	–	–
Marae	0.1 (0.0–0.1)	–	–	–	–	–	–

Note: A dash (–) indicates that numbers were too low for reliable estimation.

Table 12: Location of drinking large amounts of alcohol in the last 12 months, among drinkers who had consumed large amounts of alcohol at least once in the last 12 months, by sex and ethnic group, percent (age-standardised)

Location	Female	Male	Māori	Non-Māori
Own home	47.3 (44.6–50.0)	44.5 (41.4–47.6)	47.0 (44.7–49.2)	45.7 (43.1–48.2)
Someone else's home	43.5 (40.8–46.2)	40.9 (38.0–43.7)	36.4 (34.3–38.5)	43.0 (40.5–45.4)
Pubs/hotels/taverns	13.3 (11.5–15.0)	20.2 (17.9–22.4)	14.5 (12.8–16.1)	17.2 (15.5–18.9)
Nightclubs	7.1 (5.6–8.7)	5.3 (4.1–6.5)	6.0 (4.9–7.2)	6.2 (5.1–7.3)
Restaurants/cafés/coffee shops	4.2 (3.0–5.4)	2.5 (1.6–3.3)	1.9 (1.2–2.5)	3.5 (2.6–4.4)
Special events, such as festivals, music events and dance parties	3.8 (2.8–4.9)	2.1 (1.5–2.8)	2.5 (1.7–3.2)	3.0 (2.3–3.7)
Sports clubs	1.3 (0.7–1.9)	2.8 (2.0–3.6)	4.1 (3.3–5.0)	1.8 (1.2–2.3)
Workplaces	1.0 (0.5–1.5)	2.8 (1.9–3.7)	2.8 (2.0–3.5)	1.8 (1.2–2.4)
Other clubs, groups and meetings	1.3 (0.8–1.8)	2.3 (1.6–3.1)	3.4 (2.6–4.2)	1.6 (1.1–2.1)
Outdoor public places, such as beaches and parks	0.8 (0.4–1.3)	1.4 (0.8–2.1)	0.8 (0.4–1.1)	1.2 (0.7–1.7)
Sports events, races or boating	–	0.9 (0.4–1.4)	–	0.5 (0.2–0.8)
Private motor vehicle	–	0.5 (0.2–0.9)	–	0.4 (0.1–0.7)
Marae	0.1* (0.0–0.2)	–	0.5 (0.2–0.8)	–

Notes: A dash (–) indicates that numbers were too low for reliable estimation; * indicates that the relative sampling error (RSE) is 0.5 or greater, and that these results should be interpreted very cautiously.

Chapter 5: Alcohol-related Problems

Alcohol-related problems from own drinking

People who had consumed alcohol in the last 12 months ('drinkers') were asked about their experiences of specific consequences of their own drinking over the last 12 months.

Approximately two in five drinkers (37.7%; 36.3–39.2) reported that they had felt the effects of alcohol after drinking the night before (Table 13).

Other commonly reported problems from drinking experienced by drinkers more than once in the last 12 months included feeling the effects of alcohol while at work, study, or while doing household duties (15.1%; 14.0–16.1), and awakening the next day unable to remember some of the things done while drinking (13.0%; 12.1–13.9).

Age-standardised rates were used to compare population sub-groups (Table 14). Overall, rates for self-reported problems from alcohol consumption were significantly higher for males than for females, and were significantly higher for Māori compared to non-Māori.

Compared to females, males were significantly more likely to have felt the effects of alcohol after drinking the night before; to have felt the effects of alcohol while at work, study or doing household duties; to have awakened the next day unable to remember some of the things they did while drinking; and to feel their performance in a paid job was reduced by drinking or its after-effects.

Māori were significantly more likely to have experienced a number of other self-reported problems from drinking compared to non-Māori, including feeling the effects of alcohol after drinking the night before; feeling the effects of alcohol while at work, study or while doing household duties; awakening the next day unable to remember some of things they had done while drinking; and being involved in a serious argument after they had been drinking.

Table 13: Self-reported problems from drinking alcohol experienced more than once in the last 12 months, drinkers, percent (crude)

Problem	Total
Felt the effects of alcohol after drinking the night before	37.7 (36.3–39.2)
Felt the effects of alcohol while at work, study, or engaged in household duties	15.1 (14.0–16.1)
Awakened the next day not able to remember some of the things you had done while drinking	13.0 (12.1–13.9)
Been ashamed of something you did while drinking	8.3 (7.4–9.1)
Felt your performance in a paid job was reduced by drinking or its after-effects	6.2 (5.5–7.0)
Been involved in a serious argument after you have been drinking	4.8 (4.1–5.4)
Got drunk when there was an important reason to stay sober	4.6 (3.9–5.4)
Had unprotected sex because you had drunk too much	3.3 (2.8–3.8)
Taken an alcoholic drink first thing when you get up in the morning	2.9 (2.4–3.4)
Had your hands shake a lot in the morning after drinking	2.9 (2.4–3.3)
Had sex and later regretted it because you had drunk too much	2.5 (2.0–2.9)
Got into a physical fight because of your drinking	2.2 (1.8–2.6)
Stayed intoxicated for several days at a time	1.7 (1.3–2.0)
Been told to leave a place because of your drinking	1.6 (1.3–1.9)
Been away from work because of your drinking	1.4 (1.1–1.8)
Been arrested or detained in a police station because of your drinking	0.8 (0.5–1.0)
Been sexually assaulted when you have had too much to drink	0.6 (0.3–0.8)
Had an injury that required medical attention because you had drunk too much	0.5 (0.2–0.7)
Been involved in an accident while at work, study or doing household duties after you have been drinking	0.2 (0.1–0.4)
Been drinking and driving and had a motor vehicle crash	0.1* (0.0–0.2)

Note: * indicates that the relative sampling error (RSE) is 0.5 or greater; these results should be interpreted very cautiously.

Table 14: Self-reported problems from drinking alcohol experienced more than once in the last 12 months, drinkers, by sex and ethnic group, percent (age-standardised)

	Female	Male	Māori	Non-Māori
Felt the effects of alcohol after drinking the night before	33.9 (32.1–35.7)	44.6 (42.3–47.0)	45.4 (43.6–47.2)	38.5 (36.8–40.1)
Felt the effects of alcohol while at work, study or engaged in household duties	12.9 (11.5–14.3)	19.0 (17.1–20.8)	20.4 (18.7–22.2)	15.3 (14.1–16.5)
Awakened the next day not able to remember some of the things you had done while drinking	10.5 (9.3–11.8)	18.4 (16.7–20.0)	18.9 (17.6–20.2)	13.9 (12.7–15.1)
Been ashamed of something you did while drinking	8.9 (7.6–10.2)	9.8 (8.4–11.3)	13.2 (12.0–14.4)	8.9 (7.8–9.9)
Felt your performance in a paid job was reduced by drinking or its after-effects	5.4 (4.3–6.5)	8.2 (6.8–9.7)	7.5 (6.5–8.4)	6.7 (5.8–7.7)
Been involved in a serious argument after you have been drinking	4.6 (3.6–5.7)	6.0 (4.8–7.2)	9.3 (8.3–10.4)	4.8 (3.9–5.6)
Got drunk when there was an important reason to stay sober	3.2 (2.4–4.0)	7.1 (5.7–8.4)	8.2 (7.1–9.2)	4.8 (3.9–5.7)
Had unprotected sex because you had drunk too much	2.0 (1.4–2.6)	5.3 (4.2–6.4)	6.8 (5.8–7.7)	3.2 (2.5–3.8)
Taken an alcoholic drink first thing when you get up in the morning	1.5 (1.0–2.0)	4.9 (3.9–5.9)	5.1 (4.2–6.0)	3.0 (2.3–3.7)
Had your hands shake a lot in the morning after drinking	2.7 (2.1–3.4)	3.8 (2.8–4.7)	3.9 (3.2–4.7)	3.1 (2.5–3.7)
Had sex and later regretted it because you had drunk too much	1.5 (0.9–2.1)	4.1 (3.2–5.0)	4.2 (3.5–5.0)	2.6 (2.0–3.2)
Got into a physical fight because of your drinking	1.4 (0.9–1.9)	3.7 (2.9–4.5)	4.6 (3.8–5.3)	2.2 (1.7–2.8)
Stayed intoxicated for several days at a time	1.2 (0.8–1.7)	2.5 (1.8–3.1)	3.7 (3.0–4.5)	1.6 (1.1–2.0)
Been told to leave a place because of your drinking	0.8 (0.4–1.2)	2.9 (2.1–3.6)	2.4 (1.9–2.9)	1.8 (1.3–2.2)
Been away from work because of your drinking	1.1 (0.7–1.6)	2.1 (1.5–2.8)	2.6 (2.0–3.2)	1.5 (1.0–2.0)
Been arrested or detained in a police station because of your drinking	0.3 (0.1–0.5)	1.4 (0.8–1.9)	1.6 (1.2–2.1)	0.7 (0.4–1.0)
Been sexually assaulted when you have had too much to drink	0.8 (0.3–1.2)	0.6 (0.2–1.0)	0.9 (0.6–1.3)	0.6 (0.3–1.0)
Had an injury that required medical attention because you had drunk too much	0.5 (0.2–0.8)	0.5 (0.2–0.9)	0.6 (0.4–0.9)	0.5 (0.2–0.8)
Been involved in an accident while at work, study or doing household duties after you have been drinking	0.2* (0.0–0.3)	0.4 (0.1–0.6)	0.5 (0.2–0.7)	–
Been drinking and driving and had a motor vehicle crash	–	0.2* (0.0–0.4)	0.4 (0.2–0.6)	–

Notes: A dash (–) indicates that numbers were too low for reliable estimation; * indicates that the relative sampling error (RSE) is 0.5 or greater, and that these results should be interpreted very cautiously.

Alcohol-related problems as a result of someone else's drinking

Respondents were asked about the problems they had experienced in the last 12 months as a result of someone else's drinking.

In the last 12 months 5.7% (5.1–6.3) of New Zealanders aged 12–65 had been physically assaulted by someone who had been drinking (Table 15). Overall, 5.3% (4.7–5.9) of New Zealanders had been sexually harassed in the last 12 months by someone who had been drinking.

Furthermore, 1.7% (1.4–2.1) of New Zealanders had been involved in a motor vehicle accident in the last 12 months that involved someone else's drinking. Finally, 1.4% (1.0–1.8) of New Zealanders had been involved in some other type of accident in the last 12 months, which caused injury or major damage and which involved someone else's drinking.

People aged 18–24 years were significantly more likely than all other age groups to have experienced physical assault, sexual harassment, a motor vehicle accident or another type of accident as a result of someone else's drinking (Table 15).

Table 15: Problems experienced as a result of someone else's drinking alcohol in the last 12 months, total population, by age group, percent (crude)

Problem	Total	Age group					
		12–17 years	18–24 years	25–34 years	35–44 years	45–54 years	55–65 years
Physical assault	5.7 (5.1–6.3)	7.6 (5.7–9.5)	16.6 (14.1–19.1)	7.1 (5.2–9.0)	3.3 (2.4–4.3)	1.9 (1.1–2.7)	1.1 (0.3–1.9)
Sexual harassment	5.3 (4.7–5.9)	3.1 (1.9–4.3)	12.1 (9.8–14.3)	8.1 (6.3–9.9)	4.7 (3.5–5.8)	2.5 (1.6–3.4)	2.0 (1.0–3.0)
Motor vehicle accident	1.7 (1.4–2.1)	1.5 (0.8–2.2)	4.8 (3.2–6.3)	1.1 (0.5–1.8)	1.7 (0.9–2.5)	1.3 (0.5–2.1)	0.5* (0.0–1.0)
Other type of accident	1.4 (1.0–1.8)	1.8 (0.9–2.8)	4.4 (2.7–6.1)	1.0 (0.4–1.7)	0.8 (0.3–1.4)	0.8 (0.3–1.4)	–

Notes: A dash (–) indicates that numbers were too low for reliable estimation; * indicates that the relative sampling error (RSE) is 0.5 or greater, and that these results should be interpreted very cautiously.

Using age-standardised rates to compare groups, males were significantly more likely to have experienced physical assault as a result of someone else's drinking (7.7%; 6.6–8.8) compared to females (4.8%; 4.0–5.7) (Table 16). Females were significantly more likely to have experienced sexual harassment (8.6%; 7.5–9.6) compared to males (2.4%; 1.8–3.1).

Māori were significantly more likely to have experienced physical assault as a result of someone else's drinking (9.1%; 8.2–10.0) compared to non-Māori (5.8%; 5.0–6.5). Māori were also significantly more likely to have experienced sexual harassment as a

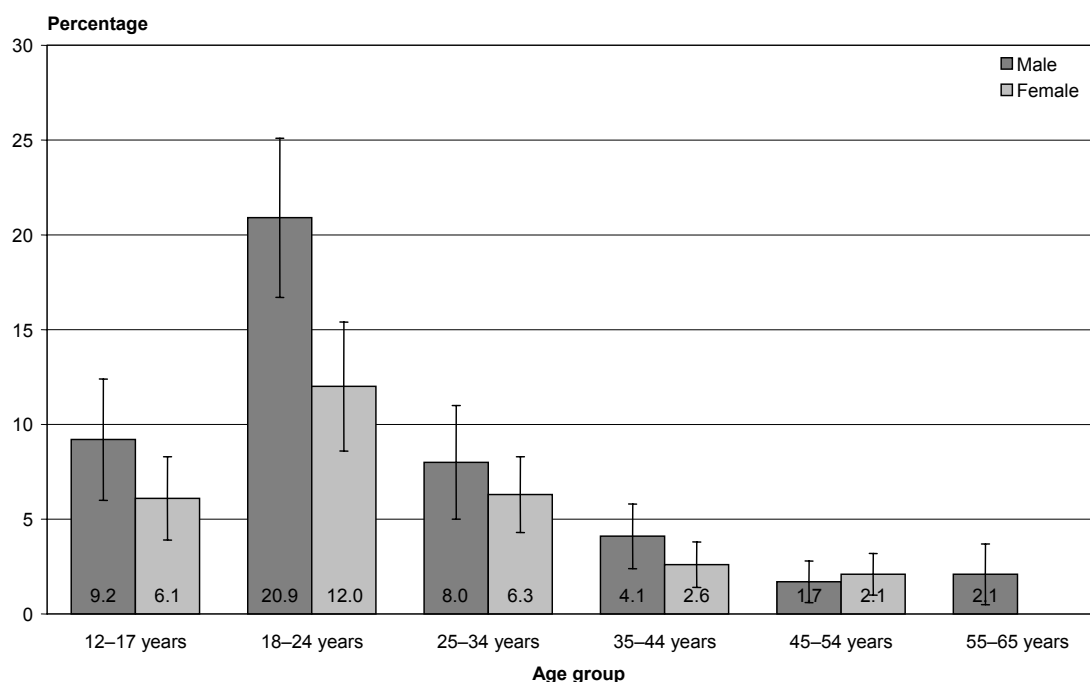
result of someone else's drinking (8.1%; 7.2–9.0) compared to non-Māori (5.2%; 4.4–6.0).

Table 16: Problems experienced as a result of someone else's drinking alcohol in the last 12 months, total population, by sex and ethnic group, percent (age-standardised)

Problem	Female	Male	Māori	Non-Māori
Physical assault	4.8 (4.0–5.7)	7.7 (6.6–8.8)	9.1 (8.2–10.0)	5.8 (5.0–6.5)
Sexual harassment	8.6 (7.5–9.6)	2.4 (1.8–3.1)	8.1 (7.2–9.0)	5.2 (4.4–6.0)
Motor vehicle accident	1.5 (1.1–1.9)	2.1 (1.5–2.7)	2.6 (2.1–3.1)	1.6 (1.2–2.0)
Other type of accident	1.6 (1.0–2.2)	1.5 (0.9–2.0)	2.1 (1.7–2.6)	1.4 (0.9–1.9)

Figure 20 shows that approximately one in five males aged 18–24 years had been physically assaulted in the last 12 months by someone who had been drinking.

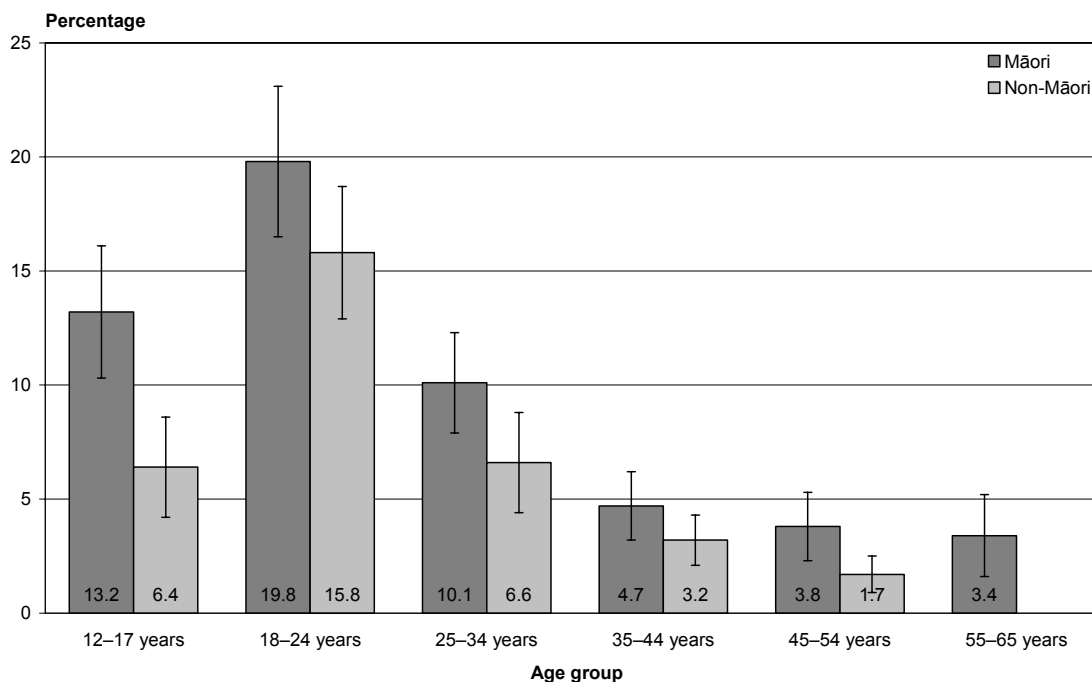
Figure 20: Prevalence of having been physically assaulted in the last 12 months by someone who had been drinking alcohol, total population, by age group and sex, percent (crude)



Note: The result for females aged 55–65 years was suppressed due to low numbers.

Māori aged 12–17 years were significantly more likely to have been physically assaulted than non-Māori aged 12–17 years (Figure 21).

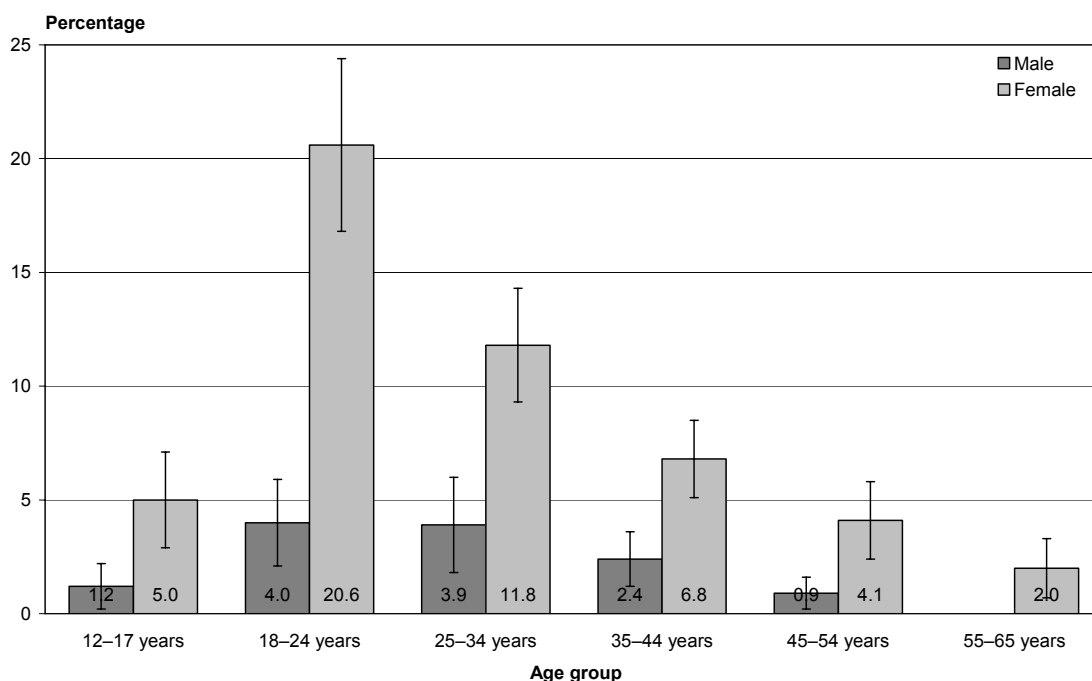
Figure 21: Prevalence of having been physically assaulted in the last 12 months by someone who had been drinking alcohol, total population, by age and ethnic group, percent (crude)



Note: The result for non-Māori aged 55-65 years was suppressed due to low numbers.

Females aged 18-24 years were significantly more likely than all other people to have been sexually harassed in the last 12 months by someone who had been drinking (Figure 22). In all age groups, females were significantly more likely than males to have been sexually harassed in the last 12 months by someone who had been drinking.

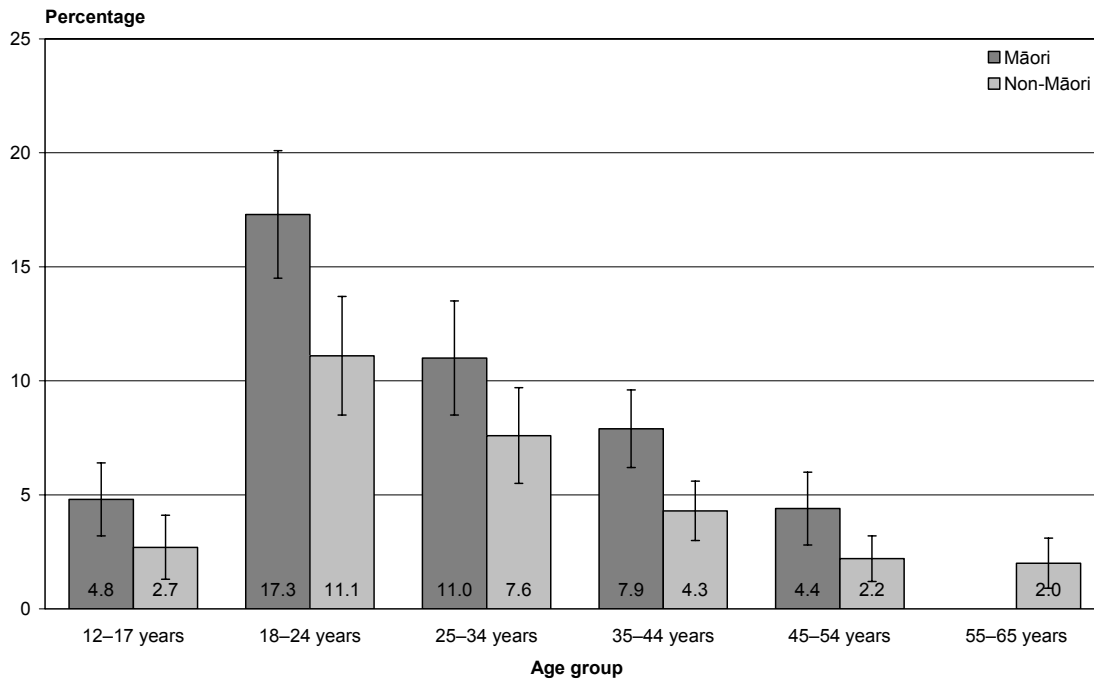
Figure 22: Prevalence of having been sexually harassed in the last 12 months by someone who had been drinking alcohol, total population, by age group and sex, percent (crude)



Note: The result for males aged 55–65 years was suppressed due to low numbers.

Māori aged 18–24 years were significantly more likely than all other people to have experienced sexual harassment by someone who had been drinking (Figure 23).

Figure 23: Prevalence of having been sexually harassed in the last 12 months by someone who had been drinking alcohol, total population, by age and ethnic group, percent (crude)



Note: The result for Māori aged 55–65 years was suppressed due to low numbers.

Harmful effects on areas of life from other people’s drinking

Respondents were asked about the size of the harmful effect of other people’s drinking on different areas of their life in the last 12 months, including home life, friendships and their financial situation (Table 17).

Overall, the largest harmful effects of other people’s drinking were on home life and friendships and social life. Approximately 3.8% (3.4–4.3) of people aged 12–65 years had experienced large effects on their home life from someone else’s drinking. An estimated 3.4% (3.0–3.8) of people aged 12–65 years had experienced large effects on their friendships and social life because of other people’s drinking.

A smaller proportion of people (1.7%; 1.4–2.1) felt that someone else’s drinking had a large effect on their financial position.

Table 17: Harmful effect of other people’s drinking alcohol on areas of life in the last 12 months, total population, percent (crude)

Area of life	No effect	Small effect	Medium effect	Large effect
Home life	76.6 (75.4–77.8)	13.2 (12.3–14.1)	6.4 (5.6–7.1)	3.8 (3.4–4.3)
Friendships and social life	74.6 (73.4–75.8)	15.2 (14.2–16.1)	6.9 (6.2–7.6)	3.4 (3.0–3.8)
Financial position	86.8 (85.9–87.7)	8.1 (7.3–8.8)	3.3 (2.8–3.8)	1.7 (1.4–2.1)

Comparisons using age-standardised rates showed significant differences between females and males, and between Māori and non-Māori, for reported effects of someone else’s drinking (Table 18).

Females were significantly more likely to experience a large harmful effect on their home life (4.9%; 4.2–5.6) compared to males (2.7%; 2.1–3.3) due to other people’s drinking.

Māori were significantly more likely than non-Māori to report large harmful effects from other people’s drinking on their home life, friendships, and financial position.

Table 18: Harmful effects of other people’s drinking alcohol on area of life in the last 12 months, total population, by sex and ethnic group, percent (age-standardised)

Area of life	Size of effect	Female	Male	Māori	Non-Māori
Home life	Large	4.9 (4.2–5.6)	2.7 (2.1–3.3)	6.8 (6.1–7.6)	3.4 (2.9–3.9)
	Medium	6.7 (5.8–7.7)	6.2 (5.1–7.4)	8.9 (8.0–9.8)	6.1 (5.3–6.9)
	Small	12.4 (11.2–13.7)	14.6 (13.1–16.2)	15.3 (14.2–16.3)	13.3 (12.2–14.3)
	No effect	75.9 (74.1–77.8)	76.4 (74.5–78.4)	69.0 (67.6–70.4)	77.2 (75.8–78.6)
Friendships and social life	Large	4.0 (3.3–4.6)	2.9 (2.3–3.6)	6.8 (5.9–7.7)	3.0 (2.5–3.5)
	Medium	7.7 (6.6–8.8)	6.7 (5.7–7.8)	8.5 (7.5–9.5)	7.0 (6.2–7.9)
	Small	15.5 (14.1–16.8)	16.1 (14.7–17.6)	16.7 (15.5–17.8)	15.7 (14.6–16.8)
	No effect	72.8 (71.0–74.6)	74.2 (72.5–75.9)	68.0 (66.5–69.5)	74.3 (72.9–75.7)
Financial position	Large	1.9 (1.4–2.4)	1.8 (1.2–2.3)	3.4 (2.8–4.0)	1.6 (1.2–2.1)
	Medium	3.4 (2.7–4.0)	3.7 (2.9–4.5)	5.3 (4.5–6.0)	3.3 (2.7–3.9)
	Small	7.8 (6.7–8.8)	9.2 (8.1–10.3)	12.0 (10.9–13.1)	8.0 (7.1–8.9)
	No effect	86.9 (85.7–88.2)	85.3 (83.9–86.7)	79.4 (78.1–80.6)	87.1 (86.0–88.2)

Help-seeking for alcohol-related problems

Overall, 2.2% (1.8–2.6) of New Zealanders aged 12–65 had ever received help to reduce their alcohol consumption.

Using age-standardised rates to compare groups, males were significantly more likely to have received help to reduce their alcohol consumption (2.9%; 2.3–3.5) than females (1.4%; 0.9–1.9) (Table 19). Māori were significantly more likely to have ever received help to reduce their level of alcohol consumption (3.8%; 3.2–4.5) compared to non-Māori (1.9%; 1.5–2.4).

Table 19: Prevalence of having ever received help to reduce alcohol consumption, total population, by sex and ethnic group, percent (age-standardised)

	Female	Male	Māori	Non-Māori
Had ever received help to reduce alcohol consumption	1.4 (0.9–1.9)	2.9 (2.3–3.5)	3.8 (3.2–4.5)	1.9 (1.5–2.4)

Table 20 presents the sources of help for people who had ever received help to reduce their alcohol consumption. The most common sources of help were drug and alcohol counsellors (25.5%; 17.3–33.7), detoxification programmes (16.9%; 10.0–23.7) and Alcoholics Anonymous (15.3%; 8.5–22.1).

Table 20: Source of help for alcohol-related problems, among people who had ever received help to reduce alcohol consumption, percent (crude)

Source of help	Total
Drug and alcohol counsellor	25.5 (17.3–33.7)
Detoxification programme	16.9 (10.0–23.7)
Alcoholics Anonymous	15.3 (8.5–22.1)
General practitioner	10.2 (4.6–15.7)
Health centre / medical centre	10.6 (4.9–16.3)
Māori provider	1.7 (0.6–2.8)

Numbers were too low to present the results for people receiving help for alcohol-related problems from psychiatrists, psychologists, mental health services, natural therapists, alternative therapy, or accident and emergency departments.

Comparisons for females and males, and for Māori and non-Māori, are presented with age-standardised rates in Table 21. Males were significantly more likely to have used Alcoholics Anonymous (18.5%; 9.6–27.5) compared to females (4.8%; 1.1–8.4).

Table 21: Source of help for alcohol-related problems, among people who had received help to reduce alcohol consumption, percent (age-standardised)

Source of help	Female	Male	Māori	Non-Māori
Drug and alcohol counsellor	29.5 (12.6–46.4)	27.0 (15.8–38.2)	32.5 (24.3–40.7)	26.5 (15.1–37.9)
Detoxification programme	13.6 (4.1–23.1)	16.9 (8.3–25.6)	15.5 (8.0–23.1)	15.9 (7.9–23.8)
Alcoholics Anonymous	4.8 (1.1–8.4)	18.5 (9.6–27.5)	17.8 (11.5–24.1)	12.7 (5.4–20.1)
General practitioner	6.9 (0.9–13.0)	11.1 (3.5–18.8)	8.6 (3.8–13.3)	10.0 (3.2–16.9)
Health centre / medical centre	–	8.8 (2.9–14.6)	–	11.2 (4.6–17.7)
Māori provider	–	–	8.0 (3.4–12.6)	–

Note: A dash (–) indicates that numbers were too low for reliable estimation.

Barriers to receiving help to reduce alcohol consumption

Overall, 1.0% (0.7–1.2) of New Zealanders aged 12–65 had ever wanted help to reduce their alcohol consumption but not received it.

Using age-standardised rates to compare groups, Māori were significantly more likely to have wanted help but not received it (2.0%; 1.5–2.4) compared to non-Māori (0.9%; 0.6–1.2) (Table 22). Males were also significantly more likely to have wanted help but not received it (1.5%; 1.0–2.0) compared to females (0.5% 0.2–0.8).

Table 22: Prevalence of having ever wanted help to reduce alcohol consumption but not received it, total population, percent (age-standardised)

	Female	Male	Māori	Non-Māori
Had ever wanted help to reduce alcohol consumption but not received it	0.5 (0.2–0.8)	1.5 (1.0–2.0)	2.0 (1.5–2.4)	0.9 (0.6–1.2)

Table 23 presents the main barriers to receiving help for alcohol problems for people who had wanted help to reduce their alcohol consumption but had not received it. The main barriers were social pressure to keep using alcohol (26.3%; 12.8–39.9), having no time or being too busy (23.3%; 10.2–36.4), and not knowing where to go (21.2%; 9.6–32.9).

Table 23: Barriers to receiving help for people who had ever wanted help to reduce alcohol consumption but had not received it, percent (crude)

Barrier to help	Total
Social pressure to keep using	26.3 (12.8–39.9)
No time / too busy	23.3 (10.2–36.4)
Did not know where to go	21.2 (9.6–32.9)
Fear of what might happen once contact made with the service	16.2 (5.6–26.9)
Fear of losing friends	8.5 (0.9–16.1)
Fear of the law/police	5.8* (0.0–12.8)
Services were not appropriate for type of alcohol use	5.8* (0.0–11.8)
No local service available	5.1* (0.0–10.5)
Services too expensive	4.9 (0.5–9.2)

Note: * indicates that the relative sampling error (RSE) is 0.5 or greater; these results should be interpreted very cautiously.

Numbers were too low to present analyses for the following barriers to receiving help: having transport problems, and services not being ongoing.

Table 24 presents the age-standardised rates for barriers to receiving help, by sex and ethnic group.

Table 24: Barriers to receiving help for people who had ever wanted help to reduce alcohol consumption but had not received it, by sex and ethnic group, percent (age-standardised)

Barrier to help	Female	Male	Māori	Non-Māori
Social pressure to keep using	13.7 (1.2–26.3)	31.3 (13.1–49.6)	14.7 (7.6–21.8)	30.7 (11.8–49.6)
No time / too busy	23.9 (2.5–45.3)	25.4 (7.7–43.2)	20.0 (10.9–29.0)	–
Did not know where to go	19.6 (6.6–32.6)	22.4 (6.6–38.2)	26.7 (17.3–36.1)	–
Fear of what might happen once contact made with the service	–	19.0 (4.8–33.1)	10.6 (4.0–17.3)	–
Services were not appropriate for type of alcohol use	–	–	9.2 (3.2–15.3)	–

Note: A dash (–) indicates that numbers were too low for reliable estimation.

Chapter 6: Alcohol and Youth

For the purposes of this report, 'youth' is defined as people aged 12–17 years.

Alcohol consumption by youths

Overall, 55.7% (51.8–59.7) of New Zealand youths aged 12–17 years had consumed alcohol in the last 12 months (Table 25). There were no significant differences in prevalence of alcohol consumption between males and females, or between Māori and non-Māori.

Table 25: Alcohol use by youth (12–17 years) in the last 12 months, percent (crude)

	Total	Female	Male	Māori	Non-Māori
Consumed alcohol in the last 12 months ('youth drinkers')	55.7 (51.8–59.7)	54.3 (48.6–60.1)	57.2 (52.0–62.5)	55.5 (51.5–59.4)	56.0 (51.3–60.7)

Frequency of alcohol consumption by youths

Among youth aged 12–17 years who had consumed alcohol in the last 12 months ('youth drinkers'), an estimated 4.2% (2.2–6.1) consumed alcohol on average seven or more times a week (Table 26). There were no significant differences in rates between males and females, or between Māori and non-Māori.

Table 26: Frequency of alcohol consumption by youth drinkers (12–17 years) in the last 12 months, percent (crude)

Frequency of alcohol use (weekly average)	Total	Female	Male	Māori	Non-Māori
7 or more times a week	4.2 (2.2–6.1)	4.0 (1.5–6.6)	4.3 (1.3–7.4)	4.6 (2.4–6.7)	4.1 (1.8–6.4)
4–6 times a week	6.4 (3.8–9.0)	6.5 (3.3–9.7)	6.3 (2.6–10.1)	8.0 (5.2–10.8)	6.1 (2.9–9.2)
1–3 times a week	30.7 (26.3–35.1)	28.9 (23.1–34.8)	32.5 (26.5–38.4)	30.3 (25.9–34.8)	30.8 (25.5–36.2)
Less than once a week	58.7 (54.1–63.3)	60.5 (53.4–67.6)	56.9 (50.9–62.8)	57.1 (52.1–62.1)	59.0 (53.4–64.6)

Drinking large amounts of alcohol at least once a week by youths

The World Health Organization (WHO), through the AUDIT (Alcohol Use Disorders Identification Test), recommends that on any one drinking occasion no more than the following number of standard drinks should be consumed:

- six standard drinks for males
- four standard drinks for females.

Drinking more than this amount of alcohol on one drinking occasion is defined as drinking large amounts of alcohol.

Overall, 12.4% (9.4–15.3) of youth drinkers consumed large amounts of alcohol at least once a week (Table 27).

Among youth drinkers, Māori were significantly more likely to drink large amounts of alcohol at least once a week (23.8%; 19.6–28.0) compared to non-Māori (9.8%; 6.4–13.2). There were no significant differences between males and females for drinking large amounts of alcohol at least once a week.

Table 27: Prevalence of drinking large amounts of alcohol at least once a week by youth drinkers (12–17 years) in the last 12 months, percent (crude)

	Total	Female	Male	Māori	Non-Māori
Drinking large amounts of alcohol* at least once a week	12.4 (9.4–15.3)	10.1 (6.1–14.1)	14.6 (9.9–19.3)	23.8 (19.6–28.0)	9.8 (6.4–13.2)

* More than six standard drinks (males) or 4 standard drinks (females) on one drinking occasion.

Drinking enough to feel drunk at least once a week by youths

Overall, 12.2% (8.9–15.4) of youth drinkers had consumed enough alcohol to feel drunk at least once a week in the last 12 months (Table 28).

Among youth drinkers, Māori were significantly more likely to have consumed enough alcohol to feel drunk at least once a week (18.6%; 14.7–22.4) compared to non-Māori (10.8%; 6.9–14.7). There was no significant difference between female and male youth drinkers in terms of drinking enough to feel drunk at least once a week.

Table 28: Prevalence of drinking enough to feel drunk at least once a week by youth drinkers (12–17 years) in the last 12 months, percent (crude)

	Total	Female	Male	Māori	Non-Māori
Drinking enough to feel drunk at least once a week	12.2 (8.9–15.4)	10.8 (6.2–15.5)	13.5 (8.7–18.3)	18.6 (14.7–22.4)	10.8 (6.9–14.7)

Supply of alcohol to youths

Among youth drinkers, 62.5% (57.4–67.5) had someone else purchase alcohol for them in the last 12 months (Table 29).

Overall, 37.9% (33.4–42.4) of youth drinkers had had parents purchase alcohol for them in the last 12 months. Another common source of alcohol supply for youths included friends, with 34.8% (29.8–39.8) of youth drinkers having had friends purchase alcohol for them in the last 12 months.

Table 29: Youth drinkers (12–17 years) who had someone else purchase alcohol for them in the last 12 months, percent (crude)

People who purchased alcohol for youth	Total	Female	Male	Māori	Non-Māori
All people (total)	62.5 (57.4–67.5)	68.0 (60.9–75.1)	56.9 (49.5–64.4)	72.5 (67.5–77.6)	60.2 (54.0–66.4)
Parents	37.9 (33.4–42.4)	42.3 (36.1–48.5)	33.6 (27.1–40.1)	43.6 (38.6–48.6)	36.6 (31.3–41.9)
Friends	34.8 (29.8–39.8)	40.2 (32.6–47.8)	29.5 (22.5–36.5)	39.6 (34.1–45.1)	33.7 (27.8–39.6)
Siblings	13.1 (9.9–16.3)	15.6 (10.3–20.9)	10.7 (6.9–14.5)	16.6 (12.9–20.3)	12.3 (8.5–16.2)
Other family/whānau: cousins, aunts, uncles	9.0 (6.2–11.7)	9.7 (6.1–13.3)	8.2 (4.6–11.9)	18.5 (15.0–22.0)	6.8 (3.5–10.1)
Other non-family adults	9.8 (6.9–12.7)	10.6 (6.2–14.9)	9.0 (5.0–13.1)	10.8 (7.6–13.9)	9.6 (6.0–13.1)

Female youths were significantly more likely than male youths to have had alcohol purchased for them by someone else in the last 12 months.

Māori youths were significantly more likely to have had someone else purchase alcohol for them at least once in the last 12 months (72.5%; 67.5–77.6) than non-Māori youths (60.2%; 54.0–66.4). Māori youths were also significantly more likely to have had alcohol purchased for them by other family or whānau (such as cousins, aunts or uncles) (18.5%; 15.0–22.0) compared to non-Māori youths (6.8%; 3.5–10.1).

Attempted purchase of alcohol

Overall, 14.6% (11.1–18.0) of youth drinkers had tried to purchase alcohol to take away in the last 12 months (Table 30). There were no significant differences between female and male youths, or between Māori and non-Māori youths, for trying to buy alcohol to take away.

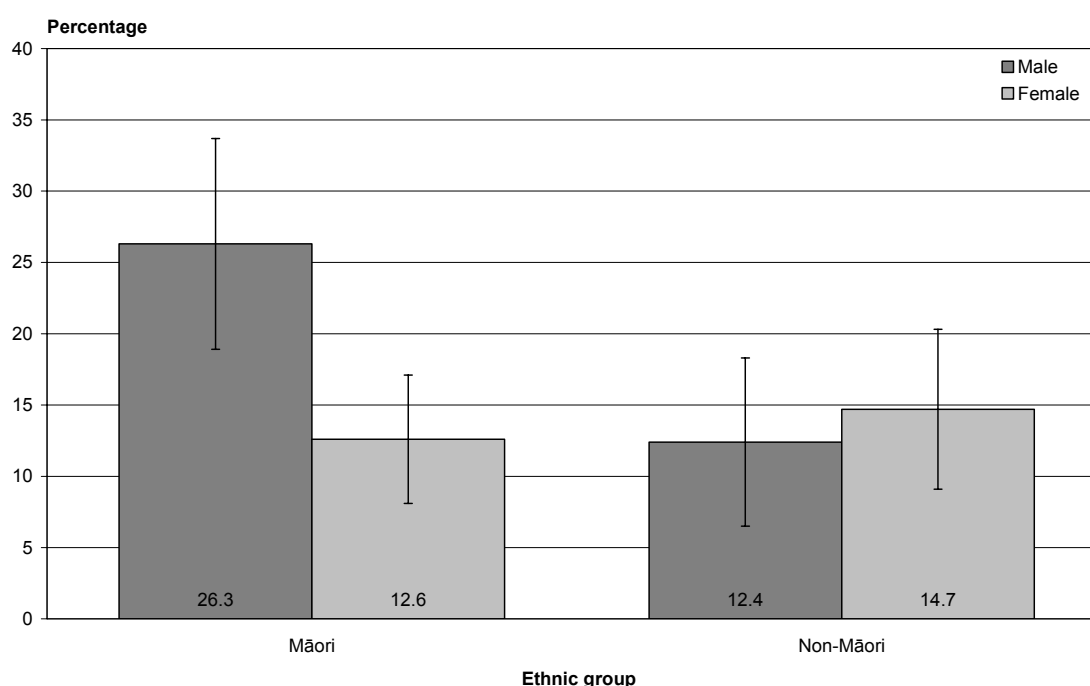
Table 30: Youth drinkers (12–17 years) who tried to buy alcohol to take away at least once in the last 12 months, percent (crude)

	Total	Female	Male	Māori	Non-Māori
Tried to purchase alcohol to take away in the last 12 months*	14.6 (11.1–18.0)	14.3 (9.5–19.0)	14.9 (9.9–19.9)	19.2 (14.6–23.9)	13.5 (9.4–17.7)

* This includes buying alcohol to take away from wine shops, wholesalers, hotel or tavern bottle stores, supermarkets, superettes, dairies, sports clubs and other places.

Figure 24 shows that among male youths, Māori were significantly more likely than non-Māori to have tried to purchase alcohol to take away in the past year.

Figure 24: Youth drinkers (12–17 years) who tried to buy alcohol to take away at least once in the last 12 months, by sex and ethnic group, percent (crude)



The most common location for youth to have attempted to purchase alcohol to take away was wine shops and wholesalers. Overall, 7.8% (5.3–10.3) of youth drinkers had tried to buy alcohol to take away from wine shops and wholesalers at least once in the last 12 months (Table 31). Approximately 9.6% (7.0–12.2) of youth drinkers had tried to enter, or buy alcohol from, a pub, bar or tavern at least once in the last 12 months. There were no significant differences between males and females, or between Māori and non-Māori.

Table 31: Youth drinkers (12–17 years) who tried to buy alcohol at least once in the last 12 months, by place, percent (crude)

Description	Location	Total	Female	Male	Māori	Non-Māori
Tried to buy alcohol to take away	Wine shops and wholesalers	7.8 (5.3–10.3)	8.2 (4.2–12.1)	7.5 (4.2–10.9)	11.1 (7.3–14.9)	7.1 (4.2–10.0)
	Hotel or tavern bottle stores	6.4 (4.3–8.6)	5.4 (2.4–8.4)	7.5 (4.3–10.6)	8.2 (4.9–11.5)	6.1 (3.5–8.6)
	Supermarkets	4.7 (2.6–6.8)	5.9 (2.5–9.4)	3.5 (1.0–6.0)	4.3 (2.3–6.3)	4.8 (2.3–7.3)
	Superettes/dairies	1.6 (0.5–2.6)	–	2.7 (0.7–4.7)	–	–
	Sports clubs	1.5 (0.5–2.6)	–	1.7 (0.1–3.3)	3.3 (1.4–5.1)	–
	Other places	0.8 (0.3–1.2)	–	–	2.4 (1.0–3.9)	–
Tried to buy alcohol	Restaurants/café/s/ coffee shops	4.6 (2.5–6.7)	5.2 (2.1–8.4)	4.0 (1.4–6.7)	3.1 (1.5–4.7)	5.0 (2.5–7.5)
	Special events	4.2 (2.2–6.2)	2.9 (0.8–5.1)	5.4 (2.3–8.5)	5.2 (2.8–7.6)	4.0 (1.6–6.3)
	Sports events	1.9 (0.7–3.1)	–	2.6 (0.7–4.4)	4.7 (2.2–7.2)	–
Tried to enter or buy alcohol	Pubs/bars/taverns	9.6 (7.0–12.2)	9.1 (5.7–12.5)	10.2 (6.2–14.2)	14.0 (10.0–18.0)	8.6 (5.6–11.7)
	Nightclubs	7.3 (4.8–9.8)	7.9 (4.5–11.2)	6.8 (3.1–10.5)	9.7 (6.3–13.1)	6.8 (3.9–9.7)
	Sports clubs	3.9 (2.1–5.7)	4.0 (1.2–6.8)	3.8 (1.7–5.9)	7.3 (4.6–9.9)	3.1 (1.1–5.2)

Note: A dash (–) indicates that numbers were too low for reliable estimation.

Successful purchase of alcohol

Overall, 95.9% (93.2–98.7) of youth drinkers who had tried to purchase alcohol to take away in the last 12 months were successful at least once (Table 32).

Table 32: Youth drinkers (12–17 years) successful in purchasing alcohol to take away at least once in the last 12 months, among those who had tried, percent (crude)

	Total	Female	Male	Māori	Non-Māori
Successful in buying alcohol to take away at least once in the last 12 months, among those who had tried	95.9 (93.2–98.7)	98.2 (95.4–100.0)	93.9 (89.2–98.5)	90.5 (82.9–98.0)	97.7 (95.1–100.0)

Among youth drinkers who tried to buy alcohol from sports clubs and superettes/dairies in the last 12 months, all were successful at least once (Table 33). The large majority of youth drinkers who had tried to purchase alcohol from all other locations (including hotel or tavern bottle stores, wine shops and wholesalers and supermarkets) in the last 12 months were also successful at least once.

Table 33: Youth drinkers (12–17 years) successful in purchasing alcohol to take away at least once in the last 12 months, among those who had tried, by place, percent (crude)

Place	Total	Female	Male	Māori	Non-Māori
Sports clubs	100.0 (100.0–100.0)	–	100.0 (100.0–100.0)	100.0 (100.0–100.0)	–
Superettes/ dairies	100.0 (100.0–100.0)	–	100.0 (100.0–100.0)	–	–
Hotel or tavern bottle stores	95.7 (90.9–100.0)	100.0 (100.0–100.0)	92.7 (84.4–100.0)	93.2 (79.4–100.0)	96.5 (91.9–100.0)
Wine shops and wholesalers	94.8 (89.8–99.7)	98.9 (96.6–100.0)	89.8 (78.5–100.0)	83.6 (68.1–99.1)	99.2 (97.5–100.0)
Supermarkets	89.4 (73.6–100.0)	84.7 (58.9–100.0)	97.0 (90.5–100.0)	93.3 (79.7–100.0)	88.6 (69.5–100.0)
Other places	81.2 (54.4–100.0)	–	–	–	–

Note: A dash (–) indicates that numbers were too low for reliable estimation.

Request for ID when attempting to purchase alcohol

Among youth who had tried to buy alcohol from wine shops and wholesalers in the last 12 months, 71.5% (55.2–87.7) were asked for identification (ID) at least once in that time (Table 34). Just over half of youth drinkers who had tried to purchase alcohol to take away from supermarkets or from hotel or tavern bottle stores in the last 12 months were asked for identification at least once.

Table 34: Youth drinkers (12–17 years) asked for identification at least once in the last 12 months when trying to buy alcohol, among those who tried, by place, percent (crude)

Description	Place	Total	Female	Male	Māori	Non-Māori
Asked for ID when trying to buy alcohol to take away	Wine shops and wholesalers	71.5 (55.2–87.7)	60.3 (33.3–87.4)	85.1 (73.5–96.7)	65.7 (49.7–81.6)	73.7 (51.6–95.9)
	Hotel or tavern bottle stores	55.1 (34.0–76.2)	37.4 (4.6–70.2)	66.8 (44.5–89.1)	61.8 (42.0–81.7)	52.9 (25.5–80.3)
	Supermarkets	53.8 (29.9–77.7)	–	56.4 (16.2–96.6)	61.0 (38.0–84.0)	–
Asked for ID when trying to buy alcohol	Special events	46.7 (23.4–70.0)	–	54.1 (21.5–86.7)	50.7 (26.0–75.5)	–
	Restaurants/cafés/ coffee shop	24.0 (4.1–43.9)	–	–	–	–
Asked for ID when trying to either enter, or buy alcohol	Pubs/bars/taverns	67.2 (53.3–81.2)	67.6 (47.0–88.1)	67.0 (46.0–88.0)	55.9 (41.7–70.1)	71.4 (53.8–88.9)
	Nightclubs	61.2 (42.9–79.5)	56.6 (30.3–83.0)	66.2 (38.2–94.3)	52.8 (37.4–68.2)	64.1 (40.3–87.8)

Note: A dash (–) indicates that numbers were too low for reliable estimation.

Refusal when attempting to purchase alcohol

Among youth drinkers who had tried to purchase alcohol to take away in wine shops and wholesalers in the last 12 months, 65.7% (47.6–83.8) were refused alcohol at least once (Table 35).

Over half of youth drinkers who had tried to enter or buy alcohol in a pub, bar or tavern in the last 12 months had been refused either entry or alcohol at least once (57.1%; 41.5–72.7). There were no significant differences between females and males, or between Māori and non-Māori.

Table 35: Youth drinkers (12–17 years) refused at least once when trying to enter or buy alcohol from places in the last 12 months, among those who tried, by place, percent (crude)

Description	Place	Total	Female	Male	Māori	Non-Māori
Were refused alcohol when trying to buy alcohol to take away	Wine shops and wholesalers	65.7 (47.6–83.8)	56.4 (27.7–85.1)	75.3 (56.5–94.2)	52.6 (35.3–69.9)	70.8 (48.0–93.7)
	Supermarket	42.6 (18.1–67.1)	–	–	–	–
	Hotel or tavern bottle shop	35.8 (17.0–54.5)	–	37.1 (13.1–61.2)	42.3 (24.6–60.1)	33.6 (9.5–57.8)
Were refused alcohol when trying to buy it	Special events	42.5 (16.6–68.5)	–	46.3 (14.3–78.4)	61.0 (36.2–85.8)	–
Were refused entry, or, once inside premises, were refused alcohol when trying to buy it	Pub/bar/tavern	57.1 (41.5–72.7)	46.8 (22.4–71.2)	66.4 (45.5–87.2)	42.7 (28.8–56.5)	62.3 (42.8–81.9)
	Nightclub	54.5 (36.3–72.8)	38.2 (11.7–64.8)	73.2 (49.3–97.2)	41.4 (25.6–57.1)	59.0 (34.5–83.4)
	Sports clubs	38.1 (13.0–63.2)	–	–	–	–

Note: A dash (–) indicates that numbers were too low for reliable estimation.

Chapter 7: Alcohol and Pregnancy

Females aged 16–39 who had consumed alcohol in the last 12 months ('female drinkers') were asked questions relating to alcohol and pregnancy if they were pregnant or planning a pregnancy at the time of their survey interview.

Overall, 82.4% (71.6–93.1) of female drinkers who were pregnant had stopped all alcohol intake during their current pregnancy (Table 36). Four in five (79.2%; 73.9–84.6) female drinkers who were planning a pregnancy had stopped all alcohol intake in that time period.

Table 36: Change in alcohol intake during current pregnancy and while planning a pregnancy, female drinkers aged 16–39, percent (crude)

Alcohol intake	During current pregnancy	While currently planning a pregnancy
Increased	–	–
Same	13.3 (2.9–23.6)	7.1 (3.6–10.6)
Decreased	–	13.1 (8.8–17.5)
Stopped	82.4 (71.6–93.1)	79.2 (73.9–84.6)

Note: A dash (–) indicates that numbers were too low for reliable estimation.

No significant differences were found between Māori and non-Māori females for stopping alcohol intake, while planning a pregnancy or during a current pregnancy.

Appendix 1: Summary Tables of Crude Rates

The following tables summarise the crude prevalence rates of selected alcohol use patterns for females, males, Māori and non-Māori. Use these crude estimates if you want to know the actual burden experienced by the population of interest. However, differences in crude rates may arise from differences in age distributions, which is why age-standardised rates have been used in the body of the report for results by sex and ethnic group.

Table A1-1: Prevalence of alcohol consumption, by sex and ethnic group, percent (crude)

	Female	Male	Māori	Non-Māori
Prevalence of alcohol consumption in the last 12 months (among total population)	79.5 (78.0–81.0)	83.0 (81.6–84.5)	74.7 (73.3–76.2)	82.2 (80.9–83.4)
Produced home-made alcohol in the last 12 months (among total population)	0.7 (0.4–1.0)	2.9 (2.2–3.6)	1.1 (0.7–1.4)	1.9 (1.4–2.3)
Brought duty-free alcohol into New Zealand in the last 12 months (among people who had travelled overseas in the last year)	61.6 (58.1–65.1)	64.6 (61.1–68.1)	62.4 (59.0–65.8)	63.2 (60.1–66.2)
Consumption of types of alcohol in the last 12 months (among drinkers)				
Beer	56.8 (54.7–58.8)	92.0 (90.9–93.1)	81.5 (80.1–82.9)	73.4 (72.0–74.8)
Wine	87.0 (85.7–88.3)	71.4 (69.5–73.3)	62.6 (60.7–64.4)	81.4 (80.2–82.6)
Spirits	73.4 (71.3–75.4)	72.3 (70.4–74.3)	72.6 (71.1–74.2)	72.9 (71.3–74.4)
RTD (ready-to-drink) alcoholic drinks	48.6 (46.5–50.7)	43.1 (41.1–45.2)	59.4 (57.9–60.9)	44.1 (42.3–45.9)
Sherry	17.8 (16.1–19.5)	25.6 (23.6–27.7)	13.7 (12.3–15.0)	22.7 (21.2–24.2)
Cider	10.6 (9.3–12.0)	13.8 (12.4–15.3)	9.0 (7.9–10.1)	12.7 (11.5–13.8)
Other	3.1 (2.4–3.9)	3.8 (3.0–4.6)	3.5 (2.8–4.1)	3.4 (2.8–4.1)

Note: Beer includes low-alcohol beer and home brew; spirits includes liqueurs and mixed cocktails; sherry includes port and vermouth.

Table A1-2: Drinking patterns, among drinkers, by sex and ethnic group, percent (crude)

	Female	Male	Māori	Non-Māori
Frequency of alcohol consumption (among drinkers)				
7 or more times a week	11.3 (9.9-12.7)	19.4 (17.7-21.2)	9.0 (7.9-10.2)	16.2 (15.0-17.4)
4–6 times a week	14.3 (12.8-15.9)	18.0 (16.3-19.8)	12.9 (11.5-14.3)	16.6 (15.4-17.8)
1–3 times a week	38.1 (36.1-40.2)	38.3 (36.1-40.5)	38.0 (36.2-39.7)	38.2 (36.6-39.9)
Less than once a week	36.3 (34.3-38.3)	24.2 (22.2-26.2)	40.1 (38.2-42.1)	29.0 (27.5-30.5)
Drinking patterns (among drinkers)				
Drinking large amounts of alcohol on a typical drinking occasion	23.4 (21.8–24.9)	26.0 (24.0–27.9)	52.6 (50.5–54.8)	21.0 (19.9–22.2)
Drinking large amounts of alcohol at least once a week	10.4 (9.2–11.7)	18.9 (17.3–20.5)	22.0 (20.7–23.4)	13.7 (12.6–14.9)
Drinking enough to feel drunk at least once a week	5.7 (4.8–6.6)	13.3 (11.8–14.7)	15.2 (13.9–16.5)	8.7 (7.7–9.6)
Drinking and driving (among drinkers who drive)	13.7 (12.1–15.3)	27.4 (25.1–29.7)	19.4 (17.8–21.0)	20.7 (19.2–22.3)

Table A1-3: Harmful effects of other people's drinking on area of life in the last 12 months, total population, by sex and ethnic group, percent (crude)

	Female	Male	Māori	Non-Māori
Problems experienced as a result of someone else's drinking				
Physical assault	4.5 (3.7–5.2)	7.0 (6.0–7.9)	9.9 (8.9–10.8)	5.1 (4.4–5.7)
Sexual harassment	8.1 (7.1–9.0)	2.4 (1.7–3.0)	8.6 (7.7–9.6)	4.8 (4.1–5.5)
Motor vehicle accident	1.5 (1.1–1.9)	2.0 (1.5–2.6)	2.7 (2.2–3.3)	1.6 (1.2–1.9)
Other type of accident	1.4 (0.9–2.0)	1.4 (0.9–1.9)	2.3 (1.8–2.8)	1.3 (0.8–1.7)
Harmful effect on home life due to someone else's drinking				
Large effect	5.0 (4.3–5.7)	2.6 (2.0–3.2)	6.7 (6.0–7.4)	3.4 (2.9–4.0)
Medium effect	6.7 (5.8–7.6)	6.0 (4.9–7.1)	9.3 (8.3–10.2)	5.9 (5.1–6.7)
Small effect	12.3 (11.1–13.5)	14.2 (12.8–15.6)	15.7 (14.6–16.8)	12.8 (11.8–13.8)
No effect	76.0 (74.3–77.8)	77.2 (75.3–79.1)	68.3 (66.9–69.7)	77.8 (76.5–79.1)
Harmful effect on friendships and social life due to someone else's drinking				
Large effect	4.0 (3.4–4.7)	2.7 (2.1–3.3)	6.9 (6.0–7.8)	2.9 (2.4–3.4)
Medium effect	7.3 (6.3–8.3)	6.4 (5.4–7.4)	8.9 (7.9–10.0)	6.6 (5.8–7.3)
Small effect	14.7 (13.5–16.0)	15.6 (14.2–17.0)	17.4 (16.1–18.6)	14.8 (13.8–15.9)
No effect	73.9 (72.2–75.6)	75.2 (73.6–76.9)	66.8 (65.2–68.3)	75.7 (74.4–77.0)
Harmful effect on financial position due to someone else's drinking				
Large effect	1.8 (1.3–2.3)	1.7 (1.2–2.1)	3.4 (2.8–4.0)	1.5 (1.1–1.9)
Medium effect	3.2 (2.6–3.8)	3.4 (2.7–4.1)	5.5 (4.7–6.3)	3.0 (2.5–3.6)
Small effect	7.5 (6.5–8.5)	8.7 (7.7–9.7)	12.6 (11.4–13.7)	7.4 (6.6–8.3)
No effect	87.4 (86.3–88.6)	86.2 (84.9–87.5)	78.5 (77.2–79.8)	88.0 (87.0–89.0)

Table A1-4: Help-seeking to reduce level of alcohol consumption, total population, by sex and ethnic group, percent (crude)

	Female	Male	Māori	Non-Māori
Receiving help to reduce alcohol consumption (total population)				
Had ever received help to reduce alcohol consumption	1.4 (0.9–1.9)	3.0 (2.4–3.6)	3.9 (3.2–4.6)	1.9 (1.5–2.4)
Source of help (among those who had ever received help)				
Drug and alcohol counsellor	27.9 (11.8–43.9)	24.3 (14.1–34.5)	33.1 (24.8–41.5)	23.3 (12.8–33.7)
Detoxification programme	16.0 (4.9–27.0)	17.3 (8.7–25.9)	15.7 (7.9–23.6)	17.2 (8.8–25.5)
Alcoholics Anonymous	4.9 (1.0–8.8)	20.4 (10.5–30.4)	16.5 (10.4–22.5)	15.0 (6.5–23.5)
General practitioner	7.6 (0.7–14.5)	11.4 (3.6–19.3)	8.4 (3.8–13.0)	10.7 (3.6–17.8)
Health centre	–	9.4 (2.8–16.0)	–	12.5 (5.2–19.8)
Māori provider	–	–	7.6 (3.2–12.1)	–
Wanting help to reduce alcohol consumption but not receiving it (total population)				
Had ever wanted help to reduce alcohol consumption but not received it	0.5 (0.3–0.8)	1.4 (1.0–1.9)	2.0 (1.5–2.5)	0.8 (0.5–1.1)
Barriers to receiving help (among those who had ever wanted help but not received it)				
Social pressure to keep using	14.9 (1.2–28.6)	30.7 (13.4–48.0)	15.6 (8.2–23.1)	30.0 (12.1–47.9)
No time / too busy	21.4 (5.2–37.6)	24.0 (7.4–40.7)	21.9 (12.1–31.7)	–
Did not know where to go	20.8 (5.3–36.3)	21.4 (6.1–36.6)	27.4 (17.8–37.0)	–
Fear of what might happen once contact made with the service	–	19.9 (5.7–34.1)	11.2 (4.1–18.4)	–
Services were not appropriate for my type of alcohol use	–	–	7.8 (2.4–13.1)	–

Note: A dash (–) indicates that numbers were too low for reliable estimation.

Table A1-5 summarises the crude prevalence rates for the consumption of alcohol in the last 12 months, by type of alcohol and by age group, among drinkers.

Table A1-5: Prevalence of alcohol consumption in the last 12 months, drinkers, by type of alcohol and age group, percent (crude)

Type of alcohol consumed in last 12 months	Age group					
	12–17 years	18–24 years	25–34 years	35–44 years	45–54 years	55–65 years
Beer	79.6 (75.7–83.5)	80.9 (78.5–83.3)	78.6 (75.7–81.5)	73.3 (70.5–76.1)	70.6 (67.6–73.6)	65.0 (61.6–68.4)
Wine	60.3 (54.8–65.8)	68.2 (64.4–72.1)	77.2 (74.3–80.1)	83.7 (81.5–86.0)	87.1 (85.0–89.3)	85.6 (82.4–88.9)
Spirits	56.7 (51.8–61.6)	86.1 (83.2–88.9)	78.1 (75.3–80.8)	72.1 (69.1–75.1)	71.6 (68.4–74.9)	65.3 (61.0–69.5)
RTD (ready-to-drink)	63.1 (58.6–67.6)	75.6 (71.9–79.4)	55.6 (52.1–59.1)	43.8 (41.0–46.7)	32.1 (29.1–35.0)	15.1 (12.0–18.2)
Sherry	7.6 (5.2–10.0)	19.3 (15.9–22.6)	20.7 (17.9–23.5)	23.3 (20.4–26.1)	24.0 (21.1–27.0)	28.4 (24.6–32.3)
Cider	13.6 (10.1–17.1)	16.0 (13.2–18.9)	15.3 (12.6–17.9)	10.2 (8.4–12.0)	9.5 (7.4–11.5)	10.5 (7.9–13.1)
Other	3.9 (1.5–6.4)	6.7 (4.8–8.7)	3.8 (2.4–5.1)	2.1 (1.2–2.9)	2.3 (1.3–3.3)	3.2 (1.8–4.6)

Note: Beer includes low-alcohol beer and home brew; spirits includes liqueurs and mixed cocktails; sherry includes port and vermouth.

Appendix 2: Derived Variables

Frequency of drinking

Respondents were asked how many times they had consumed alcohol in the last 12 months, by different locations (listed in Table 9). The frequency of drinking was calculated from respondents' reported number of drinking occasions at each location in the last 12 months, summed over all locations.

Thus, the frequency of drinking represents the number of times the respondent had consumed alcohol in the last 12 months, calculated as an average number of times per week.

For the analysis of frequency of drinking, it should be noted that due to how the questions relating to this variable were asked in the questionnaire, drinking occasions at different locations are recorded as different drinking occasions. Essentially, this means that if a person consumed alcohol at three different locations in one evening (for example, their own home, someone else's home, and at a pub), this has been counted as three different drinking occasions.

Table A2-1 presents the definitions used to calculate each category for frequency of drinking.

Table A2-1: Definitions used in analysis of frequency of drinking

Frequency of drinking (as presented in report)	Average number of drinking occasions per week (X)	Number of drinking occasions in the last 12 months (Y)
Less than once a week	$X < 1.0$	$Y < 52$
1–3 times a week	$1.0 \leq X < 4.0$	$52 \leq Y < 208$
4–6 times a week	$4.0 \leq X < 7.0$	$208 \leq Y < 365$
7 or more times a week	$7.0 \leq X$	$365 \leq Y$

Standard drinks

When respondents were asked how much alcohol they consumed, they reported this amount of alcohol in terms of the type of alcohol consumed, the type of drinking container used, and the number of drinks in this drinking container that they would consume.

Tables A2-2 and A2-3 present the definitions of absolute alcohol per volume, and volume of drinking containers, which were used to calculate the number of standard drinks consumed by respondents.

Table A2-2: Definitions of percentage of absolute alcohol per volume, by alcohol type

Alcohol type	Percentage absolute alcohol per volume
Beer (ordinary strength)	4.2%
Beer (low-alcohol)	1.5%
Home-brew beer	4.5%
Wine	11.0%
Sherry, port, vermouth	18.0%
Cider	5.0%
Wine cooler	5.0%
Spirits	23.0% or 42.0% (depending on variety)
Ready-to-drink (RTD) alcoholic drinks	8.0% or 6.0% (depending on variety)

Table A2-3: Definitions of volume of drinking containers, by alcohol type

Alcohol type	Type of drinking container	Volume (millilitres)
Beer	Can	355
	Stubbie bottle	335
	Standard bottle	745
	Small handle (half pint)	285
	Large handle (pint)	500
Wine	Small glass	100
	Medium glass	140
	Large glass	180
	Small bottle	375
	Standard bottle	750
Spirits	Glass (single nip)	18
	Glass (double nip)	36

Number of standard drinks consumed on a typical occasion

Respondents were asked about the amount of alcohol they consumed on a typical drinking occasion at different locations (listed in Table 9). This amount of alcohol was converted into the number of standard drinks, using the method described above.

The number of standard drinks the respondent consumed on a typical drinking occasion at each location was multiplied by the number of times they reported drinking at that location in the last 12 months, and added up for the different types of locations. This was used to calculate an average value for the number of drinks the respondent consumed on a typical occasion.

For the analysis in this report, the amount of alcohol consumed on a typical drinking occasion was presented as whether or not the respondent consumed large amounts of alcohol on a typical drinking occasion, according to the gender-specific World Health Organization (WHO) recommendations.

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