

NSW Community Survey on Cancer Prevention 2013

Community behaviours,
knowledge and attitudes on
alcohol consumption

support



Prevention



research

advocacy



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Key findings

- Only 47% of NSW adults correctly identified that alcohol consumption is a risk factor for cancer
- There were generally high levels of support for alcohol policies that provided more detailed labels on alcohol containers, and restrictions on online alcohol advertising to children and young people
- Level of support for alcohol policies increased as alcohol consumption levels decreased

Why did Cancer Council NSW undertake this study?

With the high burden of cancer in the NSW community and strong evidence that more than a third of all cancers can be prevented through healthier lifestyle choices, it is important that Cancer Council NSW (CCNSW) understands the community's level of knowledge around cancer risk factors. This allows CCNSW to understand the barriers to, and enabling factors that support healthy choices and a 'cancersmart' lifestyle.

To better understand the community's behaviour, beliefs, intentions and attitudes relating to cancer prevention, CCNSW conducted a survey of adults living in NSW. Cancer prevention issues captured by the survey included knowledge and attitudes towards:

- risk factors for cancer
- sun protection
- smoking and tobacco control policies
- fruit and vegetable consumption
- food policy issues, and
- alcohol consumption

The results of this research will inform CCNSW in developing education and health promotion programs related to cancer prevention.

Why is Cancer Council NSW interested in alcohol?

There is convincing evidence that alcohol use can increase the risk of cancers of the mouth, pharynx, larynx, oesophagus, bowel (in men) and breast (in women), and probable evidence that it increases the risk of bowel cancer (in women) and liver cancer (convincing and probable are the highest levels of evidence as determined by the World Cancer Research Fund and American Institute for Cancer Research and denote that the relationship is causal or probably causal in nature).¹ It is estimated that between 1.9–5.8% of all cancers, or between 2,182 and 6,620 cancers, are attributable to long-term use of alcohol.² Reducing the amount of alcohol is one way people can reduce their risk of cancer.

It is not just heavy drinking that increases cancer risk. Even drinking small amounts of alcohol increases the risk of cancer, and the more you drink, the greater the risk.¹

This report presents the findings of questions included in the NSW Community Survey on Cancer Prevention conducted by Cancer Council NSW that relate to alcohol.

How was the research conducted?

Administration and participant recruitment:

The NSW Community Survey on Cancer Prevention was administered online during January and February 2013. Approximately 3,000 adults (18 years or older) living in NSW completed the survey. Overall, 2,482 adults completed alcohol-themed questions.

Potential participants were invited by email to complete the survey. Demographic quotas were set to ensure the sample was representative of the NSW population.

Survey development and structure:

Survey questions were developed through a comprehensive review of other population health surveys (e.g. NSW Population Health Survey) and similar studies undertaken by Cancer Council South Australia and Cancer Institute NSW.

The questions examined by this report asked participants about their:

- Alcohol consumption
- Knowledge of the health consequences associated with alcohol consumption
- Support for strategies aimed at reducing alcohol related harm

What did we find?

Usual alcohol consumption

Participant’s alcohol consumption was explored. Figure 1 shows how frequently participants reported consuming alcoholic beverages. Overall, 13% of participants indicated that they never consume alcohol. There was a significant association between gender and frequency of consumption, with men reporting more frequent consumption than women ($p<0.001$). Frequency of alcohol consumption also differed significantly between age groups ($p<0.001$), with older adults reporting more frequent consumption than younger adults.

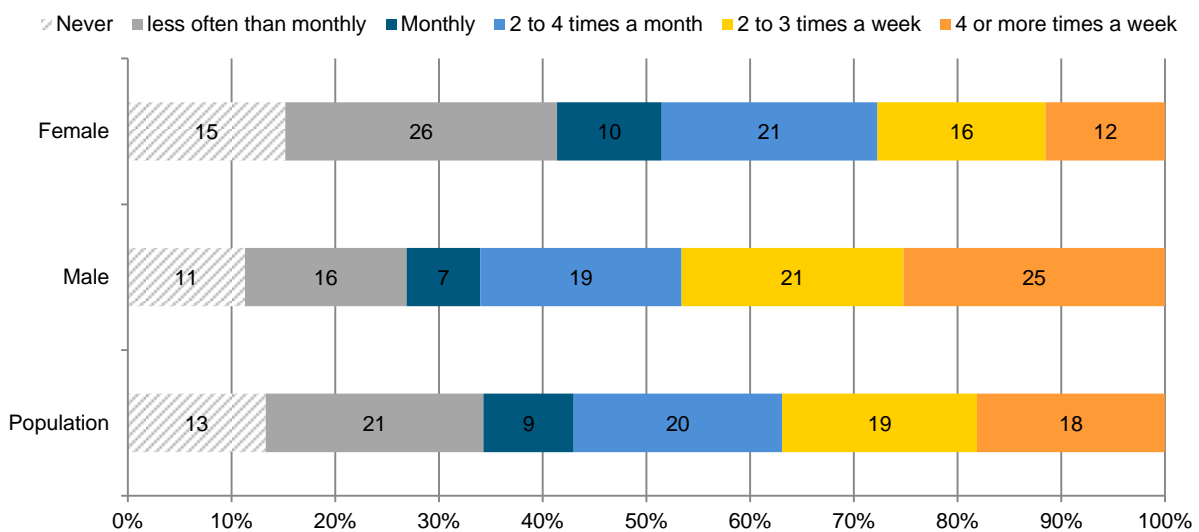


Figure 1. Frequency of alcohol consumption of participants

The median number of standard drinks consumed by participants on a usual day when drinking alcohol was two. Men had significantly higher median consumption (three standard drinks) than women (two standard drinks) ($U=529,155.5$, $z=-6.165$, $p<0.001$).

Alcohol consumption at levels posing a lifetime risk to health

The National Health and Medical Research Council (NHMRC) state that the lifetime risk of harm from alcohol-related disease or injury is minimised by:

- Drinking no more than two standard drinks on any day
- Drinking no more than four standard drinks on a single occasion³

On the days that participants did drink, 45% reported consuming more than two standard drinks. Men were significantly more likely than women to consume this amount (51% versus 39%, $p < 0.001$).

About two-thirds of participants (65%) reported that on some occasions they would consume five or more standard drinks. Men were significantly more likely than women to report drinking five or more serves on a single occasion (70% versus 60%, $p < 0.001$), and were more likely to consume this amount more often ($p < 0.001$).

Knowledge of alcohol-related health consequences

Participant's knowledge of the health consequences associated with alcohol consumption was explored. While the vast majority adults knew that there can be serious long term health consequences associated with binge drinking (91%), only 40% knew that consuming just one or two drinks on most days can have serious health consequences. Of concern, 27% of participants indicated that consuming between one and two alcoholic drinks on most days can have health benefits, and less than half (47%) thought that limiting alcohol consumption helps to prevent cancer. As shown in Table 1, beliefs about alcohol-related health consequences differed by gender, educational attainment and household income.

Table 1. Proportion of participants who agree with statements on the health risks associated with alcohol consumption

Proportion (%)	Limiting alcohol intake helps to prevent cancer	Consuming 1 or 2 drinks on most days has health benefits	Consuming 1 or 2 alcoholic drinks on most days can have serious long-term health consequences	Binge drinking can have serious long-term consequences
Male	45	31	33	88
Female	50	22	46	91
Household income < \$50,000	49	30	38	91
Household income \geq \$55,000	54	26	42	89
No university degree	49	28	37	91
University degree	61	24	49	91
All	47	27	39	91

Community support for strategies to reduce problems associated with alcohol-related harm

Community support for various strategies aimed at reducing alcohol-related harm was explored. Table 2 shows participant's support for various strategies. As illustrated, the majority of survey participants were in support of including health warnings on alcohol containers, laws aimed at restricting under-age internet users being exposed to alcohol advertising, and requiring information on the national drinking guidelines on all alcohol containers. Increasing the price of alcohol and reducing the number of outlets that sell alcohol received the greatest opposition.

Table 2. Proportion of participants who would support policies aimed at reducing the problems associated with alcohol use

	Health warnings on alcohol containers	Restrict internet alcohol advertising if <18	Drinking guideline information on alcohol containers	Banning alcohol sponsorship of sport events	Volumetric taxation	Reduced number of outlets that sell alcohol	Increasing the price of alcohol
Male %	67	66	59	42	42	35	26
Female %	77	72	72	52	40	40	32
All %	72	69	66	47	41	38	29

What does this mean?

In Australia, 18% of the population drink at levels that place them at risk of long-term health risks, including 26% of males and 10% of females.⁴ Although levels of alcohol consumption amongst the population have been declining,⁴ it is concerning the NSW Community Survey on Cancer Prevention has shown that the majority of people surveyed (61%) are still unaware of the long-term health risks associated with alcohol consumption.

It has been established that long-term alcohol consumption has been causally linked to several chronic diseases and conditions, such as cancers of the mouth, pharynx, larynx, oesophagus, breast (in women) and bowel (in men),² hypertension, heart disease, stroke and liver disease.³ Although there are some positive outcomes of low-level alcohol consumption in relation to heart disease risk factors,³ the Heart Foundation position statement on antioxidants for cardiovascular health states that alcohol should not be consumed for prevention or treatment of cardiovascular disease.⁵

It is concerning that 27% of participants believed that drinking one to two drinks on most days is beneficial to health. Further, more than half of all participants (53%) either did not know or did not believe that limiting alcohol intake helps reduce the risk of cancer. Females, those with higher education levels and higher household incomes were more likely to agree that limiting alcohol intake helps reduce the risk of cancer. There is considerable scope to increase the community's knowledge of the link between alcohol and cancer risk.

There were high levels of community support for various policy initiatives, particularly for providing more informative labels on alcohol containers and restricting online alcohol advertising to children. This shows that these policies are likely to be supported by the general public if they are introduced. Further, the level of support increased as usual alcohol consumption decreased. Therefore it is possible that if population alcohol consumption continues to decrease, support for alcohol policies may increase.

Results of the NSW Community Survey on Cancer Prevention show that community awareness on the link between alcohol and cancer is low. Despite this, many participants supported the introduction of various alcohol policies. Improving awareness of the long-term health risks of alcohol consumption via mass media and education campaigns may increase public support for effective alcohol harm-reduction policies.

References

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