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Alcohol policy in the resources sector.

**A background paper for the
Chamber of Minerals and
Energy of WA.**



360edge.

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About 360Edge.

We are a leading Australian health consultancy, specialising in the alcohol and other drug, and allied, sectors. We provide a full suite of advisory services to help health service organisations accelerate change. We work with leading international organisations, governments and not for profit agencies across Australia and internationally.

Our vision is for a thriving service system that provides the best policy and practice responses right across the spectrum of alcohol and other drug use. We see a sector that has continuous improvement at its core and is resilient and adaptable to change. Our mission is to ensure governments and services have the tools they need to respond effectively and efficiently to people who use alcohol and other drugs to reduce harms.

We are driven to make a positive impact in the world and strongly believe in social justice and human rights, and it drives all of our work. We believe that everyone has the right to the opportunities and privileges that society has to offer. Our values of excellence, transparency and integrity are at the core of everything we do. We live these values within the team and with our customers and collaborators.

Our team of experienced 'pracademics' take a 360 approach to viewing situations from multiple perspectives. We collaboratively and holistically work with our clients at every stage, wherever they are in the cycle of change, to achieve their goals. Our team of experienced 'pracademics' take a 360 approach to viewing situations from multiple perspectives.

*In the spirit of reconciliation, we acknowledge the traditional custodians of country throughout Australia and their connection to land, sea and community.
We pay our deep respects to elders past, present and future, and to all
Aboriginal and Torres Strait Islander peoples today.*



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About this paper.

The key resources industry body in Western Australia, the Chamber of Minerals and Energy, convenes the Safe and Respectful Behaviours Working Group, which includes industry representatives from WA's resources sector.

The working group is working towards an industry standard to manage alcohol on remote resource sector operations, including work adjacent settings such as employer provided accommodation villages.

This background paper offers evidence-based advice to guide to support the development of the industry standard.

Alcohol policy in the resources sector.

Impacts of alcohol in the workplace

As a high-risk industry, the WA resources sector has long been aware of the impacts of alcohol and other drugs in the workplace and has a well-developed system of alcohol and other drug testing in place to manage workplace health and safety risks.

More recently it has become clearer that the impacts of alcohol go well beyond physical injury. Workplaces are now broadening their focus to look at a range of other impacts as well as the benefits of better managing alcohol, including outside worksites.

Approximately 90% of the Australian workforce consumes alcohol and about 30% have experienced negative effects of drinking in their workplace.^{1,2}

Most sexual harassment and bullying occurs after alcohol use.

Joanna Weekes
Health and Safety Handbook

Alcohol use both at and outside of work contributes to workplace sexual harassment, bullying, and antagonistic workplace behaviours.^{3-6,7}

Alcohol is not the cause of these behaviours, but because alcohol is disinhibiting and affects decision making, it increases the risk of these harms occurring at the time of consumption. Even among regular drinkers, tolerance tends to occur to the behavioural effects of alcohol, like coordination, but less so to cognitive impacts, such as decision making and disinhibition.⁸

Risky drinking, based on the National Health and Medical Council Guidelines, is consuming four or more standard drinks in a session. Risky drinking outside of work is also a predictor of workplace sexual harassment and workplace aggression.^{4,6}

Most of the impact of alcohol on the workplace is due to alcohol consumed outside work time, either at home, at work sanctioned or organised functions, in work adjacent settings such as accommodation camps, or when travelling for work.¹

There is an association between the proportion of men in a workforce engaging in risky drinking and the probability of

¹ <https://healthandsafetyhandbook.com.au/bulletin/qa-alcohol-and-the-workplace/>

harassment toward women, which is exacerbated by workplace cultures that are tolerant of risky drinking.⁴

Around 20% of lost productivity costs are directly attributable to alcohol, and this is primarily due to the aftereffects of drinking, like hangovers⁹ and lack of sleep.^{10, 11}

Absenteeism is a significant contributor, but presenteeism - workers who go to work but are at reduced capacity and capability - is even more common.¹²

It's not just heavy or problem drinkers that make up these statistics; occasional drinkers contribute to around half of lost productivity.¹¹

A work environment that is permissive towards drinking can put up barriers to entry and success for some groups, including women and people from some cultural or religious backgrounds.¹³

On the other hand, effective management of alcohol at and outside work, can have significant benefits for an organisation and its culture.

It can support diversity and inclusion, improve productivity and business outcomes^{14,15}, reduce employee turnover^{16,17} and increase workplace engagement,^{18, 19} especially among men.^{18, 19}

Most working Australians will spend around one-third of their lives at work, so there are significant opportunities to use the workplace to influence attitudes to drinking.

Effective workplace interventions in male-dominated industries include:²⁰

- screening for risky alcohol use
- peer-based workplace interventions aimed at changing attitudes to drinking by staff and management
- brief alcohol education counselling for identified risky drinkers (provided in conjunction with screening)
- workplace policies on alcohol and other drug use
- employee assistance programs

How much is too much?

In 2020, the National Health and Medical Research Council (NHMRC) updated their guidelines that set the recommended level of individual alcohol consumption to reduce a range of short and long-term risks.²¹ The research behind these guidelines is focused largely on longer term health risks, but it also references shorter term risk.

The guidelines state:²¹

A healthy adult should drink no more than 10 standard drinks a week and no more than 4 standard drinks on any one day.

Drinking four standard drinks or less on a single occasion reduces the risk of alcohol-related injury arising from that occasion,²² including harm to others,²³ because it reduces the risk of becoming too intoxicated.

Both drinking four standard drinks or less on a single occasion and drinking less than 10 standard drinks a week reduces the risk of long-term health problems related to alcohol.

Any alcohol consumption carries some risk but, given the prevalence of drinking in the community, the guidelines try to minimise risk of short term harms, like accidents, injuries and assaults, and risk of long term harms, such as cancer, heart disease and diabetes.

To reduce the risk of harms from intoxication, the NHMRC recommends:²⁴

- eating food before and while drinking alcohol
- have a non-alcoholic drink in between alcoholic drinks
- checking the label on drinks to see how many standard drinks it contains
- remembering that drinks served in hospitality settings often contain more than one standard drink
- setting limits and sticking to them
- drinking water to quench thirst before drinking alcohol
- avoiding the use of alcohol to deal with stress, anxiety, or poor sleep
- developing alternative approaches to manage stress and anxiety

The 2020 guidelines reduced the recommended upper limits of alcohol intake (previously the equivalent of 14 standard drinks a week) because there is now much clearer evidence of the harms caused by alcohol.

Drinking within these limits represents a 1 in 100 risk of dying from an alcohol-related disease or injury.¹³ This is considered an 'acceptable risk', taking into consideration that drinking alcohol is common and it is unlikely that people will stop altogether.

The guidelines also take into account typical drinking patterns in the Australian community. On average, Australian adults drink about three times a week. So drinking around three standard drinks on three days per week would keep within the limits, for example. About three quarters of Australians already drink within these limits.¹³

The demographic of the resources sector in WA significantly increases likelihood of risky drinking.

Twenty six percent of Western Australians drink more than four standard drinks in a session at least monthly, slightly higher than the national average of 24.8%.¹³



Alcohol is best treated as one of a number of risks to health and safety in the workplace

Resources workers are in a number of higher risk categories for alcohol related harms.

Fly in, fly out and drive in drive out work is common in the resources industry. FIFO and DIDO workers' rate of risky drinking is twice that of the general population.²⁵ Both FIFO

and DIDO workers are more likely to use alcohol or other drugs to manage disrupted sleep and stress.²⁶

In addition, people living in remote or very remote locations, where many of the resources industry is based, are twice as likely to exceed the national guidelines.¹³

Young people and those in technical and trade jobs make up a sizeable proportion of resources workers. Although the rate of drinking among young people has been declining, they are still one of the groups at high risk of alcohol related harm.¹³ People who work in trades and technical jobs also have a higher rate of risky drinking than the national average.^{27,28}

Alcohol policy that supports workers to stay within the NHMRC guidelines can shape the drinking behaviour of a workforce to move it closer to community norms.

Encouraging a culture of moderation

FIFO and DIDO workers are able to restrict their drinking while on work sites or in accommodation villages, supported by the strict testing regimes, but may return to risky drinking once at home. This potentially shifts the risk from the workplace to the home and does not reduce risky drinking itself. Therefore, introducing measures that both directly and indirectly reduce the risk from

alcohol will have the greatest impact on immediate and longer-term harms.

This may include restrictions on number of standard drinks and days of drinking (direct measures), as well as education on risky drinking and the effect on health and social wellbeing, and options for brief and longer interventions for people who find it difficult to bring their consumption to within the recommended limits (indirect measures).

A standard drink is 100ml of wine (12.5% alcohol), 250ml (pot or midi) of full strength beer, or one nip of spirits (40%).²⁹ A standard bar pour of wine is closer to 150ml,³⁰ which is 1.4 standard drinks, so the implementation of any standard that utilises the Australian guidelines needs to ensure a serve is a standard drink, not a standard pour.

The cornerstone of good alcohol policy focused on prevention is education. People need to be aware of the risks of alcohol use and the advantages of moderation to become motivated to change, and they need to be equipped with the knowledge and skills to moderate their drinking i.e., knowledge of standard drink measures, counting their drinks consumed, and choosing low alcohol beverages.³¹

The broader aim of education is to discourage a culture of over consumption of alcohol and normalise moderation, aligned with current community norms. For example, the decline in young people drinking at high-risk levels.³² Only 14% of young people aged 18-25 drink alcohol several times per week, compared with 35% of people over 70 years old.¹³

Education programs focused on alcohol related harms can help shift attitudes to alcohol use by highlighting potential harms that may not have been obvious.³³ Education programs focusing on stress management and healthy lifestyles, without directly addressing alcohol use, can also indirectly influence alcohol consumption attitudes and behaviours.³¹

Organisational endorsement and support help to encourage a culture of moderation. This can be achieved through company messaging and through demonstration by leadership, such as managers moderating their own drinking.³¹

This includes moderation in work-adjacent settings like accommodation camps, while travelling for work, and at work functions like holiday celebrations. An alcohol policy that applies to the whole organisation and outlines expectations in work-adjacent settings can support this.

Increasing the availability of non-alcoholic drinks like soft-drinks or non-alcoholic beer and wine increases the likelihood that they will be selected over alcoholic beverages.³⁴ Supplying non-alcoholic options can also help to ensure that employees don't feel obliged to drink.

Effective alcohol policy

Alcohol is best treated as one of a number of risks to health and safety in the workplace. This can be achieved by embedding alcohol policy within a fitness for work framework that considers other workplace risks like

stress, fatigue, and physical and mental health.

There is an interconnectivity between a range of health and safety policies in the workplace so a holistic approach in which alcohol policy is considered within the context of other similar policies is most effective. These include policies about mental health, work conditions including rest and meal breaks, and rostering.

High levels of psychological distress among mine workers, for example, is associated with riskier drinking,³⁵ so policies that support good mental health and wellbeing also help to reduce risk of heavy drinking.³¹

Drinking tends to increase when people are working in hot and dusty conditions with poor ventilation and limited access to non-alcoholic drinks³⁶ so a policy that provides free cold water or soft drinks to workers may also help reduce alcohol consumption.

Adding education and training and worker supports to alcohol policy that clearly outlines what is and is not acceptable at work and in work adjacent settings, can enhance its effectiveness.

Training for both managers and workers ensures that they are aware of the rationale behind alcohol and other drug policies and that policies are understood. Supporting information and resources should for part of the dissemination plan for the policy. Employee assistance programs, and leave and return to work policies, can support those who may have difficulty transitioning to new policy arrangements.

The most effective workplace interventions tend to involve a 'whole of organisation' approach that applies to all employees and contractors, including frontline staff, office workers and senior management.²⁸ Targeted policies directed at only one part of the workforce risk poor compliance and enforcement.

Work-adjacent settings should also be a focus of alcohol and other drug policies. Specific interventions to minimise the risk of intoxication and alcohol-related harm should be considered for these settings. For example, requiring workers to wear uniforms while travelling can remind them that they are still on duty.³⁷

Reminding employees of the workplace alcohol policy before work-sanctioned events like holiday celebrations and conferences can reinforce behavioural expectations. If alcohol is involved, serving food and providing non-alcoholic drinks can help to keep the consumption of alcohol at reasonable levels.



Unintended consequences

Any strategy carries a risks and benefits. The key is to balance these risks and benefits to minimise harms. Care needs to be taken to anticipate, monitor and manage unintended consequences of alcohol policy.

For example, it may seem like a simple solution to ban alcohol altogether, or to increase the price of alcohol onsite or to only serve mid strength alcohol to discourage drinking. However, when alcohol is easily accessible elsewhere, these strategies risk:

- people going off site to drink where there is less monitoring and control of drinking and intoxication
- people still becoming intoxicated elsewhere bringing the same issues of harassment and violence back to the village
- secretly hiding and stockpiling alcohol increasing the risk of heavy drinking and associated problems
- shifting the harms from the accommodation village to the community in which the village is located
- impacting on the reputation of the company as a result poor behaviour of workers while they are in the community during and after drinking
- people shifting to other unwanted behaviours that may also increase risk of sexual harassment and violence, and reduce inclusion and diversity, such as illicit drug use and pornography use.

There is an ever increasing number of novel drugs developed. These synthetic drugs produce the same effects as banned illicit drugs, but can evade positive results on standard testing.⁴⁰ For

example, there were reports of increased methamphetamine use among mining workers in response to the introduction of urine analysis for drug testing, as methamphetamine is metabolised faster than cannabis, which makes it harder to detect using standard testing.³⁹

People use alcohol for myriad reasons, including managing stress, fatigue, boredom, and mental health symptoms. These underlying reasons don't disappear when alcohol is banned, so the demand remains. If measures are introduced without an information and education process, there is a risk of low compliance.

If dry villages are introduced suddenly, there is a risk that people who are dependent on alcohol could become unwell with withdrawal symptoms. Consideration needs

to be given to the introduction and implementation of changes, including required supports and education.

The key to the introduction of any measure is to monitor changes to key indicators including:

- alcohol consumptions rates
- number of onsite accidents and injuries
- number of onsite incidents of intoxicated behaviour
- number of onsite sexual harassment and violence reports
- use of alternative recreational facilities
- number of incidents and complaints from the community/police outside the villages.

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