

A SURVEY OF OVER **2000 ED DOCTORS AND NURSES** IN **AUSTRALIA AND NEW ZEALAND** HAS FOUND **SHOCKING STATISTICS.**



**98%**

had suffered **verbal aggression** from **drunk patients** in the last 12 months



**92%**

had experienced **violence** or **physical threats** from **drunk patients** in the last 12 months



**88%**

said the care of other patients was **negatively or very negatively affected** by **drunk patients in the ED**



**87%**

said they had **felt unsafe** due to the presence of a drunk patient while working in the ED



**94%**

said drunk patients in the ED had a **negative or very negative effect** on the workload of ED staff

## FOUR STEPS TO **STOP THE HARM**

**1**

### **Brief interventions in EDs.**

International research suggests these tools are effective in identifying, reducing and preventing problematic use, abuse and dependence on alcohol.

**2**

### **Add alcohol to patient data sets.**

National mandatory collection of alcohol-related presentation data will provide a clearer picture of the extent of the problem and an evidence base to inform and evaluate policy decisions.

**3**

### **Regulate advertising and tax.**

Take a national approach to reduce the exposure of young people to alcohol advertising, establish an independent regulatory body for alcohol promotion and tax alcohol appropriately.

**4**

### **Reduce opening hours.**

There is a considerable body of evidence to show that reducing the trading hours of licensed venues and limiting the density of outlets can reduce alcohol-related harm.