The association between witnessed and experienced harm and alcohol consumption amongst students at a large Western Australian University

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The Issue
Young Australian university students have been found to consume more alcohol than their non-student peers. They have also been found to experience and witness a range of short-term alcohol-related harms. This includes harm experienced during or immediately after a drinking session; e.g. as a result of traffic crashes, violence, or unprotected sexual activity.

Australian culture facilitates alcohol consumption, particularly drinking culture in Australian universities, which encourages high levels of alcohol consumption. Often drinkers also experience (second-hand) and witness harm as a result of other people’s drinking, this has been found to occur more for drinkers than non-drinkers.

Methods
- Random cross-sectional sample (N = 2646) of 18-24 yo university students at large WA university (60% female, relatively even distribution of ages and faculties)
- Participants completed online survey

Instrumentation
- Alcohol Use Disorders Identification Test-Consumption Subscale (AUDIT-C)
- Alcohol Problems Scale
- A new scale measuring witnessed harm

Data Analysis
- Principal Components Analysis (PCA) was used to categorise the harm items of the Alcohol Problems Scale
- T-tests and regression were also used to explore differences among groups

Results
Of those students that provided a valid AUDIT-C score the majority reported low-risk consumption (87.5%).

Experienced and witnessed harm
- 70.5% reported having experienced at least two of the 17 harms at least once
- 31% reported having experienced more than five harms at least once
- Students reporting high-risk consumption were significantly more likely than students reporting low-risk consumption to:
  - Experience each harm factor (see Table 1)
  - Experience each harm item (except for sexual assault) due to other students drinking
  - Witness each harm item due to other students drinking

PCA revealed 3 categories of alcohol-related harm:

| Criminal and Aggressive Behaviour |
| Health and Emotional Harms |
| Sexual Harm |

Table 1. Comparison of factor scores between low and high risk consumption

<table>
<thead>
<tr>
<th></th>
<th>Low Consumption Mean (SD)</th>
<th>High Consumption Mean (SD)</th>
<th>P Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Criminal and Aggressive Behaviour</td>
<td>.35 (.937)</td>
<td>1.22 (1.588)</td>
<td>.000*</td>
</tr>
<tr>
<td>Health and Emotional Harm</td>
<td>2.12 (1.584)</td>
<td>3.51 (1.330)</td>
<td>.000*</td>
</tr>
<tr>
<td>Sexual Harm</td>
<td>.37 (.755)</td>
<td>1.00 (.977)</td>
<td>.000*</td>
</tr>
</tbody>
</table>

Conclusions and Recommendations
University students aged 18-24 who drink, both at high and low consumption levels experience a lot of short-term, alcohol-related harm. This supports past research.

The categorisation of harm into factors is a novel approach to exploring harm and will assist in future research and intervention design by:
- Providing a unique method of evaluating harms
- Enabling greater insight into different groups’ experience of harm
- Allowing for a more informed approach when developing interventions that target alcohol related harms

Interventions addressing alcohol consumption and related harm in young university students need to be comprehensive and target low and high risk drinkers.