

# AOD use and the aviation workplace:



BY DONNA BULL

**D**uring the past few years in Australia there has been mounting interest in the relationship between alcohol and other drugs (AOD) use and the workplace, and the impact one has on the other. This has prompted the development of a variety of resources, conference streams, and the release of several publications on the topic.

Research shows that not only can an individual's AOD use be the cause of workplace accidents and lost productivity, but AOD use can also be the result of bad job design and a poor working environment. Just as we know that there are risk and protective factors for AOD problems in the wider Australian population, we know that there are risk and protective factors related to the workplace.

For instance, there is sound evidence that individuals who are engaged in shift-work, or who spend nights away from home, are at greater risk of developing problem AOD use behaviour.

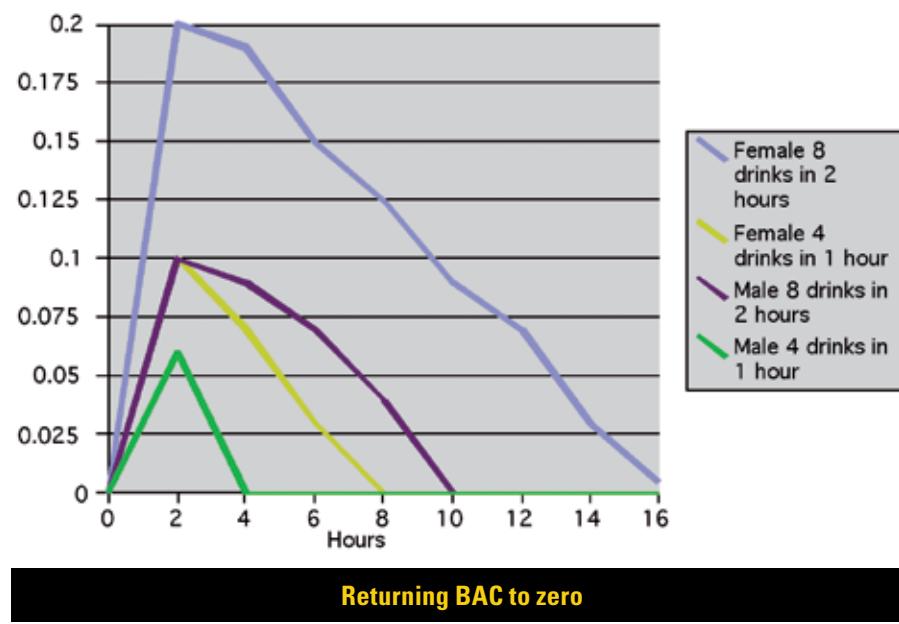
Most existing research examines the relationship between alcohol and work, as alcohol is the most commonly used drug and the principal drug of concern

in the workplace. There is a smaller body of evidence on cannabis and work, and a very small amount relating to amphetamines and other drugs and work.

Many working Australians use AOD – there are significantly more people in the paid workforce who use licit and illicit drugs than people out of the workforce. Sometimes factors related

to the consumption of AOD can have a negative impact on workplace productivity and safety.

In Australia in 2001, there were almost 3 million working days lost due to alcohol-related absenteeism, at a cost of almost \$5 billion. Approximately one in six workplace accidents may be associated with alcohol use, and alcohol is



Source: Centre for Accident Research and Road Safety, Queensland University of Technology.

implicated in one in 20 Australian workplace deaths.

In workplaces where AOD use is a problem, there is a clear association with negative work-related behaviours, and staff report experiencing higher levels of abuse and intimidation. In 2004, one in five Australians reported that they had been put in a state of fear – or experienced abuse – from an intoxicated person in the workplace. More than 75 per cent of these incidents were attributable to alcohol.

Minimising AOD problems in the aviation workplace is the primary aim of the CASA AOD project. Find out more about the project at [www.casa.gov.au/newrules/special/drugtesting/answers.htm](http://www.casa.gov.au/newrules/special/drugtesting/answers.htm)

### How long until I'm fit for work?

The chart (below left) demonstrates how long it takes for alcohol to be eliminated from the body, taking into account the different elimination rates for men and women, the number of drinks, and the time over which drinking occurs.

The calculations refer to standard drinks. A standard drink is any drink containing 10 grams of alcohol. One standard drink always contains the same amount of alcohol regardless of container size or alcohol type (i.e. beer, wine, or spirit).

Examples of typical drinks, expressed as standard drinks are:

- One can or stubby (375 ml) mid-strength beer = 1 standard drink
- One can or stubby (375 ml) full-strength beer = 1.5 standard drinks
- One can or stubby (375 ml) low-strength beer = 0.8 standard drink
- One average glass (180 ml) of wine = 1.8 standard drinks
- One nip (30 ml) of spirits = 1 standard drink
- One can (375 ml) of pre-mixed spirits = 1.5–2.5 standard drinks

### Prescription drugs and over-the-counter medications

Work safety and performance can be affected by the use of prescription drugs and over-the-counter (OTC) medications due to the effect these substances have on

# How risky is your drinking?

The most widely used screen for alcohol use in Australia is AUDIT (Alcohol Use Disorders Identification Test). AUDIT is used consistently by Australian health professionals to assist in deciding on appropriate treatment options for individuals using alcohol in excess of low-risk levels. You can complete AUDIT below to work out your level of risk.

AUDIT was developed and validated by the World Health Organization (1989).

|   |                          |  |                          |
|---|--------------------------|--|--------------------------|
| 1. How often do you have a drink containing alcohol?  | <input type="checkbox"/> | 6. How often during the last year have you needed a first drink in the morning to get yourself going after a heavy drinking session? | <input type="checkbox"/> |
| (0) Never [Skip to Qs 9-10]<br>(1) Monthly or less<br>(2) 2 to 4 times a month<br>(3) 2 to 3 times a week<br>(4) 4 or more times a week |                          | (0) Never<br>(1) Less than monthly<br>(2) Monthly<br>(3) Weekly<br>(4) Daily or almost daily   |                          |
| 2. How many drinks containing alcohol do you have on a typical day when you are drinking?   | <input type="checkbox"/> | 7. How often during the last year have you had a feeling of guilt or remorse after drinking?   | <input type="checkbox"/> |
| (0) 1 or 2<br>(1) 3 or 4<br>(2) 5 or 6<br>(3) 7, 8, or 9<br>(4) 10 or more  |                          | (0) Never<br>(1) Less than monthly<br>(2) Monthly<br>(3) Weekly<br>(4) Daily or almost daily   |                          |
| 3. How often do you have six or more drinks on one occasion?  | <input type="checkbox"/> | 8. How often during the last year have you been unable to remember what happened the night before because you had been drinking?     | <input type="checkbox"/> |
| (0) Never<br>(1) Less than monthly<br>(2) Monthly<br>(3) Weekly<br>(4) Daily or almost daily  |                          | (0) Never<br>(1) Less than monthly<br>(2) Monthly<br>(3) Weekly<br>(4) Daily or almost daily   |                          |
| Skip to Questions 9 and 10 if Total Score for Questions 2 and 3 = 0   |                          |  |                          |
| 4. How often during the last year have you found that you were not able to stop drinking once you had started?                          | <input type="checkbox"/> | 9. Have you or someone else been injured as a result of your drinking?   | <input type="checkbox"/> |
| (0) Never<br>(1) Less than monthly<br>(2) Monthly<br>(3) Weekly<br>(4) Daily or almost daily  |                          | (0) No<br>(2) Yes, but not in the last year<br>(4) Yes, during the last year   |                          |
| 5. How often during the last year have you failed to do what was normally expected from you because of drinking?                        | <input type="checkbox"/> | 10. Has a relative or friend or a doctor or another health worker been concerned about your drinking or suggested you cut down?      | <input type="checkbox"/> |
| (0) Never<br>(1) Less than monthly<br>(2) Monthly<br>(3) Weekly<br>(4) Daily or almost daily  |                          | (0) No<br>(2) Yes, but not in the last year<br>(4) Yes, during the last year   |                          |
| Record total of specific items here <input type="checkbox"/>  |                          |  |                          |
| <i>If total is greater than recommended cut-off, consult User's Manual.</i>   |                          |  |                          |

### How to score your AUDIT result:

Questions 1-8 are scored 0, 1, 2, 3, or 4.

Questions 9 and 10 are scored 0, 2, or 4 only

If your score is 0-7, **congratulations** – your alcohol consumption is low-risk. If you scored 8 or more you are drinking in excess of low-risk levels and might benefit from speaking to your GP or other health professional about ways to cut down your drinking.

the body, even when used as directed by the doctor or pharmacist.

Some prescription and OTC preparations reduce alertness and can impair coordination and reaction times. Others, particularly cough and cold medications, can induce drowsiness or distort the user's sense of time and space.

Generally, potential side-effects are described in warnings printed on the packet. The effects of prescription drugs and OTC medications can become unpredictable when combined with alcohol.

The CASA AOD testing program will not test for prescription drugs or OTC medications. Some OTC or prescribed products may show up on a drug test. This is called a false-positive because it is a substance other than the targeted substance that is indicated.

The rate of cross reactions of this nature in drug testing is very low, and occurs where a substance mimics the targeted substance in the initial on-site test. When testing for drugs, appropriate confirmatory testing will always be conducted to safeguard against false-positives and to ensure that personal health information is protected.

Prescribed and OTC substances such as anti-hypertensives, sildenafil, anti-anxiety and/or anti-depressant medications, the contraceptive pill, HIV/AIDS

medications, hepatitis C medications, and anti-inflammatory medications are among substances that will not be revealed through CASA AOD testing procedures.

For reliable information regarding the potential effects of medication you are taking, consult your doctor or pharmacist.

### **AOD research and information providers**

The following organisations are recommended for the accuracy and currency of information they provide:

#### **The Australian Drug Foundation**

ADF is a major Australian non-government organisation, established in 1959. The ADF prevention agenda is delivered on a platform of harm minimisation, encompassing a continuum of comprehensive prevention strategies, from abstinence to the management of severe and chronic drug misuse.

Phone: 03 9278 8100

web: [www.adf.org.au](http://www.adf.org.au)

#### **Turning Point Alcohol and Drug Centre**

The centre was established in 1994, and is regarded as a leading provider of services in the AOD sector. Turning Point also has a strong research agenda. Turning Point is formally affiliated with St Vincent's Hospital Melbourne and the University of Melbourne.

The centre is part of the International

Network of Drug Treatment and Rehabilitation Resource Centres for The United Nations Office of Drugs and Crime (UNODC) and is a member of the International Harm Reduction Association. The centre is also a registered training organisation and an accredited higher education provider.

Phone: 03 8413 8413

Web: [www.turningpoint.org.au](http://www.turningpoint.org.au)

#### **National Drug and Alcohol Research Centre**

NDARC opened in 1987 at the University of NSW. It is funded by the Australian Government as part of the National Drug Strategy. NDARC's mission is to conduct high-quality research and related activities that increase the effectiveness of Australian and international treatment, and other intervention responses to AOD-related harm.

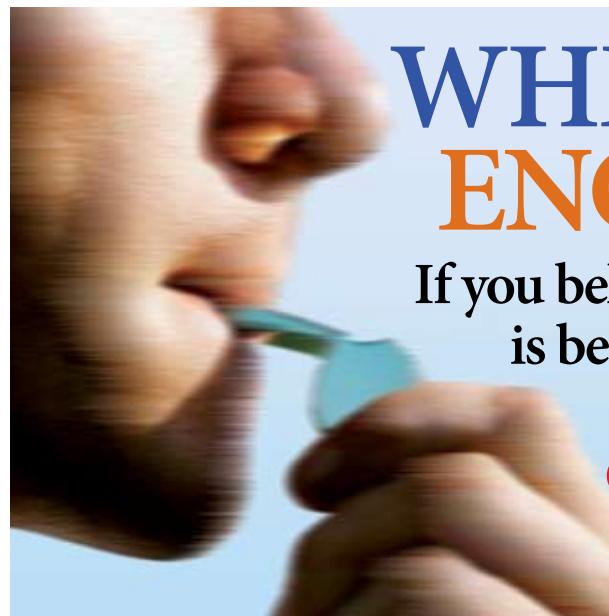
Phone: 02 9385 0333

web: [www.ndarc.med.unsw.edu.au](http://www.ndarc.med.unsw.edu.au)

In addition to the agencies mentioned above, each state and territory has an AOD information telephone service. Many operate 24 hours, and offer a free-call number for people living in regional areas.

Check the community pages of your local telephone directory under alcohol and drug information service (ADIS). ▀

– *Donna Bull is a specialist technical advisor on alcohol and other drugs.*



# WHEN ENOUGH'S ENOUGH...

If you believe the safety of an operation is being compromised

**CALL THE CASA HOTLINE**  
**1800 074 737**