Alcohol means someone who really addicted with the alcohol physically and use to drink regularly, and suffering with various health problems physically, mentally and socially. As well as it destroys the family relationship and the workplace liability. (Pumbed Health, 2011).

 The people who are drinking in social ceremonies or in other activities thought that alcohol is very mandatory for all the occasion. In these people drinking is differentiated into two types: they are moderate drinking and standard drinking. In moderate drinking, the men consume up to two drinks per day and in female’s only one drink per day. In standard drinking men and women usually consume beer and wine or 1.5 ounces of distilled water. (Icon Health, 2005).

 In South Australia indigenous Australians are mainly creating problem because they are the inhabitants of Australia. In Australia aborigines are in 2.6 percentage of Australian population. In aborigines health problem is mainly occurring due to the excessive intake of alcohol which leads to several problems such as alcohol abuse. (Australian Indigenous Health, 2010).

 In Australia the disease caused by the alcohol is doubled in indigenous than that of the common Australian population (Vos, Barker, Stanley & Lopez, 2007).

 Alcohol abuse is mainly varies from alcoholism but it does not contain tremendous strong passion for alcohol, full loss of control while drinking and physical reliability (Icon Health, 2005). Alcohol abuse is also defined as the different prototype of drinking which tends to one or more circumstances in a period of 12 month.

 The patterns of drinking are following:-

* While drinking, an individual will fail to complete his work, studies and home accountability.
* Sometime drinking really affects the situations while the person is at on duty. For example, when a person drinks and drives the car leads to accident.
* Recurrent drinking makes problems in the constant family relationship which is occurring due to the excessive drinking.

 In 2010, Drug and Alcohol Services South Australia (DASSA) depicts that in each year 15300 south Australians are endangered by the people who are drunk too much. The reason behind the threatening in every week over around 92000 south Australians drink at destructive level.

 The better half of the aborigines are more aware about the price of the alcohol and among them in some communities they won’t use wrongly the habit of drinking because they are more aware about the improper use of alcohol (Australian Indigenous Health, 2010).

 In South Australia, the consumption of alcohol is very high, more over that, the non- indigenous Australians (82%) are consume more alcohol than indigenous Australians (71%) (Australian Institute of Health and Welfare (AIHW), 2007).

In the year 2003, the Australia was at the 22nd position when compared to the other countries for the consumption of alcohol and in each person they are consuming pure alcohol which is equivalent to 7.2 liters approximately (AIHW, 2007).

 In Australia, the approximate drinking pattern and prevalence was taken from National Drug Strategy House hold Survey (NDSHS) every three year AIHW(2008) and NDSHS findings from 2007 propose that the current pattern of drinking alcohol are very same to the previous report in the year between 1998 to 2011.

The drinking habit of alcohol was clearly differentiated by age group and sex. It is common between the ages of 14 to 60 years. In 2004, the daily drinkers was evidently increased with the age which is varying less than one percentage of 14 to 19 years and 17 percentage of age over 60 years. (AIHW, 2007).

 In the year 2004, the graph shows the highest percentage of people consuming alcohol was between the ages of 40 to 49 years. The following statuses are given in percentage.

 **Age group**

**Alcohol drinking status 14–19 20–29 30–39 40–49 50–59 60+ All**

 **Males**

Daily 0.7 4.5 8.7 11.9 17.5 23.3 12.0

Weekly 26.6 56.7 55.0 54.2 47.0 38.7 47.6

Less than weekly 42.2 30.9 27.3 25.4 25.0 20.7 27.5

Ex- drinker 2.6 3.0 5.1 5.6 6.8 1 0.7 6.0

Never a full serve of alcohol 27.7 4.9 3.8 3.0 3.7 6.6 6.9

 **Females**

Daily 0.4 1.3 3.2 6.3 8.4 11.4 5.8

Weekly 22.2 38.4 38.9 43.0 35.6 28.3 35.0

Less than weekly 49.9 47.0 44.8 36.9 36.5 28.7 39.4

Ex- drinker 2.5 6.8 6.4 7.0 9.2 13.4 8.2

Never a full serve of alcohol 25.0 6.6 6.6 6.8 10.3 18.2 11.6

 **Persons**

Daily 0.6 2.9 6.0 9.1 12.9 17.0 8.9

Weekly 24.4 47.6 46.9 48.6 41.3 33.1 41.2

Less than weekly 46.0 38.9 36.2 31.2 30.8 25.0 33.5

Ex- drinker 2.6 4.9 5.8 6.3 8.0 12.2 7.1

Never a full serve of alcohol 26.4 5.7 5.2 4.9 7.0 12.8 9.3

Table. 1

 Source: NDSHS (2004)

 In South Australia, the people aged 14 years and above were drunken alcohol as per the quantity rate of 72.6 percentages and it is considered as low risk to health. At the same time, the 17.1 percentage of people are abstainers.

 The National Drug and Strategy House Hold Survey states that the population aged 14 and above had drunken alcohol in least to one full serve in last two months (AIHW, 2008).

Here the NDSHS shows the comparison of population of Australia and South Australia.



Figure: 2

 Source: NDSHS (2008)

 In 2004, 9% of Australians drunk daily and 41% drunk in a week, at the same time 34% of them drank less than in a weak. It stayed as same and not changed in between the year of 1991 to 2004. National statistics describes that the extreme drinking among aboriginal people is in the age between 25 to 34 years but the danger drinking is common between 14 to 24 years. (Vos et al, 2007)

 In 2004 the Australians consume alcohol with a level of risky and high risky whereas short-term was at 10%. In risky and high risky drinking the males drink alcohol daily at 12% and in weekly at 48% whereas in females they consume 6% of alcohol at daily basis and weekly at 35%. The 20% of aboriginal people consume alcohol at a risky level of long term harm. (AIHW, 2007).

 In case of men, they preferably begin the habit of drinking at the stage of younger than the women. In men it starts in between the age of 16 to 18 years. Consumption of alcohol causes extensive disasters like alcohol abuse, alcohol misuse and aggression which have been lead to several health problems. The vulnerability of female have both acute and chronic outcome of alcohol abuse. When it compared to males, women have the highest.

 In the below table it shows that females are less interested than males to be non drinkers, but in the long term harm males are extra interest than females to drink alcohol. The table represents the risk of long term harm which aged 14 years and above in gender.

 *Abstinent % Low risk % Risky % High risk %*

 *2001 (2007)*   *2001 (2007) 2001 (2007) 2001 (2007)*

Males 14.1 (14.0) 75.6 (75.8) 6.7 (6.2) 3.5 (3.9)

Females 20.8 (20.1) 69.8 (69.4) 7.2 (7.6) 2.2 (2.8)

Persons 17.5 (17.1) 72.7 (72.6) 7.0 (6.9) 2.9 (3.4)

 Figure: 3

Source: AIHW (2005)

 In Australia alcohol and drug problems are the main two causes of burden of disease (Duckett, 2007).

There are several factors contributing to the determinants of health:-

First of all society is the major environmental factor of the effects of alcohol abuse. Alcohol drinking in society is mainly encouraged through different ways such as:-

* Through movies, videos and music people are entertained in drinking and it leads to change in the individual’s behavior.
* Through sports figures such as cricket stars, film stars are imitating the drinking skill in front of the people and people try to follow them.
* Lack of negative consequences encourages the drinkers to be involved in the drinking activity.
* Studies have shown that the beverages put more offers on alcohol and it really available cheap in the market. Mainly underage people more consuming the alcohol. This offer increases the chance of binge drinking among individuals and it increases the chance for the alcohol abuse.

 DAASS (2010) states that there are both short term and long term effects of changes in each individual.

 Each effect depends upon the social behaviors:-

* The variety and amount of alcohol intake by an individual.
* Age, body weight and sexual category.
* Body language.
* The food which contained in the stomach.
* An individual’s drinking familiarity.
* The place in which drinking take place.

 The short term effect of social behavior differs in each individual and it has a relation with the concentration of alcohol contained in ones blood and it is called blood alcohol concentration (BAC).

 In a person of average build, standard drink raises the BAC up to 0.01 percentages to 0.03 percentages in an hour. There are many stages in the behavior. They are :

1. Feeling of well being

 In this blood alcohol concentration was up to .05 g percentage and the likely effect is talkative, relaxed and more confident

1. A person who were At-risk

 In this the blood alcohol concentration was from .05 to .08 g percentage and the likely effects are acts and feels, self confident, judgment and movement, inhibitions reduced.

1. Stages in death

 In this the blood alcohol concentration is over .30 g percentage and the likely effects are coma and death.

 Drug and Alcohol Services South Australia states that Long term effect of an individual causes several health problems due to the excessive intake of alcohol. The health problems are:-

* High blood pressure and stroke
* Damage In liver
* Cancerous growth in digestive system
* Sexual impotence and reduced fertility
* Increasing risk of breast cancer in females
* Problem in memory status

 The effect of alcohol abuse goes beyond accidents and injuries to a range of adverse social consequences. The consequence include harm to the family members, children, friends, work mates and as well as the strangers. Concerns to the community that are associated with alcohol use include noise, litter, offensive behavior, vandalism, aggression, petty crime, and assault and road safety issues. Many of the consequences can result in affront, violence or injury to others. (National Health and Research Council, 2010).

 The National Drug Strategy Survey found that, the Australian Community spends about 15.3billion dollars between the year 2004 to 2005 and the factors such as crime and violence, treatment costs, loss of premature death were taken into account. (AIHW, 2002).

 In South Australia, between the year of 2002 to 2006 and there were about 304 deaths of indigenous Australians due to heavy consumption of alcohol. Almost 4% of people die in the different part of state and territories because of alcohol use.

Indigenous males were died more than seven times of the non indigenous males at the same time indigenous females it is twelve times than the non indigenous. From 1997 to 2003 around 37 percentage people had potentially lost their life due to the excessive intake of alcohol and the total number of people committed suicide from 1997 to 2007 is 3.09 percentages. (Australian Bureau of Statistics (ABS), 2007).

 Between the year of 2002 to 2003 and 2006 to 2007 there was 7542 general encounters with in the aboriginal patients which are evidenced 11219 health problems and solved 7% and these problems was due to the alcohol abuse. On the other hand indigenous Australians died due to the problem of mental and behavior disorder by drinking the alcohol and it was 10 times more than when it compared to non indigenous Australians. (Bettering the Evaluation and the Care of Health (BEACH), 2009).

 Around 212 deaths were noticed among indigenous people due to cirrhosis of liver, which is caused by excessive intake of alcohol.

 Australian Indigenous Health Review states that the higher rates of alcohol consumption among indigenous Australians cause several disease and injury and it is correlated with hospital admissions towards the population. (AIHR, 2010).

There are several disease conditions due to the excessive intake of alcohol:-

* Cardiovascular diseases

 In males -4.5 %

 In females -3.3 %

* Hypertensive diseases

 In males -4.2 %

 In female -5.6 %

* Transport accidents

 In males -1.2 %

 In females -1.3 %

* Organic mental disorders

 In males -2.4 %

 In females -2.3 %

 Alcohol misuse is also interconnected with social disruption, family issues and child abuse.

 There are many risk factors due to the excessive consumption of alcohol. There is a threefold increase of injury for males and eight fold injuries in females. The risk of injury is mainly in age between 14 to 24 years. Alcohol associated risks are with:

* 44 % of injuries
* 34 % of falls and drowning
* 30 % of car accidents
* 47 % of assaults
* 34 % of homicides
* 32 % of suicides
* 10 % of child abuse
* 7% of industrial machine accident. (Australian Government Department of Veterans Affairs State, 2007)

Precisely, the alcohol consumption is inter-connected with the physiological conditions of a person. They are:-

1. Cardiovascular Diseases: - Such as blood pressure, sudden cardiac failure, hemorrhogenic stroke.
2. Cancerous: - Alcohol affects the oral cavity, pharynx and larynx because it is carcinogenic.
3. Diabetes: - Alcohol mainly affects the management of diabetes in number of days and it also affects the insulin sensitivity.
4. Risk to unborn babies: - Alcohol enters the blood streams of the fetus, when the mother drinks alcohol and also affects the growth and development of the baby. (Australian Government National Health and Medical Research Council(AGNHMRC), 2011

 In national level the Australian government has taken many actions to prevent alcohol abuse, which results in traffic accidents and assaults. Based on these problem government had taken cut down the hours and days and sales of alcohol, which helps to reduce the problem up to certain level and the other measure taken by government is counter balancing changes at the weeks. (Holder, 2010).

The state government of South Australia has taken the responsibilities for each individual’s health. South Australian government has established many programs in South Adelaide to prevent alcohol.

 CLEAN NEEDLE PROGRAM

 This program promotes each people to get rid of the blood borne viruses and alcohol drug use. This program is well organized and effective to the people.

 DRIVE ASSESMENT CLINIC

 This is a South Australian government organized program. It comes under the section of 47J road traffic accident law 1961. Through this law the criminal have been charged while driving the vehicle with the consumption of alcohol. This law has been referred from register of motor vehicles under section 80 in motor vehicles act 1959. (DAASA, 2011)

 There are many interventions had taken in local level, especially in the inner city and in metropolitan areas the government had contributed several program such as:-

1.ABORGINAL SUBSTANCE MISUSE CONNECTION PROOGRAM: -

 The program implements their services to aboriginal clients in Byron place community centre and Hutt street centre. The successes full part of this program is the aborigines were seeking the availability of ASMCP customer services. The program criteria accept only on aboriginal people those who related with problem facing in alcohol and homelessness.

1. ANAGU PITJANTJATJARA HANDS ( APY LANDS ) SUBSTANCE MISUSE: -

 This program is mainly focusing on anagu people who live in APY lands. This program was put forwarded in 2010 due to excessive misuse of alcohol among the anagu people. The associated programs are:-

* A transitional residential care program
* Assertive mobile on trend program
* Diversionary or Day Program (Amata)

 3.DAY CENTRE – PORT AUGUSTA :-

 This service implemented a variety of treatment towards aboriginal people who comes from the outer areas of port Augusta. The main aim of this program is to prevent the misuse of alcohol among aborigines.

To sum up, alcoholism in people is the major threat found all over the Australia. Even though it outputs several disadvantages which lead to health problems physically, mentally and socially. Through the continuous consumption of alcohol in Australia the rate of mortality and morbidity level increased. So government and health care professionals must take necessary remedies to prevent harmful drinking. By conducting awareness programs the government can reduce the alcohol drinking level up to some extends. But the preventive task taken by government is failed.

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