

Types of alcohol consumed by adults on last occasion: 2014/15 ABAS

Background

The type of alcohol consumed on typical drinking occasions varies by the drinkers' sex, age and ethnicity (Ministry of Health, 2015). Those who drink at harmful levels have different preferences for the type of alcohol and the price of alcohol purchased compared to other types of drinkers, such as low-risk drinkers (Ministry of Justice, 2014). The Health Promotion Agency (HPA) Attitudes and Behaviour towards Alcohol Survey (ABAS) monitors behaviour and attitudes towards alcohol, focusing on use within the last month and the last drinking occasion. This fact sheet reports the types of alcohol consumed by adults (18-years and over) on their last drinking occasion involving two or more alcoholic drinks.

Methodology

Respondents to the 2014/15 ABAS were asked about the last occasion they had two or more alcoholic drinks and the type(s) of alcoholic drinks they had consumed on this occasion. The types of alcohol consumed were grouped into seven categories; wine, beer, spirits, ready-to-drinks/pre-mix drinks (RTDs), cider, liqueurs, and port/sherry. The analysis was restricted to adult respondents (18-years and over) whose last drinking occasion was within the last three months (n=2,117). Alcohol type was examined by gender, age group and ethnicity. Only statistically significant differences ($p < .05$) between groups are reported.

Last drinking occasion (two or more alcoholic drinks)

Of the adult respondents who reported having two or more alcoholic drinks on their last drinking occasion within the last three months, 56% (54-58%)¹ reported doing so within the last week, 30% (27-32%) within one week to one month, and 15% (13-16%) within one to three months.

Alcohol type(s) consumed on the last drinking occasion

On their last drinking occasion, 69% (67-71%) of respondents had consumed one type of alcoholic drink, 23% (21-25%) consumed two types of alcohol, 5% (4-6%) consumed three types of alcohol, and 3% (2-4%) consumed four types of alcohol.

When asked what they had consumed on the last drinking occasion, 52% (50-54%) said they had drunk wine and 42% (40-44%) had drunk beer (see Figure 1). The next most common types of alcoholic drink consumed were spirits (25%, 23-27%), RTDs (10%, 9-11%) and cider (8%, 7-10%). Smaller proportions reported drinking liqueurs (4%, 3-5%) or fortified wines, such as port or sherry (1%, 0-2%).

The type of alcohol consumed on the last drinking occasion varied by gender, age group, and ethnicity². Figure 1 provides an overall breakdown by gender and Figures 2 and 3 provide more detail on the type of

¹ A range when provided refers to the 95% confidence interval around the proportion estimate. In this example, the proportion estimate is 56% and the confidence interval is 54-58%.

² Analysis was not conducted on liqueurs or fortified wine (such as port or sherry) due to small numbers.

alcohol consumed on the last drinking occasion by gender and age. Overall:

- Males (66%) were more likely than females (19%) to have consumed beer, and males (34%) were less likely than females (69%) to have consumed wine, after controlling for age and ethnicity.
- 18 to 24-year-olds have different drink preferences to other age groups. After controlling for gender and ethnicity, they were:
 - less likely (23%) to drink wine compared with other age groups: 25 to 44 (44%), 45 to 64 (59%) and 65+ year-olds (67%).
 - more likely (52%) to drink beer compared with other age groups: 45 to 64 (39%) and 65+ year-olds (32%). In addition, 25 to 44-year-olds (47%) were also more likely to drink beer than 45 to 64-year-olds or older age groups.
 - more likely (51%) to drink spirits compared with other age groups: 25 to 44 (30%), 45 to 64 (19%) and 65+ year-olds (18%).
 - more likely (33%) to drink RTDs compared with other age groups: 25 to 44 (12%), 45 to 64 (6%) and 65+ year-olds (2%).
 - more likely (22%) to drink cider compared with other age groups: 25 to 44 (11%), 45 to 64 (5%) and 65+ year-olds (2%).
- For ethnicity, after controlling for gender and age:
 - European/Other (55%) and Asian (58%) people were more likely to have consumed wine than Māori (37%) or Pacific (28%) people.
 - Māori (51%) were more likely to have consumed beer than European/Other (39%).
 - Pacific (40%) people were more likely to have consumed spirits than European/Other (22%).

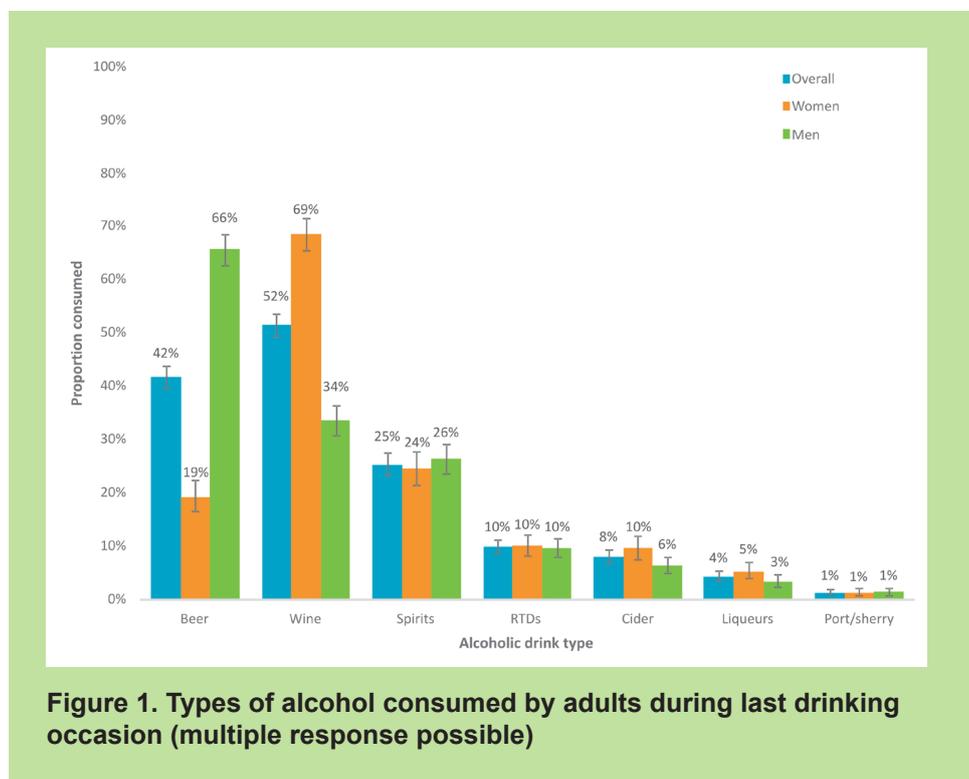


Figure 1. Types of alcohol consumed by adults during last drinking occasion (multiple response possible)

- Māori (19%) and Pacific (30%) people were more likely to have consumed RTDs than European/Other (8%) and Asian (5%)³ people.

Key points

- On the last drinking occasion, 69% of respondents had consumed only one type of alcoholic drink, and 23% reported consuming two types of alcoholic drink.
- Wine (52%) and beer (42%) were the two most commonly consumed alcoholic drinks on the last drinking occasion. However, there were differences by gender, age and ethnicity. For example:
 - Beer was more likely to be consumed by males, and wine by females.
 - 18 to 24-year-olds were more likely to consume spirits and RTDs, and less likely to consume wine than other age groups.
 - Consumption of wine increased and spirits decreased from younger to older age groups.

³ Caution should be exercised when interpreting this estimate as the relative standard error (RSE) of the estimate is 44.8%.

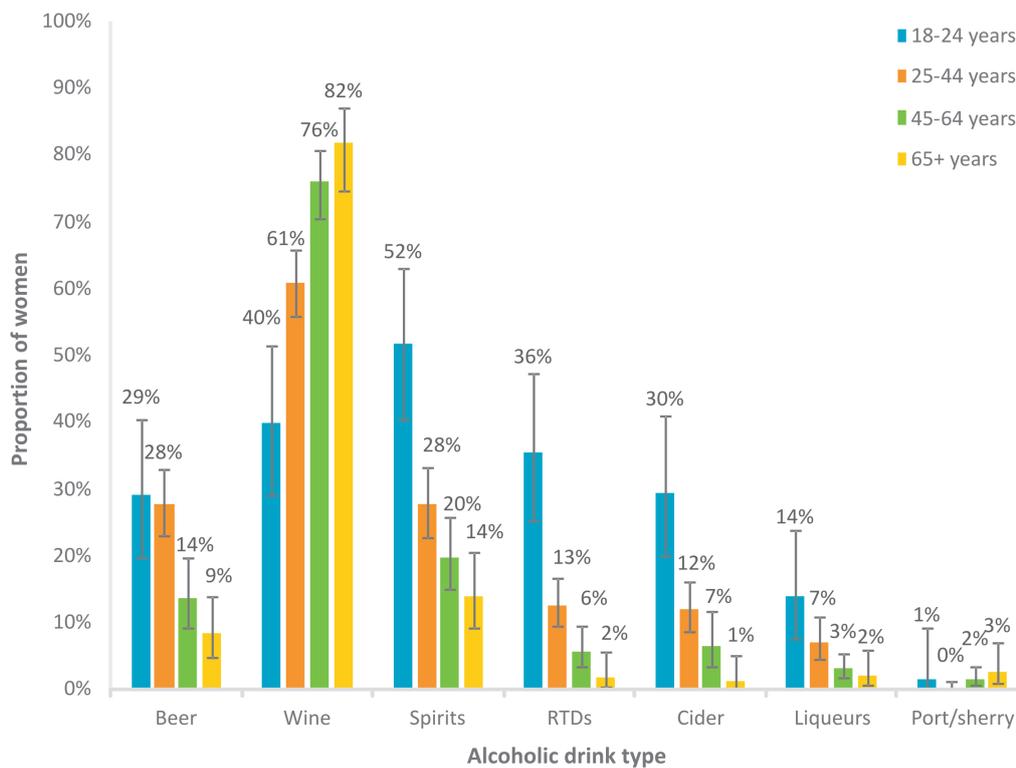


Figure 2. Type of alcoholic drinks consumed by women by age group during last drinking occasion (multiple response possible)

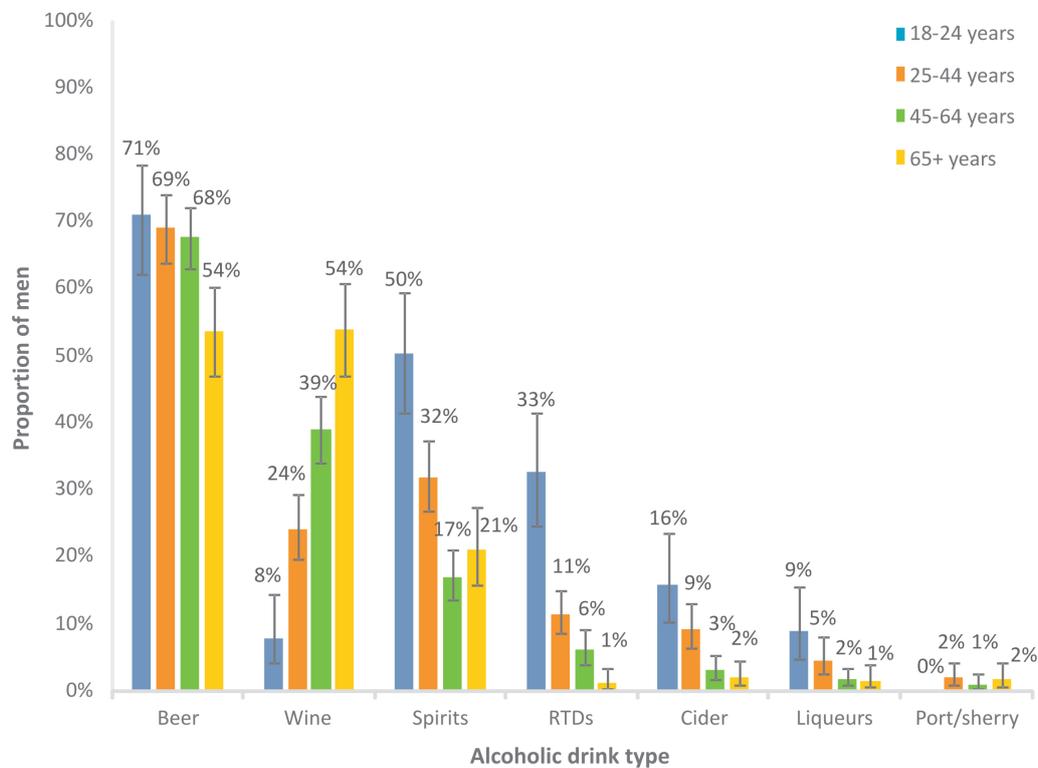


Figure 3. Type of alcoholic drinks consumed by men by age group during last drinking occasion (multiple response possible)

About the Attitudes and Behaviour towards Alcohol Survey

- The ABAS is a nationwide telephone survey conducted annually. The survey focuses on behaviour related to the previous month and last drinking occasion, and a range of attitudes/opinions towards alcohol. The 2014/15 ABAS consisted of a sample of 4,005 New Zealanders aged 15-years and over. The survey was conducted between November 2014 and February 2015.
- The main sample, with a response rate of 21%, included 610 Māori, 215 Pacific people, 316 Asian people and 2,864 people of European or other ethnicities (prioritised ethnicity).
- The data have been adjusted (weighted) to ensure they are representative of the New Zealand population.
- For this analysis, proportions and 95% confidence intervals were produced. Odds ratios were used to compare responses between groups. The significance level used for statistical analyses was set to $\alpha=0.05$.
- Comparison groups for these analyses were as follows:
 - Gender (male compared with female).
 - Age (comparisons between 18 to 24, 25 to 44, 45 to 64, 65+ years).
 - Ethnicity (comparisons between European/ Other, Māori, Pacific and Asian).
- A full description of the 2014/15 ABAS survey methodology and further ABAS publications can be found online at <http://www.hpa.org.nz/research-library/research-publications>.

References

Ministry of Health. (2015). *Alcohol use 2012-2013: New Zealand Health Survey*. Wellington: Ministry of Health.

Ministry of Justice. (2014). *The effectiveness of alcohol pricing policies: Reducing harmful alcohol consumption and alcohol-related harm. Appendix 1 – The New Zealand alcohol market*. Wellington: Ministry of Justice.

Citation

Gordon, C. (2016). *Types of alcohol consumed by adults on last occasion: 2014/15 ABAS. [In Fact Volume 5 Issue 3]*. Wellington: Health Promotion Agency Research and Evaluation Unit.

About the HPA

HPA is a Crown entity that leads and delivers innovative, high quality and cost-effective programmes and activities that promote health, wellbeing and healthy lifestyles, prevent disease, illness and injury. HPA enables environments that support health and wellbeing and healthy lifestyles, and reduce personal, social and economic harm. HPA also undertakes functions specific to providing advice and research on alcohol issues.

Research and Evaluation Unit

Health Promotion Agency, PO Box 2142, Wellington 6140, New Zealand

<http://www.hpa.org.nz/research-library/research-publications>

research@hpa.org.nz

March 2016

ISSN 2350-2991

