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UNIVERSITY OF TECHNOLOGY

### National Drug Research Institute

Preventing harmful drug use in Australia

Comment on

**Dollars Made From** 

Broken Spirits

Formerly National Centre for Research into the Prevention of Drug Abuse



#### **National Drug Research Institute Curtin University of Technology**

## Comment on Dollars made from Broken Spirits

A report prepared for Central Australian Aboriginal Congress and Tangentyere Council

**Dennis Gray** 

15th September 2000

#### Copies of this report can be obtained from:

The Administrative Assistant
National Drug Research Institute
Curtin University of Technology
GPO Box U1987
PERTH WA 6845

Telephone: (08) 9266 1600 Facsimile: (08) 9266 1611

Email: enquiries@ndri.curtin.edu.au

Web: http://www.curtin.edu.au/curtin/centre/ndri

#### **Comment on**

#### Dollars Made from Broken Spirits<sup>1</sup>

Associate Professor Dennis Gray National Drug Research Institute Curtin University of Technology

#### 15th September 2000

This paper was prepared as the basis for discussion, with representatives of Central Australian Aboriginal Congress and Tangentyere Council, about criticisms which had been widely voiced regarding the *Dollars Made from Broken Spirits*. To anticipate what follows, it is clear that, in some regards, the authors of the report went beyond their brief and that there are some serious methodological problems with aspects of the report. However, despite these, the report is sufficiently robust to demonstrate that within the Alice Springs community the majority of people believe that alcohol represents a significant problem in the town, and that there is strong support for, at least, the following:

- increased restrictions on the availability of alcohol;
- controls on public consumption of alcohol; and
- responsible service of alcohol.

The Alice Alcohol Representative Committee (AARC) was established in 1999 to represent the broad range of community interests in matters relating to alcohol in Alice Springs. The AARC's terms of reference are to:

- represent the interests of the Alice Springs community in addressing alcohol-related harm;
- consult with a wide range of community interests and groups including overseeing an authoritative survey
  of community opinion on alcohol availability, preceded by a public education campaign;
- design a set of proposals, acceptable to the community, to reduce the level of alcohol consumption and alcohol-related harm in Alice Springs; and,
- present the proposals to the Liquor Commission by the end of June 2000.<sup>2</sup>

In furtherance of these terms of reference, the AARC determined that:

A survey of community opinions is required on the use and availability of alcohol in Alice Springs.<sup>3</sup>

Through the Alice Springs Town Council, the AARC called for tenders:

To conduct research (using both qualitative and quantitative measures) to establish the perceptions of a representative sample of Alice Springs residents on the consumption of alcohol and how best to encourage the minimisation of the consumption of alcohol at excessive levels.<sup>3</sup>

The contract to undertake the research was awarded to Hauritz and Associates. The research was undertaken between December 1999 and June 2000 and their report *Dollars Made from Broken Spirits* was released in July 2000. Since that time, the report has been the subject of some controversy and criticism. The purpose of this review is to address some of those criticisms and to identify what positive things can be taken from the report.

#### The criticisms

Since the release of the report, a number of criticisms have been made of it by various interested parties. These have been made in the NT Parliament, and in various public forums, and have been reported in the Alice Springs news media. The criticisms fall into two categories: general criticisms—some of which are not directly related to the report itself; and, those to do with technical aspects of the report. Among those in the first category are that:

- the report did not address broader issues and "...was proposing "very little" to help the problem drinker";
- restrictions such as those broached in the report are an infringement on free trade and
   ... would fly in the face of normal business objectives to improve and expand;<sup>4</sup>
- restrictions such as those supported in the study, were 'a failure in Tennant Creek';<sup>4</sup> and.
- the problems of alcohol misuse identified in the report were those of '... a sector of the population in Alice Springs who are essentially itinerants'. 5

#### In the second category are:

• the level of alcohol consumption in Alice Springs is over-stated, the report '... fails to take account of visitors from the vast Central Australian region, and from elsewhere' and is '... wrongly—based on liquor purchases in the town, as well as its population'; 4

- the survey sample was too small, '... 407 voices are deciding the town's future' and 'the report's findings are not representative of the community;
- '... the nature of the questions that were asked and the recommendations that followed those particular questions ... (were) unbalanced and unscientific'; and ,
- the language used in the report is emotive and 'there is a problem with the tone and the title'.<sup>8</sup>

In addition, some other issues related to data analysis and the interpretation of the results are raised in this review.

While the general criticisms are easily dealt with, it is important that the methodological criticisms are addressed in some detail because they have the potential to undermine the research project.

#### General criticisms

Criticisms that the report does not address the issues underlying excessive alcohol consumption in Central Australia are unfair. This is not what the research team was contracted to do. While there is a need to address the underlying issues, concern with them should not allow the focus to be shifted from issues of availability. There is ample research evidence from both Australia and overseas that the level of alcohol consumption is a consequence of both demand and supply, and an effective strategy to deal with alcohol misuse and its consequences must address both sets of factors. 9, 10

It has been claimed by some critics of the Hauritz report, that alcohol restrictions in Tennant Creek were a failure and that their introduction in Alice Springs would be futile. This view represents either a misunderstanding of the objectives of the Tennant Creek restrictions or a lack of knowledge of the facts. The objective of the restrictions in Tennant Creek was not to prohibit alcohol consumption, nor was it claimed that restrictions would be a solution to the problems of excessive alcohol consumption. It was intended that the restrictions would contribute to a reduction in consumption and related harm. They clearly did this. While there was an increase in consumption of fortified wines, this did not off-set

reductions in consumption of other beverages. Overall, in a two year period, there was a 20 per cent reduction in alcohol consumption. There were also significant reductions in alcohol-related hospital admissions and the proportion of offences committed on Thursdays (the day on which the restrictions on takeaway and front bar sales take greatest force). It has also been claimed that Tennant Creek residents believe that the restrictions did not work. While there are clearly some who hold this view, a random sample survey of residents found that a majority of the population was in favour of all the restrictions and that many wanted additional restrictions.<sup>11</sup>

Attributing the alcohol problem in Alice Springs to 'itinerants' defines *the problem* simply in terms of its most visible aspect—public Aboriginal drinking. The reality is that most alcohol in Central Australia is consumed by non-Aboriginal people. If Aboriginal drinking is factored out per capita consumption by non-Aboriginal people in Central Australia is still about 52 per cent higher than the national average. Furthermore, most of the harm caused by alcohol is caused by light and moderate drinkers—simply because there are far more of them; and the cost of alcohol-related harm is borne by the whole community, not simply drinkers. In Alice Springs excessive consumption is a problem for both the Aboriginal and non-Aboriginal populations of the region and should be dealt with as such.

The argument that restrictions on availability fly in the face of normal business objectives to improve and expand is flawed. Alcohol is not just another 'product'. Despite the health benefits of moderate alcohol consumption, when consumed excessively it is a dangerous drug and excessive consumption causes considerable health and social problems. <sup>14</sup> In all states and territories, liquor licensing laws restrict who, where, and at what times alcohol can be consumed. It is the prerogative of all communities—not simply market forces—to make decisions regarding the level of availability that they regard as appropriate and the amount of harm they are willing to tolerate.

#### **Alcohol consumption**

The claim in the Hauritz report that *per capita* alcohol consumption in Alice Springs is 2.5 times the national average, was derived from a report by Brady and Martin entitled *Dealing with Alcohol in Alice Springs*. <sup>15</sup> This estimate was made by converting the total volume of alcoholic beverages sold in Alice Springs in the 1997–98 financial year to litres of pure alcohol and dividing this by the Alice Springs population (including overseas visitors). As the critics rightly point out, this method does not take account of the unknown volume of alcohol that is sold in Alice Springs for consumption elsewhere (for example in other communities, mining camps, pastoral stations, etc).

In calculating consumption for regional centres such as Alice Springs, there is consensus among most researchers in the field that calculation of consumption on a regional basis provides a better estimate. Gray and Chikritzhs estimated consumption for the Central Australian region by converting quarterly sales of alcohol by all outlets in the region for the financial years 1994–95 to 1997–98 and dividing it by the Australian Bureau of Statistics' total regional population count of persons aged 15 years (adjusted for estimates of quarterly changes). This population denominator includes both domestic and international visitors and, as the census is taken during the peak tourist season, it is likely to slightly over-estimate consumption by tourists. Using this method, per capita consumption among those aged 15 in the 1997–98 financial year was 16.44 litres. This provides a more realistic estimate of per capita consumption. However, this level is still 70 per cent greater than the national average and—while it is not as high as the estimate used by Hauritz and her colleagues— it remains a cause for considerable concern.

#### Sampling

The suggestion that the survey sample size of 407 persons is too small to reflect the opinions of the Alice Springs population is without scientific foundation. Whenever researchers select a random sample from a population there is likely to be some difference between the characteristics or responses of the sample and those of the population from which the sample is drawn. This is known as 'sampling error'. Researchers and/or

statisticians follow procedures which allow them to select samples of a size that minimises this error; and it is usual practice to report on the likely extent of the sampling error. In the case of the Hauritz report the size of the sample was selected so as to ensure that—in answer to a particular question—there were less than five chances in 100 (ie, that the researchers could be 95% confident) that responses obtained from the sample differed from that in the Alice Springs population by no more than 5% (pp 98–99). This is within the bounds of error generally regarded as acceptable in population surveys. A significant increase in the sample size, and the resources available to conduct the study, would have been required to have achieved even a slight increase in the precision of the results. (The sampling strategy used has implications for the interpretation of the results and this will be addressed in the section of this review dealing with data analysis.)

As well as the survey of residents, Hauritz and her colleagues, conducted a survey of tourists. In their report, they state that 'sixteen tourists were approached on a random basis ... in the Todd River Mall' (p 240). To be a *random* sample, all tourists in Alice Springs at the time the tourist survey was conducted should have had an equal chance of being selected. Clearly this criterion was not met and the sample is not random in the statistical sense of this word. Furthermore, even if the sample had been randomly selected, its size is unlikely to be sufficiently large to represent the views of all tourists, and the results of this survey cannot reasonably be generalised to that larger group. Fortunately, this has little practical effect on the report as a whole, as the results of the tourist survey are simply reported upon and not used as a basis for making recommendations.

In addition to the community and tourist surveys, Hauritz and her colleagues also conducted 18 focus group meetings and nine open community meetings. It is important to note, however, that while participants in these groups were drawn from a wide cross-section of residents and stakeholders they are not representative of the population in a statistical sense. That is, while the data obtained from these meetings is indicative of the range and strength of views on alcohol-related issues, in themselves these data provide no indication of support in the general community for those views. This does not, however,

negate the usefulness of this qualitative data. It provides an important indication of many of the concerns underlying the responses to the population survey.

#### **Question wording**

Several issues arise over the wording of the questions in the survey instrument (Appendix H of the report). These are addressed below. At the outset, however, it is important to note that these particular criticisms do not negate the value of other questions in the survey.

It could easily have been predicted that the vast majority of respondents would have replied 'yes' when asked if they would like to see; 'improvements in social well-being' (Q2 S10); 'reductions in alcohol related violence' (Q4 S10); 'reductions in the level of child abuse related to alcohol' (Q6 S10); *et cetera*. This also applies to those questions in Section 16 about the whether or not alcohol related support services should be increased. As the responses to these questions indicate, there is general agreement that well-being and the provision of services should be improved. Where disagreement is likely is with regard to the strategies to achieve these objectives or the resources that should be allocated to them. While some questions in other sections partially address issues to do with well-being, by-and-large, these particular questions provide little or no new information.

A similar problem arises with regard to Question 6 in Section 6 of the survey instrument— 'Apart from legitimate reasons, should the work place be alcohol free?' Few if any would support the use of alcohol for *illegitimate* reasons. However, there is likely to be considerable variation in what are believed to 'legitimate reasons' and the responses would provide no guide to this.

At the beginning of Section 3 of the interview schedule, respondents were informed that:

There are numerous ways that alcohol can be managed in Alice Springs to reduce many of the problems related to excessive alcohol consumption. For those strategies listed below, please indicate which of those strategies you consider desirable to reduce alcohol related problems in **Alice Springs**.

In Section 9, the same strategies were listed and respondents were told:

You have just rated your views on how your community may benefit from strategies which can assist in managing alcohol-related harm. Now we would like you to rate the desirability of each strategy in relation to **you/your family/your group** from a personal perspective.

This is likely to have resulted in some confusion because, in Section 3, there was no instruction to respondents to consider benefits to the community as opposed to themselves or other social groupings. This confusion was likely to be compounded because in section 9, reference is made to the desirability of strategies in relation to the individual, his/her family, and his/her (undefined) group—all of which might or might not be different. The almost identical responses to these questions (Figure 33, p132) suggests that it is highly likely respondents were not clear about difference in the questions they were being asked.

Some of the questions asked deal with two conceptually different issues. Question 3 Section 1 asks 'What concerns you most about alcohol *availability and use* in Alice Springs?' (emphasis added). These are not the same issue and, ideally, separate questions should have been asked about each. As stated, the question also assumes that availability and use are the issues with which people were concerned when they identified alcohol as a problem and rated its severity in Questions 1 and 2. While this might be a reasonable assumption, it is not one that should be made in a survey, and it could be argued that it directs the attention of respondents to some aspects of 'the problem' and not others.

In Section 2, Question 8 also asks two questions in one. Respondents were asked how desirable it was to 'Ban happy hours or promotions such as strip shows, that encourage excessive drinking'. It is conceivable that some respondents might have favoured banning strip shows but indicated that the strategy proposed was undesirable because they were not in favour of banning happy hours, or *vice versa*. (This is a mistake also made by Gray et  $al^{11}$  in their evaluation of the Tennant Creek restrictions, from which the question used by Hauritz et al. was taken.)

The questions in Section 11 of the survey instrument are not well worded. Given, the context in which it appears, the first question is intended to ask about sales for consumption *on* licensed premises. The term 'venues' which is used in the question, and the term premises which is used in the *Liquor Act*, can refer to a variety places from which

alcohol is sold and neither are used in common parlance. Accordingly, it is not clear that all respondents would have interpreted the question in the manner intended. The second question appears to be asking about licensees generally and does not allow for the possibility that, as a group, holders of some types of licences might be regarded as selling take-away alcohol responsibly and others not. In the third question, the term 'liquor traders' is not commonly used and, again, it is not clear that all respondents would interpret the term in the same manner as the researchers.

In some cases, the selection of 'Alcohol Management Strategies' in Sections 2 and 9, appears arbitrary. Although respondents were asked whether Alice Springs should 'Have an alcohol free day/s' (Q 13), they were not asked whether, as an alternative there should be a day or days on which tighter restrictions should be in place (as in Tennant Creek). Presentation of such an option was potentially important, given that in Tennant Creek there was not majority support for an alcohol free day but there was for the current Thursday restrictions.

Questions 4, 5 and 15 in Sections 2 and 9 also appear to be redundant. In these instances respondents were asked to rate the desirability of:

- Ban all sales of wine in glass containers larger than one litre;
- Ban all sales of sherry and fortified wines (sic) in glass containers larger than one litre; and,
- Amend the Liquor Act to include public need for a new outlet to be considered in the granting of a license. (A similar question was posed in Section 4 of the survey instrument in relation to Liquor Licensing issues).

However, in Alice Springs sale of these beverages in such containers has been 'banned' under the terms of an agreement among licensees, and Section 32 of the *Liquor Act* already states:

(1) In considering whether to grant an application for a licence ... the Commission shall have regard to ...(d) needs and wishes of the community.

It might be argued that these questions were included to gauge support for these existing arrangements. However, given that recommendations were made that these strategies be 'introduced in Alice Springs immediately' (pp xii, 251–2) it appears that the consultants were not aware of them.

As indicated above, while these criticisms, and some others relating to question wording, can be raised, they do not negate the value of other questions in the survey. Nor do they negate the general perception among residents, identified in the survey, that there is considerable concern about alcohol-related problems in Alice Springs and a desire to address them—including some restrictions on availability.

#### Data analysis and interpretation

In Tables 6.14 and 6.16, on pages 106 and 107 of the Hauritz report, various statistics (mean, median, mode, and standard deviation) are presented to summarise the responses to the questions:

- Do you consider that alcohol is a problem in Alice Springs?; and
- How seriously would you rate the problem of alcohol in Alice Springs?

In addition, Appendix E of the report consists of tables providing similar summary statistics for most of the questions asked in the community survey. Unfortunately, most of these are devoid of meaning or have been inappropriately calculated.

Question 1 of the community survey asked 'Do you consider that alcohol is a problem in Alice Springs' and respondents were asked to place a cross in one of four boxes labelled 'Yes', 'No', 'Don't know' and 'Unsure'. Rather than viewing these as simple categorical responses, it was assumed by the researchers that these responses formed an ordinal scale—that is, that the responses can be ordered or ranked relative to each other—and that a numerical value can be assigned to each which reflects that ordering. The summary statistics provided in Table 6.14 represent various forms of averages of these ordinal values and an indication of the clustering of the responses about the 'mean' value. In one sense, it might be argued that the responses represent a continuum between those who believe alcohol is a problem and those who don't', with those who do not know if it is a problem occupying the middle ground (an issue which I take up below). Conceptually, however, it is not clear what a numerical score that is the average between those answering 'yes' and 'no' actually tells one. It is more appropriate, to treat the responses as simple categories

and to report on the percentage in the sample that responded to each of these (as the authors have also done), but *in addition* to report on the likely range of responses in the population from which the sample was drawn (ie, the 95 per cent confidence interval).

Although, the statistics are not cited in the body of the report, this issue of the inappropriate scaling of categorical responses presented in Appendix E applies to:

Qs 1–11, S4	Qs 1–2, S8	Qs 1–13, S12	Qs 1–2, S15
Qs 1–5, S4	Qs 2-12, S10	Qs 1–4, S13	Qs 1–8, S16
Qs 1–6, S5	Qs 1–6, S11	Qs 1–7, S14.	

Another problem arises with regard to the ordinal ranking of responses which also applies to those questions where the method is appropriately used. Where there are extremes of view point between respondents about the desirability of some phenomenon (such as 'very undesirable' and 'highly desirable'), when ranking them it is logical, and usual practice, to place those who do not know what they desire between those extremes. However, in Qs 1–15 S1, Q 1 S7, and Qs 1–15 S9 (not to mention those instances cited above where the technique is inappropriate), the 'don't know' response is placed at one end or other of the continuum thus biasing the mean to that end of the continuum.

While for scientific reasons, these applications of scaling procedures are problematic, their practical effect on the report is negligible for two reasons. First, given that the number of respondents responding 'don't' know' to these questions is generally small, the bias brought about by this methodological error has little practical effect. Second, as indicated, the authors have assigned these results to an appendix and do not use the statistics in support of any major argument.

As indicated above, the sampling strategy adopted by the consultants means, for example, that in response to a question such as do you think that the 'Licensing (*sic*) Commission should license any more outlets in Alice Springs?' (Q1 S4) we can be 95% confident that the percentage of the total Alice Springs *population* who would answer 'no' to this question is somewhere between about 61.6 and 71.6 percent (given that those answering

'no' comprised 66.58% of the sample [p 135]). In this case, even if one errs on the side of caution, it is possible to state with a high degree of probability that a majority of the population is not in favour of the Commission granting additional licenses in the town.

However, while 53.07% of the sample thought it was desirable or highly desirable that there should be an 'alcohol free day' (p 125), the proportion in the population who are of this view is probably somewhere between 48 and 58 per cent—and it might be that, in fact, there is *not* majority support for such a strategy. In this situation, caution would dictate that the result be interpreted as being that there is no clear-cut support for this strategy. (It should also be noted that the 55.6% reported as favouring Thursday as an alcohol free day comprise 55.6% of the 52.5%—not 55.6%, or a majority, of the total sample [pp 128–9].) A similar caution should also be applied to consideration of the responses to the questions regarding: a ban on sales of fortified wines before 5 pm (Q7 S2); reducing the number of liquor licenses currently held in Alice Springs (Q11, S2); and, whether or not alcohol advertising should be associated with sports (Q2 S 13).

With regard to the question about reducing the number of liquor licenses in Alice Springs, there is a difficulty of interpretation of the results in addition to that posed by consideration of the 95 per cent confidence intervals. Conceivably, some respondents might have stated this strategy was desirable because they felt that the number of service stations selling alcohol should be reduced but actually believed the number of licensed restaurants should be increased. Others might have rated the strategy undesirable for exactly the same reason. A similar problem exists with responses to the same question when asked in Section 4 (Q2 S4) of the survey instrument. This compounds the unresolved difficulty of interpretation raised by the authors themselves when they state that:

This question was supported by respondents from the viewpoint of community and for their family, their group, themselves. When this question was answered as to what was sought of the Licensing Commission, this same question was not supported. Hence there is some ambiguity associated with this answer (p252).

The issue of interpretation also arises with regard to Question 1 in Section 14. Respondents were asked 'Should there be restrictions on public drinking'. On the basis of the response to this, it is recommended 'That there be restrictions on drinking in public' (R13, p xviii).

However, some restrictions on public drinking already exist and, given the wording of the question, it may well be that some respondents were affirming support for those existing restrictions, rather than advocating additional restrictions. Nevertheless, given the high percentage of those who answered 'yes' to this question (94.1%), it is reasonable to infer that there is probably a majority in favour of increased restrictions—though this might not be as high as suggested by the response to the question.

#### The recommendations

It is my view that at least part of the controversy surrounding the report is a result of the consultants going beyond their brief and, as a consequence, usurping the role of the AARC. As indicated, in the introduction to this review, the tender document simply sought someone to conduct research into the opinions and perceptions of a representative sample of Alice Springs residents on the use and availability of alcohol and ways to reduce the harm associated with excessive consumption.<sup>3</sup> As stated in its terms of reference, it is the role of the AARC to 'design a set of proposals, acceptable to the community, to reduce the level of alcohol consumption and alcohol-related harm in Alice Springs.<sup>2</sup>

Hauritz and her colleagues do more than report the opinions of Alice Springs residents on the nature of the problem and strategies to address it. They also developed a complete package of recommendations which they recommended be accepted as a whole. However, based on my reading of the report, this package consists of four categories of recommendations—each of decidedly different status. Those categories are as follows, and they are summarised in Table 1:

- A. those for which there is unambiguous evidence from the survey of majority community support (41);
- B. those arising from the focus groups and open community meetings, for which there might be wider community support but which is not demonstrated (16);
- C. recommendations which—although based on the views obtained from the survey, focus groups and open community meetings—are strategies proposed by the consultants themselves (29); and,

D. a small number of recommendations for which the consultants claim majority support, but for which I believe—on the basis of the statistical evidence—should be regarded cautiously (5).

This is not to say that some of the recommendations in categories B, C, and D are without merit—or indeed without wide support. However, given their status, further discussion is clearly needed. Even some of the recommendations in category A need more consideration. For example, to reduce binge-drinking it is recommended 'That happy hours are for no longer than two hours in a day' (LC 2.1.8 p xii). However, to address this problem, the Liquor Commission currently requires licensees who offer discounted drinks to offer them for the whole day. This measure is designed to reduce the pressure on drinkers to consume rapidly within a short time period and to impose a financial penalty on licensees offering discounted drinks. Similarly, although a majority of the population is in favour of an 'Embargo (on) the granting of any new liquor licenses' (p 124), the recommendation that this be implemented (p xii) has the potential to impede creative solutions to the alcohol problem—for example, if an Aboriginal community organisation proposed to establish a tavern that sold only low-alcohol beverages. This suggests a need for debate (though not a prolonged one) about the recommendations and about some alternative strategies that might better achieve the clearly desired objective of reducing excessive consumption and related harm.

#### **Summary**

Since its release, the Hauritz report has been subject to considerable public comment and criticism. Of these, those that are potentially most damaging relate to the methodology employed by the consultants in their undertaking of the study. In this review, I have considered several methodological weaknesses in the report. Some of these have no practical impact on the results, some affect the interpretation of community views on a small number of issues, and others render one or two sections of the report as being of little value. *Overall, however, these problems do not negate the main thrust of the report.* 

The report is sufficiently robust to demonstrate that within the Alice Springs community the majority of people believe that alcohol represents a significant problem in the town, and that there is strong support for, at least, the following:

- increased restrictions on the availability of alcohol;
- controls on public consumption of alcohol; and
- responsible service of alcohol.

With regard to specific strategies there is room for further debate and consideration of alternatives—particularly as not all are clearly based on the views of a majority of people in Alice Springs. Nevertheless, in my view, the report provides a clear mandate for the Alice Alcohol Representative Committee to put forward a set of strategies to reduce alcohol consumption and the harm that is associated with it in Alice Springs.

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Table 1: Recommendations from Dollars from Broken Spirits by category

Recommendation no	Recommendation
Category A: Recomme	ndations for which there is evidence of majority community support
NT 1.3	Graduated sanctions for breaches of the Liquor Act
LC 2.1.1	That the trading hours of takeaway outlets be reduced significantly
LC 2.1.2	That wine in casks of more than two litres are banned
LC 2.1.3	That there are the same takeaway hours for clubs and hotels.
LC 2.1.4	That all sales of wine in glass containers larger than one litre are banned.
LC 2.1.5	That all sales of sherry and fortified wines in glass containers larger than one litre are banned.
LC 2.1.6	That quotas are placed on sales of fortified wines, sherries, spirits, holding outlets to their current levels of wholesale purchases.
LC 2.1.8	That happy hours are for no longer than two hours in a day.
LC 2.1.10	That no new liquor licenses are granted.
LC 2.1.12	That the liquor act is amended to incorporate public health policy related to alcohol.
LC 2.1.13	That the liquor act is amended to include public need for a new outlet to be considered in the granting of a license.
R 2	That government offices and government funded services be alcohol free
R 3	That public spaces be alcohol free with opportunities for all people to drink in well presented, non-crowded bars and lounges in venues and clubs.
R4	That apart from legitimate reasons, all work places be alcohol free.
R11	That government be required to promote information about safe drinking across all media.
R 12	That there be restrictions on drinking in public.
R 13	That major public events sell low-alcohol beers only.
R 14	That major events have a 'chill out' zones for people who become intoxicated.
R 15	That alcohol be only sold and drunk in a limited enclosed area at major events.
R 16	That there be no take-away alcohol sold at public events.
R 18	That police resources be gradually withdrawn from the transfer of inebriated people between various agencies and that this be undertaken by Tangentyere day-night patrol allowing police resources to be directed to regulation of licensed venues and sly grogging.

L 5	That all security staff of licensed premises and shopping centres with liquor outlets have been trained in responsible safety and crowd control practices by reputable organisations or qualified individuals.
L 6	That health information about alcohol in displayed in all public areas in the liquor establishment.
L 7	That information about patron care be made available in all public areas where alcohol is sold.
L 8	That low strength beer is priced lower than high strength beer in all instances.
L 9	That licensees provide snacks and food to accompany alcohol in bars and drinking lounges.
L 10	That licensees be required to provide free water in bars and drinking lounges.
L 11	That licensees of licensed venues be required to provide free non-alcoholic drinks to the driver in a group of drinkers.
L 12	That, for obviously vulnerable patrons, licensees provide from the licensed premises to the persons place of residence, safe transport home.
L 13	That licensees set up checks and practices to ensure that no intoxicated patron is sold alcohol in any form from any venue or outlet for which they are responsible.
L 14	That licensees actively discourage binge drinking.
L 15	That a Teen ID card be introduced for all young people aged fourteen and over to be required to be shown when alcohol is purchased by the young person or when the young person is seen to be drinking alcohol.
C 2	That, where it is the wish of a town camp to be alcohol free, the Liquor Commissioner grant this status.
C 7	That the hours for the Tangentyere Night Patrol should be increased to a 24 hour patrol.
C 8	That the Tangentyere Warden/return to country should be increased to cover the 5a.m. to 5.p.m. Period and that its funding be set for no less than three years rolling.
C 9	That emergency services provided by C.A.A.P.U. Should be increased for outreach and court diversion for chronic repeat offenders.
C 10	That there be a sobering up and detox centre for young people who cannot be admitted to the D.A.S.A. Centre.
C 11	That some form of safe house be established for men at risk of alcohol related violence.
C 12	That some form of safe house be established for women at risk of alcohol related violence.
C 13	That some form of safe house be established for children at risk of alcohol related violence.
C 14	That the current D.A.S.A. Sobering up shelter facilities be increased.

#### Category B: Recommendations arising from the focus groups and open community meetings

NT 1.2	That aboriginal representatives be elected to the liquor commission
R 5	That all businesses have a policy covering the presence of alcohol in the workplace for reasons of workplace health and safety.
R 6	That the promotion of special licenses for the sale of alcohol as fund-raisers be removed from the licensing commission web-site.
R 7	That taxis may not buy alcohol from drive thru bottle shops.
R 8	That taxis not be allowed to carry alcohol unless it is the property of a bona fide passenger who is present and has the taxi on hire.
R 9	That taxis carrying alcohol without a bona fide reason are to have the alcohol confiscated and emptied on the spot.
R 10	That licensees of take-away outlets be required to breath test any person suspected of being intoxicated and seeking to purchase alcohol.
R 19	That a grog dob 24 hour line be available for information about sly grogging and alcohol-related incidents to be put before the police and Liquor Licensing
R 20	That the guardianship provisions of the liquor act be removed and rewritten so that alcohol is not passed onto underage young children and young people by a third person aged 18 or over, including parents.
L 16	That take-aways, drive-ins, convenience stores, and petrol stations request patrons to use a breath-alyser to show that the licensee is not serving an intoxicated person.
C 3	That, where it is the choice of a town camp, any person under the influence and who represents a threat to the peace of the town camp not be placed in the town camp but other arrangements found.
C 5	That all schools be free of alcohol.
C 6	That alcohol not be used as a fund-raiser by schools.
C 15	That halfway houses funded and maintained by outside communities be set up as intermediary short-term lodging on the basis of need for services in Alice Springs and that this service be operated on planned stay-overs.
C 17	That Tangentyere Council consider a user-pays principle to be charged back to the outside community for the transfer of persons, under the influence and who are from outside communities when those persons are transferred in and around town and/or back to their community.
C 19	That safe day and night entertainment activities that are alcohol free be designed to meet the diversity of interests that young people have in Alice Springs.

Category C: Recommendations developed by the consultants

	That the package of recommendations, as a comprehensive approach to alcohol management, be accepted as a complete package and be considered as such. Disassembly and use of selected recommendations will result in mediocre achievements that will not sustain in the long term.
NT 1.1	That the Northern Territory government locate and dedicate financial resources for a minimum three year period for the restoration of community well-being in Alice Springs and associated environs.
LC 2.2	That these alcohol management practices be held in place until the alcohol consumption indices for Alice Springs match national standards.
LC 2.3	That a deputy commissioner be appointed within one month and that this position be based in Alice Springs
LC 2.4	That the new position of deputy commissioner (central region taskforce) regulate the liquor act to bring about the reductions of alcohol consumption to national standards within eighteen months of appointment and maintained thereafter
LC 2.5	That this person have powers to refer breaches of the liquor act to the criminal justice system, through the liquor commissioner
LC 2.6	That this person publish quarterly public data on alcohol statistics achieved to date in local newspapers and on the web.
LC 2.7	That the liquor commissioner establish an internal department (central region alcohol task force) headed by the deputy commissioner and based in Alice Springs.
AC 3.1	That an Alice Springs Alcohol Community Action task Force be formed.
AC 3.2	That the primary goal of the Alice Springs alcohol community action task force is the reduction of high levels of alcohol consumption in Alice Springs and prevention of alcohol-related harm.
AC 3.3	That the Alice Springs Alcohol Community Action task Force operate as set for purpose, chair, end goal, tasks, and accountability
AC 3.4	Prepare a three year outcome-based management plan, including an initial three month implementation phase
AC 3.5	That the Alice Springs Alcohol Community Action Task Force publish collated monthly trend data for alcohol consumption indices, indices of alcohol-related harm in Alice Springs and breaches under the Liquor Act.
AC 3.6	That quarterly data be placed before the liquor commissioner in relation to changes in alcohol consumption, reductions in alcohol-related harm and breaches of the Liquor Act.
AC 3.7	That a regular six monthly review be conducted for a three year period to establish, maintain and embed community action in relation to alcohol, alcohol-related harm and breaches under the Liquor Act.
AC 3.8	That there is effective utilisation of the media in Alice Springs.
AC 3.9	That effective public information campaigns be utilised to carry progress information to the community.
AC 3.10	That the Alice Springs Alcohol Community Action Task Force be composed of the main task group and three sub groups
AC 3.11	That each task group be responsible for accomplishing recommendations set before it from this report within one year.

R 1	That the regulators task group operate as set for purpose, chair, end goal, tasks, and accountability.
R 17	That all persons (police, ambulance, hospital, Tangentyere Night Patrol) share a common database which records the last point of drinking or purchase of drink so that hot spots can be identified and dealt with by liquor licensing and shared with the Alice Springs Community Action Task Force.
L 1	That the licensees task group operate as set for purpose, chair, end goal, tasks, and accountability.
L 2	That licensees of all venues provide opportunities for all people to drink in well presented, non-crowded bars and lounges in venues, open-air lounges and clubs.
L 3	That licensees develop an Alice Springs code of practice to ensure that all licensees met their industry standards and practices, and that this code of practice be publicly displayed to the public at the entrance to the venue.
L 4	That all staff of licensed premises have been trained in responsible management.
C 1	That the common issues task group operate as set for purpose, chair, end goal, tasks, and accountability
C 4	That practices and instances of binge and/or underage drinking be referred immediately to liquor licensing and followed up within 24 hours.
C 16	That the Tangentyere day-night patrol take up the transfer of inebriated persons to D.A.S.A., the watch house, home or hospital currently being done by police.
TA 4.1	Appoint a technical and expert assistance team for action research
egory D: Recom	mendations for which there is no clear evidence of majority support

#### Categ

LC 2.1.7	That all sales of fortified wines and sherry before 5 pm are banned.
LC 2.1.9	That the number of liquor licenses currently held in Alice Springs are reduced.
LC 2.1.11	That there is an alcohol free day/s.
LC 2.1.14	That Thursday be selected as the preferred alcohol free day
C 18	That advertising alcohol as part of sports be banned.