Effective policies and strategies to reduce alcohol-related harm: what does the research tell us?

While alcohol is important to the Northern Territory (NT), economically, socially and culturally, it is, to quote the title of an important book on this topic, ‘no ordinary commodity’. On a per capita basis, the cost to the community of alcohol-related harm in the NT is greater than in any other Australian jurisdiction. Accordingly, we suggest that any policies and strategies should be developed with the effect on public health as the primary consideration.

There are seven major areas of policy and strategy for which there is a sound evidence base. These are:

1. Pricing and taxation
2. Regulating the physical availability of alcohol
3. Modifying the drinking context
4. Drink driving countermeasures
5. Regulating alcohol promotion
6. Education strategies
7. Treatment and early intervention.

Pricing and taxation

The research evidence strongly indicates that increasing the price of alcohol leads to an overall reduction in consumption. While it is no longer possible for state and territory governments to tax
alcohol, they are responsible for licensing alcohol retailers, and thus can require retailers to set a floor price for alcohol as part of their license conditions.

Regulating availability
The research evidence indicates that manipulating physical availability (outlet density, outlet trading hours, sales to minors and service to intoxicated customers) changes patterns of alcohol consumption and alcohol-related harm. One way of reducing harmful levels of alcohol use in the NT, particularly among Indigenous Territorians (with their agreement) and young people, is to regulate the physical availability of alcohol. While the NT has a number of regulation strategies in place they are not well integrated and consequently the potential to minimise alcohol-related harm through licencing and other legislation has not been fully realised.

Modifying the drinking environment
Alcohol-related violence, particularly in and around licensed premises, is a perennial issue. While training staff in responsible service and introducing voluntary codes of conduct, such as Alcohol Accords, can be helpful, effective regulation must incorporate formal enforcement. The NT has responsible service laws in place so consistent enforcement is likely to reduce harm. Also, collecting and providing feedback to licensees on alcohol-related crime that followed from drinking on specific premises can reduce harm.

Drink driving countermeasure
In Australia, rigorous implementation of random breath testing (RBT) has been very effective in reducing the road toll. Highly visible, stationary RBT has a long term deterrent effect and research suggests that this should aim to achieve one test per license holder per year.

Regulating advertising and promotion
The essential question for policy makers in regard to advertising and promotion is the extent to which such activity should be permitted as part of a market economy, or constrained in the interest of reducing harm. There is growing evidence that marketing influences how people think and feel about alcohol, and their pattern of consumption. A particular concern is that it inculcates pro-drinking attitudes in young people. Restrictions on alcohol advertising have been shown to be effective in reducing alcohol consumption.

Community prevention
There are a number of advantages to community level prevention. This type of prevention addresses the underlying cause of the problem and has considerable potential for change because of the large numbers involved. Once behavioural change has been achieved it is likely to be self-sustaining because a new community norm has been established. However, community action cannot simply be mandated, and lasting change is more likely when the people, who are affected, are involved in the change process. A recent review of community prevention projects indicated that community prevention is most effective when situated within supportive, jurisdiction level legislative change.
**Education strategies**

Young people typically initiate alcohol use while at school and so there is obvious appeal in school-based alcohol education. In Australia, schools almost universally report they employ a harm minimisation approach to alcohol education, and a number of such programs, notably the School Health and Alcohol Harm Reduction Project (SHAHRP), the Climate Schools Alcohol and Cannabis Course, and Drug Education in Victorian Schools (DEVS) program have reduced consumption and harm. However, schools often select alcohol education programs on the basis of how well they are promoted, rather than on their demonstrated efficacy. Alcohol education in the Northern Territory is likely to be more effective if schools select programs with evidence of success.

**Treatment and early intervention**

Investment in effective treatment programs is a key component of a comprehensive alcohol strategy. Brief interventions and screening, in particular, offer the potential to provide more treatment. They are also especially effective in treating early-stage problem drinking, thus obviating the need for later, more intense treatment. Such programs could be undertaken in non-traditional settings such as the work-place, could target high-risk populations such as young males or focus on problematic consumption locations such as remote communities. In remote communities, the health clinics offer considerable potential for more wide-spread preventive efforts with Indigenous Territorians.

**Summary**

The research evidence identifies those policies and strategies that are consistently effective in minimising alcohol-related harm. What is needed going forward is more an understanding of how to make these approaches work in the different contexts across the NT.

**Northern Territory research on developing an evidence-base for monitoring alcohol related harm**

The Northern Territory has a long history of innovative policy approaches to reducing harms associated with alcohol misuse (d’Abbs 2015). Alcohol Management Plans (AMPs) have been a mainstay of alcohol policy for regions and larger regional centres over the last two decades, and a similar approach was introduced by the Commonwealth as part of the Stronger Futures in the Northern Territory Act (Commonwealth of Australia 2012).

From 2015-2016 Menzies School of Health Research was contracted by the NT Department of Business to develop a place-based framework for monitoring and evaluating alcohol management plans and other alcohol initiatives in the Northern Territory (Stevens, Buckley & Midford under review, Stevens, d’Abbs & Midford 2014). The final report was submitted to the NTG in August 2016 and consisted of three volumes:

- Volume 1: The Framework – Development and Implementation
- Volume 2: The Key Informant Interviews - Understanding community views on alcohol harms, identifying local community indicators and determining best approaches to feeding back information
- Volume 3: The Community Alcohol and Wellbeing Survey: Measuring patterns of alcohol use, and community strengths and problems
Volume 1 included de-identified community data reports for 8 pilot communities, which contain administrative, survey and key informant data collected and/or collated as part of the project. These data reports organise indicators under Alcohol Consumption Patterns, Community Education, Community Safety, and Community Health and Wellbeing. Administrative data is presented as a time trend in 6-monthly periods accounting for seasonal patterns in some indicators (e.g. assaults). The data report will provide each participating community with a comprehensive snapshot of the current status of alcohol-related harms in their community with a comparison to Northern Territory rates and the previous years’ time periods. In addition to reporting the indicators under each domain, each data report contains a: Highlights summary; Community context; Data sources; Interpretation of graphs and statistical testing for each domain; and Limitations and purpose of the data. Ideally, administrative data used in these reports would be collated and analysed for all major (approximately 30) Aboriginal communities in the NT. Furthermore, the Framework has been conceptualised to cover the whole of the Northern Territory, with recommendations made on which indicators to report at higher and lower geographic reporting (e.g. Darwin verse a remote Indigenous community).

Memorandums of Understanding for the provision of all government administrative data were also signed between the Department of Business (the then project owner, but now with Department of Health) and Department of Health, Attorney General and Police, and Department of Education. These MoU’s were to ensure consistent and regular provision of these data every six months to the Department of Business. The report also contains a range of suggestions for moving forward. These form the basis for the next section of this submission, which explores ways capitalising on this evidence base to inform and support community led alcohol harm prevention.

**Suggestions for capitalising on this evidence base to inform and support community led alcohol harm prevention**

The novel design and comprehensive coverage of the Place-based Alcohol Management Framework provides a unique resource. There would be significant long term benefits for alcohol management in remote communities if the Northern Territory Government (NTG) partnered with an external organisation, with relevant technical expertise, to assist in the ongoing collection, collation, analysis, presentation and feedback of data. A partnership would lead to greater accountability, transparency and sustainability of the Framework, and in turn greater community control of their alcohol issues.

A further step that capitalises on the understanding of local level alcohol issues created by the Framework would be to develop a prevention program in collaboration with volunteer remote communities that draws on a combination of local understanding and the evidence as to effective preventive interventions. Such a program could draw on Framework data to inform both program development and evaluation. Again, a partnership with an external organisation with expertise in program development, support and evaluation would add value. Over the longer term such a program would provide a model for all communities that sought to manage their own alcohol issues.
The need for local corporate addiction research capacity to inform policy and program development into the future

The NT has the worst statistics of any Australian jurisdiction, on essentially all measures of alcohol consumption and harm, and the situation is little, if any, better in terms of illicit drug use and gambling. However, unlike most other jurisdictions it has no dedicated corporate addiction research unit. There are researchers, well credentialed in this area, who work at the Menzies School of Health Research, but they work on grant funded research, which varies over time and may not be addiction related. There is currently no funding for a permanent addiction research unit within Menzies, and thus no expert capacity that can be reliably called upon to undertake addiction research. This will create ongoing problems for the development of a coherent, research informed, response to problematic use of alcohol in the NT. As a consequence of no corporate capacity, projects will have to draw on whoever is willing and capable locally, or seek to draw on expertise from other jurisdictions. Both of these strategies are less than ideal because there is no development of local capacity. This local capacity has to be considered an important element in the research process because of the advantages it bestows in terms of established networks, understanding of context, development of local researchers, and creation of a corporate research memory. We suggest that consideration be given to provision of Government seed funding to establish a dedicated addiction research unit within Menzies. This will provide the impetus for a core of local expertise in the addiction research area which will pay long term dividends in terms of creating a better understanding of local addiction issues.

Development of a long term strategy to foster responsible drinking norms

There is evidence that shifting social norms around alcohol consumption can change the drinking behaviour of particular groups such as university students, and even whole communities, and that this change can be long lasting and result in lower related problems. The theoretical basis for the approach is that people seek to conform to the presumed behaviour of the majority in their group or community. However, perceptions of other people’s normal behaviour can be distorted by seeing extreme, behaviour as the norm. Thus, behaviour can be changed by correcting misperceptions as to what is normative.

One technique that has been used to change social norms around alcohol use is social marketing. This is a framework and collection of tools derived from commercial marketing principles that can be used to ‘sell’ positive behaviour: in this case accurate norms as to the level of alcohol consumption. The use of social marketing to provide an accurate understanding of average consumption levels in the NT is likely to lead to more conservative community drinking norms, and thence a lasting reduction in consumption and harm. The normative message can particularly focus on Territorians not drinking the quantity of alcohol they used to, as per capita consumption has fallen from 15.09 litres of alcohol in 2005/06 to 13.27 litres in 2011/12, while national consumption has essentially remained the same.

Summary

In essence, to realise a responsible drinking culture in the Northern Territory, there needs to be a robust evidence base, along with local knowledge and understandings of how the social, cultural and
physical environments affect patterns of drinking. Prevention strategies that take these factors into consideration are most likely to be successful changing the drinking culture of the Northern Territory for the better.

References


Source material


Doran, C., Vos, T., Cobiac, L. et al. (2008). Identifying cost effective interventions to reduce the burden of harm associated with alcohol misuse in Australia, Canberra: Alcohol Education and Rehabilitation Foundation.


