

## EDITORIAL

# Safer Bars, Safer Streets?

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### Introduction

The debate about controlling alcohol-related problems is rather different from that related to either tobacco or illicit drugs. Tobacco is now increasingly viewed as being a pariah substance in most industrial societies, while the prevailing approach to illicit drugs is a punitive one. The consumption of beverage alcohol, outside much of the Moslem and Hindu world, is normative and esteemed. This is true even though the heavy and inappropriate consumption of alcohol causes massive health and social problems.

There are two distinctive approaches to alcohol control policies. The first of these is known as the 'Public Health Approach.' The second is called 'Harm Minimization' or 'Harm Reduction.'

The Public Health Approach aims to curb the overall level of alcohol-related problems by reducing the per capita alcohol consumption (e.g. Bruun, Edwards, Lumio, Mäkelä, Pan, Popham, Room, Schmidt, Skog, Sulkunen, & Österberg, 1975; Edwards *et al.*, 1995; Babor, Caetano, Casswell, Edwards, Giesbrecht, Graham, Grube, Gruenwald, Hill, Holder, Homel, Österberg, Rehm, Room, & Rossow, 2003). Harm Minimization aims to reduce the level of alcohol-related problems without necessarily reducing *per capita* alcohol consumption (Plant, Single, & Stockwell, 1997).

Apart from the degree of emphasis on reducing overall alcohol consumption levels, most of the measures suggested under the rubric of both approaches are similar. Recent reviews of the effectiveness of alternative approaches to bringing down the levels of alcohol-related problems have reached broadly similar conclusions (e.g. Plant *et al.*, 1997; Babor *et al.*, 2003; Stockwell, Gruenewald, Toumbourou, & Loxley, 2005; Plant & Plant, 2006). It could now be argued that these two approaches should no longer be viewed as being opposed to each other. This view is expounded below.

Alcohol education and health promotion does not appear to be an effective way of changing drinking behaviour. With a few rare exceptions (e.g. Midford and McBride, 2004; McBride, 2005; Poulin and Nicholson, 2005), studies indicate that such activity generally achieves little apart from temporarily modifying attitudes and knowledge levels (Kalb,

1975; Kinder, Pape, & Walfish, 1980; Schaps *et al.*, 1981; Bandy & President, 1983; Tobler, 1986; Edwards *et al.*, 1995; Plant *et al.*, 1997; Babor *et al.*, 2003; Foxcroft, Ireland, Lister-Sharp, & Breen, 2003; Crombie, Irvine, Elliott, & Wallace, 2005). Some educational programmes appear to have actually increased young people's drinking and smoking, as well as their illicit drug use (e.g. Hawthorne, Garrard, & Dunt, 1995).

Other approaches that have been evaluated include the labelling of alcoholic beverage containers and warning notices in the place of sale. Reviewing the US experience of such labelling, Greenfield (1997) has concluded the following:

Although not conclusive evidence of an effect due to the warning labels' messages, these findings are at least consistent with the Congressional intent, by showing that the appropriate groups are being reminded of the harms, and that other personal characteristics including drinking variables accounted for those more exposed to the message appear more likely than others to be adopting harm-reduction strategies related to drinking and driving, and possibly, drinking less per occasion when pregnant and having more conversations about drinking and pregnancy. (p. 118)

The most productive approaches to the reduction of alcohol-related problems relate to measures designed to enforce the law concerning the operation of licensed premises and to control the places where people drink in public. The regulation of behaviour in and around bars, clubs and other licensed premises has sometimes been shown to be highly effective. Before considering this in greater detail, it should be emphasized that, for harm minimization to be really effective, the overall drinks market should at the very least be stable. Rising *per capita* alcohol consumption levels invariably lead to rising rates of alcohol-related mortality and other alcohol-related adverse effects. Moreover, the affordability and availability of alcohol also have a clear association with overall levels of alcohol consumption and the adverse effects of alcohol (e.g. Bruun *et al.*, 1975; Edwards *et al.*, 1995; Godfrey, 1997; Babor *et al.*, 2003; Plant & Plant, 2006). The implication of this is obvious, if politically uncomfortable. The sustained reduction of the adverse consequences of heavy and inappropriate drinking require not only micro or community level interventions (such as good policing), but also macro or national level alcohol manipulation of the affordability of alcohol. National policy should at the very least prevent alcohol consumption (and mortality) from rising. Ideally, policy should set out explicitly to reduce both consumption and mortality. This should form the platform upon which more targeted harm minimization measures may be effected.

### **Creating safer bars and safer streets**

There are identifiable risk factors associated with heavy drinking, intoxication and aggression in and around bars, inns, taverns, clubs, hotels, and other drinking locales. This is elaborated elsewhere in this journal (Green & Plant, 2007). The evidence on this subject is rather patchy and is not always consistent. Moreover, a disproportionate number of past studies in this area have been carried out in North America. This fact probably reflects the relatively meagre money available for social and behavioural research on alcohol in most countries. It may also reflect a lack of awareness of the potential of harm minimization in relation to alcohol-related aggression and nuisance. There is abundant scope for more research in more countries on this topic. This would provide invaluable guide for

formulating evidence-led policies to curb alcohol-related public nuisance, violence and other problems, such as alcohol-impaired driving.

Available evidence may be incomplete. However, it already makes a strong case that levels of heavy drinking, aggression, violence, and other problems are associated with the characteristics of bars and other licensed premises. These factors included internal physical characteristics and atmosphere, such as layout and crowding, organizational factors, such as cheap drinks promotions and entertainment, patron characteristics, such as age and gender, and external characteristics, such as location and density/concentration (Green & Plant, submitted).

Current evidence suggests a number of practical policy options. This evidence shows that the concentration of bars and other licensed premises is associated with high levels of drunkenness, crime, and violence (e.g. Roncek & Maier, 1991; Scribner, MacKinnon & Dwyer, 1995; La Scala, Gerber & Gruenewald, 2000; Norström, 2000; Rowntree & Sherwell, as cited by Kneale, 2001; Gruenewald, Johnson, & Treno, 2002; Zhu, Gorman, & Horel, 2004). Because of this, it is suggested that licensing authorities should devise clear plans for their own areas to ensure that no more liquor licenses are issued than are required or consistent with the maintenance of public order, police and medical resources.

A number of other policies appear to be justified. These include the rigorous enforcement of high standards related to hygiene, noise, ventilation, lighting, entertainment, adequate staff levels, seating and limits on crowding and curbs on cheap drink promotions (e.g. Graham, La-Rocque, Yetman, Ross, & Guistra, 1980; Homel, Tomsen, & Thommeny, 1992; Homel & Clark, 1994; Fox & Sobol, 2000) the use of toughened glasses in bars (Plant, Plant, & Nichol, 1994), training and supervision for managers, door attendants (bouncers) and servers (Graham, 1985; Graham & Homel, 1997; Wallin & Andréasson, 2005).

Some of the most impressive gains in reducing crime, disorder and other problems have been achieved by the rigorous enforcement of existing laws, either by itself or as part of wider community alcohol action plans. There are a number of examples of such successful initiatives. These include programmes carried out in Australia (Homel *et al.*, 1994; Graham & Homel 1997; Hauritz, Homel, McIlwain, Burrows, & Townsley, 1998), England (Jeffs & Saunders, 1983), Sweden (Wallin & Andréasson, 2005) and Wales (Maguire & Nettleton, 2003). Broader initiatives such as those in Australia and Sweden have involved: 'community mobilization, training of servers in responsible beverage service, and stricter enforcement of existing alcohol laws' (Wallin & Andréasson, 2005, p. 207).

The main objectives of harm minimization strategies have been described as follows:

- Have they worked?
  - Are they transferable to other contexts?
  - Are they politically/socially acceptable?
- (Plant *et al.*, 1997).

Another crucial consideration is whether or not initiatives that are effective are sustained. Sadly some ventures, such as that in Torquay, England (Jeffs & Saunders, 1983) and Surfers' Paradise, Australia (Graham & Homel, 1987), have not been maintained and the original gains have been lost (Hauritz *et al.*, 1998; Plant & Plant, 2006).

In conclusion, there is sufficient empirical evidence to guide the design and organization of bars and other licensed premises. This promises to aid in the reduction of heavy drinking, aggression, violence, crime, and alcohol-impaired driving. The most obvious

value of evidence on the layout and characteristics within the bar relates to the design of new bars and the modification of existing premises. The maximum effect of basing policy on the evidence of which factors should be avoided depends upon bar owners and managers being motivated (or compelled) to adopt safety and social responsibility their main goals, rather than simply raising profits. Moreover, local authorities have a major role to play in limiting the numbers of licensed premises in their areas, as well as their location and density in specific localities such as town centres. It is emphasized that harm minimization strategies that are effective must be sustained for the long-term. Finally, harm minimization is only likely to be really effective if alcohol's price and availability are restrained.

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