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#### WHY HAVE AN ALCOHOL PLAN?

Western Australians are concerned about the problems that arise from hazardous and harmful alcohol use and have identified alcohol as the community's primary drug of concern.

The Western Australian Alcohol Plan 2006-2009 (Alcohol Plan) is an important step towards a culture of responsible alcohol use. Social values and standards influence how alcohol is consumed and the resulting behaviour. A society that accepts excessive alcohol use is a contributing factor to levels of alcohol-related problems in the community. A sustainable decrease in the problems caused by alcohol can therefore be achieved by changing the culture in Western Australia to support safer drinking environments and practices.

## THE CONTEXT OF THE WESTERN AUSTRALIAN ALCOHOL PLAN

The Alcohol Plan is a whole-of-government initiative under the Western Australian Drug and Alcohol Strategy 2005-2009. It is relevant to the government and non-government sectors and those involved in community-based activity both state-wide and locally.

The Alcohol Plan was developed in consultation with key government and community-based agencies and groups. The commitment of government agencies is detailed within the Alcohol Plan.

There are other commonwealth and state government strategies, policies and programs that are complementary to the Alcohol Plan, and which will contribute to reducing alcohol-related problems. Examples include: *The Western Australian Family and Domestic Violence State Strategic Plan; Arriving Safely: Road Safety Strategy for Western Australia 2003-2007; Community Safety and Crime Prevention Strategy; Strong Spirit Strong Mind:* 

Western Australian Aboriginal Alcohol and Other Drugs Plan 2005-2009; National Alcohol Strategy; and, the Drug and Alcohol Office's Strategic Framework for Enhancing Access to Treatment and Support Services.

#### **BUILDING ON PAST ACHIEVEMENTS**

The Alcohol Plan builds on a number of evidence-based achievements that have already had an impact on reducing alcohol-related harm in Western Australia, many of which will continue in the future.

There are a number of successful collaborative prevention initiatives that have been implemented in this state. Examples include: the introduction of random breath testing; responsible service of alcohol training programs; media-based social marketing programs such as Respect Yourself; amendments to the Western Australian Liquor Act that promote harm minimisation; and the Leavers Live program for school leavers.

More recently, early intervention initiatives such as Best Beginnings - Intensive Home Visiting Services have targeted the factors that contribute to protecting against later alcohol and other drug problems.

There are numerous examples of treatment and support initiatives that have had an impact on the reduction of alcohol-related harm in Western Australia, such as: the Alcohol and Drug Information Service and the Parent Drug Information Service; government and non-government treatment services such as Next Step Alcohol and Drug Treatment Services, the North and South Metropolitan Drug and Alcohol Centres, Community Drug Service Teams; non-government alcohol and other drug services including residential rehabilitation; sobering up centres; and brief intervention programs in health settings.

Harmful alcohol use: A pattern of use that is causing damage to health, which may be physical (e.g. liver cirrhosis, cancer) or mental (e.g. depressive episodes related to heavy alcohol intake) and typically occurs over the medium to long term. Harmful use commonly, but not in all cases, has negative social consequences. Put simply, harmful use means the drinker is already experiencing harm.

<sup>&#</sup>x27;Hazardous alcohol use: A pattern of use that increases the risk of harmful consequences for the user. In contrast to harmful use, hazardous use refers to patterns of use that are of public health significance despite the absence of any current disorder in the individual user. Put simply, hazardous use means it is more likely the drinker will experience harm. (World Health Organisation, 1994)

There has also been a significant commitment to workforce development such as alcohol and other drug training in undergraduate and postgraduate courses in the tertiary sector.

The collection of timely information and research has been instrumental in developing a more informed approach to reducing alcohol-related problems in Western Australia.

Collection of wholesale alcohol sales data and drink driving-related data are examples of information and research initiatives that have been undertaken.

## ABOUT THE WESTERN AUSTRALIAN ALCOHOL PLAN

There are five Key Strategic Directions within the Alcohol Plan. These outline proven, effective measures that reduce alcohol-related problems and are relevant to all at-risk groups. The Key Strategic Directions are:

- 1. Helping young people avoid high-risk alcohol consumption.
- 2. Community action to support responses to alcohol-related problems.
- 3. Responsible supply and service of alcohol.
- 4. Enhancing access to treatment and support for people affected by alcohol-related problems.
- 5. Information, monitoring and evaluation.

The Key Strategic Directions have been chosen based on evidence of the most effective approaches to achieve reductions in alcohol-related problems.

Within each Key Strategic Direction there are a number of Strategy Areas. Strategy Areas are groupings of action that

will help to achieve the goals of the Key Strategic Direction. Strategy Areas include examples of key tasks that will be undertaken or led by government agencies in cooperation with other agencies or groups (Key Government Initiatives). Recommended evidence-based initiatives that could be developed and implemented at a community level are also listed.

For a summary of key research findings that outline the current evidence base from which Key Strategic Directions and Strategy Areas are derived and a full list of specific actions committed to by government agencies, please refer to the Western Australian Alcohol Plan 2006-2009.

Reporting on the Alcohol Plan will be integrated with existing and future reporting requirements of the Western Australian Drug and Alcohol Strategy 2005-2009.

### THE IMPACT ON THE COMMUNITY

Hazardous and harmful alcohol use have a detrimental effect upon the broad Western Australian community. In many instances, these problems are obvious, affecting friends, family and other people whom we know. They may also be indirect, delaying access to services such as police and emergency departments in hospitals. Resources may be diverted to deal with alcohol-related problems, and costs of services, such as insurance and local government rates, may increase due to property damage and harm to others.

- The social cost of alcohol problems for Western Australia was conservatively estimated at more than \$750 million for the financial year 1998/99.
- Between 1985 and 2001 it was estimated that an average of 315 Western Australians per year died from risky or high risk alcohol use.<sup>2</sup>
- In 2001, alcohol was responsible for a total of 8,196 hospital admissions and 43,238 bed days in Western Australia.<sup>3</sup>
- Rates of alcohol-caused death and hospitalisation are higher in non-metropolitan than metropolitan areas in Western Australia.
- The Western Australian Taskforce on Domestic Violence found that 42% of domestic violence incidents involved alcohol. However, alcohol is not an excuse for violence.
- The *Gordon Inquiry* found hazardous and harmful alcohol use to be significant contributing factors in family violence in Indigenous communities.<sup>5</sup>
- Drink driving contributes to one in four fatal crashes in Western Australia. 6
- In 55% of all pedestrian fatalities in 2001, the deceased had a blood alcohol content of at least 0.05 and 35% were at least 0.15.
- In any one year, alcohol-related problems are experienced by 27% of the working population.

- A 2004 survey of Western Australians aged 16 years and over found:
  - 46% said that they had personally suffered, or a family member or friend had suffered, because of the actions of someone who was drunk. Two-thirds of these said the incident was extremely or very serious.
  - 30% said they had been verbally abused by a person affected by alcohol in the past 12 months, 9% had been physically abused and 18% had been put in fear.<sup>9</sup>
- The number of alcohol-related assaults in Western Australia increased by 52% from 1991/92 to 1997/98.
- Up to 90% of police work is alcohol-related during late night and early morning hours.
- In 2000, there were 17,468 admissions (65% males) to the 10 sobering up centres in WA.
- Problems related to alcohol use can be compounded when alcohol is used in combination with other legal and illegal drugs.
- Hazardous and harmful alcohol use accounts for:
  - 50% of deaths from assault
  - 44% of deaths from fire injuries
  - 34% of falls and drownings
  - 23% of liver cirrhosis
  - 18-24% of mental health disorders
  - 16% of child abuse deaths
  - 12% of suicides
  - 11% of cardiovascular disease
  - 10% of industrial accidents

### **KEY STRATEGIC DIRECTION ONE:**

HELPING YOUNG PEOPLE AVOID HIGH RISK ALCOHOL CONSUMPTION

While per capita alcohol consumption has declined in Australia over the past 20 years, more young people are drinking alcohol, drinking at an earlier age and adopting high risk drinking patterns. They lack experience of drinking and the effects of alcohol and often take part in a range of risk-taking behaviours. In combination, these factors significantly increase the risk of alcohol-related injury, anti-social behaviour, poisoning, accidental death and other alcohol-related problems for young people.

Research consistently demonstrates the importance of early childhood development as a critical stage in the prevention of problems in later life, including alcohol-related harm. Connectedness to adults, connectedness to school and connectedness to the community can act as protective factors and reduce risk.

It is important to help delay the uptake of alcohol by young people to reduce the prevalence of high-risk patterns of alcohol consumption. Evidence-based school drug education can have a positive impact in preventing and reducing subsequent hazardous and harmful alcohol use among youth.

#### OUTCOME

• REDUCTION IN THE ONSET OF HIGH-RISK PATTERNS OF ALCOHOL CONSUMPTION DURING ADOLESCENCE AND BEYOND.

#### **STRATEGY AREA 1:**

#### **EARLY CHILDHOOD INTERVENTION**

There are a number of factors that either place a child at risk of, or protect them from, developing alcohol-related problems later in life. The impact of each of these risk and protective factors varies depending upon the phase of development of the child.

Healthy family life during early childhood is emerging as a critical influence that can build resilience and reduce the risk of a range of subsequent social and behavioural problems, including how alcohol is used. School, peer and community factors can also be modified to improve the

social and emotional well-being of children, which in turn can protect against future hazardous and harmful alcohol use and other social and health problems.

Many of the factors that contribute to alcohol-related problems are common to other problems, including poor mental health, conduct disorders and antisocial and criminal behaviours. By focusing on these factors, efforts to reduce problems in one area are likely to also have an effect on other problems.

#### **KEY GOVERNMENT INITIATIVES**

- Support existing effective strategies and programs targeting early childhood intervention, such as:
  - Universal Offer of a Home Visit a child health nurse visits new mothers with their baby upon request. An assessment of risk and protective factors and child development occurs.
     The child health nurse together with the parent develops a plan of care outlining frequency of visits, venue and referral needs.
  - Best Beginnings Intensive Home Visiting Services
  - expectant parents and parents of children aged 0 to 2 years who are identified as high risk are provided with an intensive home visiting program by professional parent support workers.
  - The Early Years Strategy focuses on the well-being of children through local services and other supports for young children, their families and carers. It contributes to children's

- optimal early development and supports positive parenting. The strategy promotes community action and capacity building in the development and delivery of services for young children (0-8 years).
- School Drug Education Road Aware Early Childhood Drug Education Teacher Support Package - resilience education for Kindergarten to Year 3 students.
- Create and strengthen structures to support collaboration between government departments concerned with the well-being of children, and that impact on the presence of risk factors such as housing and employment.
- Further research to gain better understanding of the association between hazardous and harmful alcohol use in families and physical and emotional maltreatment of children, and sexual abuse.

- supporting regional implementation of programs that target early childhood intervention as outlined above (e.g. home visiting services for disadvantaged families);
- developing and improving local partnership programs across sectors in the health and human services sector that impact on early childhood well-being;
- providing professional development programs for workers dealing with families to ensure improved identification and management of at-risk children;
- community groups and agencies supporting locally-relevant innovative activities that support early childhood development.

#### STRATEGY AREA 2:

### IMPLEMENT EVIDENCE-BASED PRIMARY AND SECONDARY SCHOOL DRUG EDUCATION

The term 'school drug education' is used to describe alcohol and other drug-related prevention and reduction activities that target school-aged children by both classroom teachers and other professionals in a school environment.

Sound evidence-based school interventions can change existing and future alcohol consumption and reduce the risk of developing alcohol-related problems. While the change is small, it occurs over the entire population so the overall benefit of good programs can be large if widely implemented.

Some of the key evidence-based components of effective school drug education are: ensuring that lesson content and scenarios are based on the experiences of young people; testing the intervention prior to implementation; offering 'booster' sessions in later years; providing interactive activities; providing teacher training; adopting a harm minimisation approach; and focusing on effecting behaviour change rather than influencing knowledge and attitudes.<sup>14</sup>

#### **KEY GOVERNMENT INITIATIVES**

- Support evidence-based school drug education by:
  - implementing and supporting K-12 drug education curriculum materials within the context of a whole-of-school (health promoting school) framework;
  - providing comprehensive training and ongoing support for teachers of drug education in schools;
  - supporting schools to develop policies and guidelines for a whole-of-school approach to drug/health education and ensure the effective management of drug use problems for all schools;
- improving support for schools to better manage children affected by alcohol and other drug problems through the In-Touch program.
- promoting parent and community participation in the development and implementation of drug education programs, policies and protocols; and
- developing strategies to ensure that effective school drug education is sustainable.

- encouraging school involvement in evidence-based school drug education;
- setting behavioural outcomes for any drug education session or program. That is, setting outcomes that demonstrate the applied knowledge of the student;
- schools developing alcohol and other drug policies; and
- schools and treatment sector agencies continuing to work closely to identify and manage students at risk of alcohol and other drug use.

#### **STRATEGY AREA 3:**

### SCHOOL ORGANISATION AND BEHAVIOUR MANAGEMENT TO ENCOURAGE POSITIVE INTERACTIONS AND DEVELOPMENT AT SCHOOL

During school years, particularly during primary school, interactions with others at school can play an important role in the development of a student's identity and social ability, which in turn has an impact on risk and protective factors relating to existing and future hazardous and harmful alcohol use.

School organisation is a term used to describe the framework and processes used to identify and manage problems experienced by students to create a safe and positive school environment.

Effective school organisation and behaviour management can encourage positive relationships at school, ensure effective discipline and maximise learning opportunities in order to reduce risk factors for alcohol use. Long-term improvements to development are achievable by implementing these interventions. <sup>15</sup>

#### **KEY GOVERNMENT INITIATIVES**

- Support effective strategies that adopt school organisation and behaviour management approaches such as:
  - Students at Educational Risk Strategy
    - Retention and Participation initiatives to improve attendance, retention and participation of students alienated from school.
    - Behaviour Management and Discipline addresses the issue of class sizes and challenging behaviour for students in Years 8 and 9.
    - Pathways to Health and Well-being in Schools to improve the mental health and well-being of all members of the school community.

- MindMatters a mental health promotion program involving all education systems and sectors for secondary schools developed under the National Mental Health Strategy.
- Aussie Optimism Program a school-based mental health promotion program that provides students with strategies that build their resilience and coping skills, assisting them in making a successful transition to high school.
- The development of a Safe Schools Framework within schools.

- encouraging and supporting schools to increase involvement in programs that improve school organisation and behaviour management;
- developing policy and procedures in schools to prevent and reduce the incidence of 'bullying' and increase connectedness to schools; and
- utilising school facilities for community purposes to develop school connectedness.

#### **STRATEGY AREA 4:**

## MANAGING ACCESS TO ALCOHOL IN PRIVATE SETTINGS FOR YOUNG PEOPLE

In Australia, it is illegal to consume alcohol under the age of 18 years on licensed premises. Uncontrolled or poorly supervised access to alcohol at a young age can lead to harm. Managing access to alcohol by young people can prevent harmful drinking patterns from developing and reduce the risks and harms that result from hazardous and harmful alcohol use at an early age.

There are duty-of-care issues, legal responsibilities and actions that will minimise the risk of problems that private setting hosts, parents and other care-givers should be aware of when planning a function where alcohol and young people are present.

#### **KEY GOVERNMENT INITIATIVES**

- Establish strategies to assist parents to communicate effectively with their children about the consequences of hazardous and harmful alcohol use.
- Coordinate initiatives and targeted resources to inform parents and adults about their rights and obligations when providing alcohol to someone who is underage.
- Seek community input to develop strategies that prevent and reduce the problems associated with supplying alcohol to young people in unlicensed settings.
- Work with tertiary education institutions to minimise alcoholrelated harm by developing policies to address high-risk practices in university settings.

- communities conducting a coordinated, comprehensive program for school leavers that involves a range of initiatives including harm minimisation, structural support, education and alternative activities; and
- creating or using established forums to work with parents and other caregivers about setting clear expectations for underage drinking in the community.

### **KEY STRATEGIC DIRECTION TWO:**

## COMMUNITY ACTION TO SUPPORT RESPONSES TO ALCOHOL-RELATED PROBLEMS

Community action occurs when a community develops, implements and maintains local solutions to respond to and prevent alcohol-related problems.

Effective and lasting change is more likely to occur when the people affected are part of the change process. Interventions need to encompass changes to the structures and operation of the community in a way that supports safer drinking practices and environments.

#### **OUTCOME**

• INCREASED CAPACITY AND COMMITMENT OF COMMUNITIES TO TAKE OWNERSHIP AND CONTROL OF FACTORS WITHIN THEIR LOCAL ENVIRONMENT THAT IMPACT ON ALCOHOL-RELATED PROBLEMS.

#### **STRATEGY AREA 1:**

#### COMMUNITY ACTION IN RELATION TO LOCAL ALCOHOL-RELATED PROBLEMS

Action taken at the national, state and local level can reduce alcohol-related problems within communities. For example, alcohol taxation is something that is instigated at a national level but affects the price of alcohol locally.

However, many initiatives to reduce alcohol-related problems require action from within communities. Effective responses by communities to these problems may need new action or the enhancement of existing action such as enforcement, planning and education.

There are many examples of communities taking ownership

and control of factors within their local environment that address alcohol-related problems. Typically, this has involved building awareness about the problems and effective interventions and developing the abilities of those within the community to implement planned action. Some of the alcohol-related problems that communities in Western Australia have addressed include:

- · underage drinking;
- · drink driving;
- · family and domestic violence;
- · property damage; and
- · late night disturbances.

#### **KEY GOVERNMENT INITIATIVES**

- Develop and implement a community program that builds the ability of communities to develop evidence based initiatives that target alcohol problems.
- Direct government community-related funding to support programs that develop safer drinking environments.
- Encourage and assist local government to support community action
- Develop state-wide information sharing between community groups and agencies for the purpose of reducing alcohol-related problems.
- Identify regional resources to support communities to develop local evidence-based alcohol control initiatives.
- Examine and promote ways to help local communities to act where an alcohol-related problem is identified.
- Investigate the development of a centralised database of key measures of alcohol-related problems for use by communities.
- Support the establishment of a non-government community advocate for alcohol-related matters.

- identifying existing networks and groups in the community who might be concerned about alcohol-related harm;
- identifying the nature and extent of the problems in the local community (e.g. underage drunkenness, drink driving);
- conducting a forum or summit to discuss the problems associated with drunkenness in the community and raise awareness about the issue and possible solutions;
- establishing a mechanism for coordination (e.g. working group or coordinator) that provides a focal point for local planning and implementation of community action targeting the identified alcohol problem(s);
- developing and implementing local strategies to ensure responsible supply and service of alcohol; and
- utilising groups such as voice (formerly the Community Advisory Council) that can raise issues of community concern regarding alcohol-related problems in Western Australia with government and other key influencers.

#### STRATEGY AREA 2:

#### MEDIA-BASED COMMUNITY AWARENESS PROGRAMS

Different forms of media such as television, radio, print and the internet are used in media-based community awareness programs to reach a large proportion of a target audience at once. Media-based initiatives can include paid (advertising) and unpaid (news, editorial and current affairs) approaches.

Media-based activity in itself is not enough to reduce hazardous and harmful alcohol use. However, it can be effectively used to raise awareness and change community acceptance of the associated problems. It can increase support and reinforce specific environmental efforts to reduce high risk, alcohol-related activities such as drink driving and drunkenness, and can be an important tool in community action.

In order to achieve long-term reductions in alcohol-related problems, changes to create safer drinking environments and practices are essential. Such changes are more likely to be effective if the community supports, understands and eventually demands them. <sup>16</sup>

Media-based initiatives therefore have a role in encouraging community debate, raising awareness and reinforcing environmental and structural efforts to reduce alcohol-related problems and harm in the community.

#### **KEY GOVERNMENT INITIATIVES**

- Establish an ongoing, comprehensive, evidence-based community awareness program that supports the creation of safer drinking environments and the reduction of alcohol-related problems.
- Evaluate media-based community awareness programs to assess behavioural impacts.
- Implement public education campaigns on crash and injury risk associated with drink driving and intoxicated pedestrians.
- Provide support to community groups to use media for community action.
- Develop a partnership with media outlets to raise community awareness about alcohol-related problems and possible solutions, as well as how alcohol is portrayed.
- Identify and network with groups in the community who might be concerned about road trauma arising from drink driving and intoxicated pedestrians to encourage a comprehensive, community-wide approach.
- Promote awareness in the community about the risks associated with alcohol use during pregnancy.

- using unpaid media to support or initiate news or media coverage using interviews with local organisations;
- using 'anniversaries' of public events to create a newsworthy story about an issue in the local community;
- translating complex data into media friendly information, particularly to localise and humanise the statistics;
- · commenting to media outlets about their portrayal of alcohol;
- writing letters to the editor to further debate and gain media interest in an issue; and
- using local media to raise community awareness as part of a coordinated set of initiatives that address alcohol-related issues of concern.

### **KEY STRATEGIC DIRECTION THREE:**

RESPONSIBLE SUPPLY AND SERVICE OF ALCOHOL

A sustainable reduction in the problems related to hazardous and harmful alcohol use can be achieved through development of safer drinking environments. Safer drinking environments support a change in the accepted community practices and behaviours that contribute to alcohol-related problems and harm.

The responsible service of alcohol in licensed and unlicensed settings is crucial to create safer drinking environments.

The enforcement and use of existing laws and the application of harm minimisation strategies are both essential parts of a comprehensive approach to reducing alcohol-related harm in the community.

#### **OUTCOMES**

- INCREASED AWARENESS OF WHAT CAN MAKE A SAFER DRINKING ENVIRONMENT.
- INCREASED NUMBER OF SAFER DRINKING ENVIRONMENTS.

#### **STRATEGY AREA 1:**

#### **ENFORCING LAWS THAT PROHIBIT DRINKING UNDER THE AGE OF 18 YEARS**

Minimum drinking age laws have been put in place to restrict access to alcohol and prevent the early onset of drinking problems among young people.

The widespread, active enforcement of these laws accompanied by the prompt prosecution of effective penalties have been shown to have a strong impact on the availability of alcohol to those under the age of 18 years.

#### **KEY GOVERNMENT INITIATIVES**

- Conduct regular police operations that focus on enforcing the minimum age drinking laws in Western Australia.
- Work with relevant authorities and the alcohol industry to include in responsible service of alcohol training the development of management practices to prevent access to alcohol by those aged under 18 years.
- Conduct community awareness strategies about the role of liquor licensing laws in reducing the problems associated with underage drinking.
- Develop capacity for responsible service of alcohol training for persons who sell or supply alcohol on licensed premises.

- licensees ensuring signage is displayed that clearly shows it is an offence to serve alcohol to someone who is under the age of 18 years on licensed premises;
- coordinating a local community-wide approach to reduce the availability of alcohol to underage young people, in both licensed and unlicensed settings;
- community monitoring of outlets selling to underage young people: and
- media advocacy to decrease the acceptability of making alcohol available to underage drinkers.

#### **STRATEGY AREA 2:**

### ENFORCING LAWS THAT PROHIBIT DRINKING UNDER THE AGE OF 18 YEARS

Drunken behaviour and its consequences are related to availability and alcohol serving practices, both in licensed premises and private settings.

On their own, laws and codes of conduct that guide the responsible service of alcohol have little effect without the support of enforcement strategies. <sup>17</sup> Enforcement activity adds utility to education, regulation and environmental strategies that aim to reduce the problems associated with hazardous and harmful alcohol use.

Meaningful and timely action by enforcement and regulatory agencies to develop an actual and perceived likelihood of consequences is integral to maintaining appropriate levels of responsible alcohol service and compliance with the law.

Generally, if responsible service training programs are supported and implemented by management, they tend to work in reducing levels of intoxication and reducing the chance of drunken patrons being served.<sup>18</sup>

#### **KEY GOVERNMENT INITIATIVES**

- Develop as a priority, the capacity and commitment of police to intelligence-led, proactive policing of liquor licensing laws.
- Develop strategies to more effectively address the reduction of service to those who are drunk.
- Work with local government authorities to develop and implement an alcohol policy and management plan that outlines processes for dealing with existing and new liquor licence applications and alcohol problems within the local community.
- Develop clear and specific key performance indicators to report activities that aim to reduce alcohol-related harms associated with licensed premises.
- Support the development of a code of practice related to the activities of registered crowd controllers to reduce alcohol-related problems in relation to licensed premises.
- Review state guidelines on approval processes and requirements for Occasional Licences to ensure safer event management.
- Raise community awareness about the legal requirement for the responsible service of alcohol.

- encouraging regular visits to licensed premises by police as part of a proactive community strategy;
- community members such as licensees working together to establish an Alcohol Accord that addresses local needs;
- providing data on alcohol-related harms to the Liquor Licensing Authority for use when considering liquor licence applications;
- creating safer drinking environments through community action; and
- local authorities working with licensees to implement regular responsible service of alcohol training.

#### **STRATEGY AREA 3:**

#### **OUTLET DENSITY**

Outlet density is a term used to describe the number of liquor outlets within a certain distance of each other. A small area where there are a lot of liquor outlets would be considered to have a high outlet density.

High outlet density can lead to increased competition between operators, drive down prices and place pressure on venues to allow service regardless of age or state of intoxication.

Safety, security and amenity issues can arise as a specific result of the location of a number of licensed premises in close proximity to each other. <sup>19</sup>

#### **KEY GOVERNMENT INITIATIVES**

- Support the establishment of a national research project that develops a model to determine appropriate outlet density, including type of outlet, based on combinations of local risk factors.
- Examine and develop strategies that support and strengthen the ability of local government and the community to influence the number and type of liquor licenses in accordance with local amenity.

- establishing systems at the local level for monitoring and recording when alcohol-related harm occurs across key areas such as violent crime, alcohol-related domestic violence, drink driving, injury, death, illness and public nuisance; and
- local governments utilising or introducing zoning laws that
  consider local needs along with the potential for harm. For
  example, these laws may limit the number of outlets permitted
  within a certain distance, or forbid location near a school. Zoning
  could be used to space outlets farther apart and restrict outlets
  from certain locations.

#### **STRATEGY AREA 4:**

#### **OUTLET TRADING HOURS**

Trading hours have an impact on how much, when and where harm occurs as a result of alcohol intoxication.

Trading hours and days-of-week should be considered in the

local regulation of alcohol availability and in the context of the government and community's ability to provide public transport, health, police and emergency services.<sup>20</sup>

#### **KEY GOVERNMENT INITIATIVES**

- Examine and develop strategies that support and strengthen the focus on a reduction of alcohol-related harm and other alcoholrelated problems in relation to outlet trading hours.
- Improve community notice about, and access to, information about liquor licensing, including trading hours and licensing conditions, to better support community safety and amenity.
- Investigate and promote mechanisms that could assist communities to participate in local licensing matters.
- Work with key stakeholders to prevent and minimise specific harms known to be associated with late trading hours.

- community involvement and action facilitating work with the local liquor industry and relevant authorities in response to trading hours and the minimisation of alcohol-related harm; and
- establishing an Accord to encourage communication and implement initiatives among local industry and the community to minimise alcohol-related harm associated with trading hours.

#### **STRATEGY AREA 5:**

#### **TAXATION**

While the taxation of alcohol is a federal responsibility, states and territories have a role in determining the impact that current taxation systems have on levels of alcohol-related harm within their jurisdiction.

Taxation and other measures that influence price, such as bans on price discounting, can be used to modify consumption levels and patterns of drinking and reduce overall levels of alcohol-related harm. In Australia, beer and spirit products are taxed under a volumetric taxation system (that is, the tax is determined on the alcoholic content of the drink). By contrast, wine is taxed on its wholesale value. This has resulted in a major local market for cheap cask and fortified wines that have been shown to be strongly associated with alcohol-related violence and hospital episodes.<sup>21</sup> Evidence indicates that a tax system based on alcohol volume for all alcohol products will result in reduced alcohol-related problems.

#### **KEY GOVERNMENT INITIATIVES**

- Encourage the Commonwealth Government to investigate the feasibility of introducing uniform volumetric tax on alcohol products, including wine and ready-to-drinks (RTDs).
- Encourage the Commonwealth Government to establish a direct link between alcohol taxation and funds for prevention and treatment initiatives related to hazardous and harmful alcohol use.

Government will work to enhance the capacity of communities to initiate programs and respond to alcohol-related problems at a local level. Initiatives communities could undertake include:

 community groups advocating for a tax system on alcohol products that facilitates a reduction in alcohol-related harm.

#### **STRATEGY AREA 6:**

#### ALCOHOL ADVERTISING AND PRICE DISCOUNTING

There is a relationship between price, consumption and harm. Some alcohol price promotions cause changes in drinking patterns, and do so in a way that is likely to cause increased risk of intoxication. Promotions that encourage the rapid consumption of drinks in a short period of time due to their discount price for a limited duration (e.g. happy hours) are associated with elevated levels of alcohol-related problems, such as violence.

The availability and promotion of cheap alcohol, particularly to high risk groups and communities experiencing difficulties with alcohol, is problematic and requires cooperative solutions where possible, and regulation where it is not possible.

Alcohol advertising can influence perceptions of what is viewed as 'normal' drinking behaviour and supports attitudes that contribute to hazardous and harmful alcohol use and related problems. The development of alcohol products and complementary marketing that appeal to young people is a particularly concerning trend.

There is a need for the National Competition Policy and the Trade Practices Act to recognise that alcohol is not an ordinary consumer product because of the problems it causes within the community. This legislation makes it difficult for some effective prevention and harm minimisation strategies to be implemented because they could be considered restrictive and anti-competitive.

#### **KEY GOVERNMENT INITIATIVES**

- Expand the state policy on responsible promotion guidelines to include off-premise alcohol sales.
- Conduct a review into alcohol advertising in Western Australia and develop appropriate responses.
- Advocate for the Commonwealth Government to review the application of the National Competition Policy and Trade Practices Act in recognition that alcohol is not an ordinary consumer product and that current interpretations can restrict the ability of the community and government to apply evidence-based solutions to reduce alcohol-related problems.

- raising the community's awareness about the alcohol advertising code; and
- $\bullet \hspace{0.4cm}$  supporting the community to make complaints when indicated.

#### **STRATEGY AREA 7:**

#### **ALCOHOL MANAGEMENT IN ABORIGINAL COMMUNITIES**

Many of the strategies included in the Alcohol Plan are relevant to Aboriginal people. The National Drugs Strategy: Aboriginal and Torres Strait Islander Peoples Complementary Action Plan 2003-2009 provides a clear direction for action in Aboriginal communities, as does Strong Spirit Strong Mind: Western Australian Aboriginal Alcohol and Other Drugs Plan 2005-2009.

There are several approaches that have been commonly used in Australia to reduce the problems with alcohol in remote Aboriginal communities, such as the creation of 'dry' areas and use of liquor licensing legislation to increase controls on the availability of alcohol.<sup>22</sup>

#### **KEY GOVERNMENT INITIATIVES**

- Work in collaboration with Aboriginal communities and the liquor industry to review and develop strategies to reduce alcoholrelated harm among Aboriginal people.
- Provide culturally secure information to Aboriginal communities about the rights and responsibilities of communities in relation to laws relating to alcohol.
- Ensure networking, information sharing and coordination between health, law enforcement and community agencies at state and local levels will occur.
- Promote and utilise an intelligence-led approach to address the unlawful supply and use of alcohol.

- community leaders and elders taking a leading role to establish a local alcohol management committee/board;
- promoting collaboration among sobering up centres, night patrols and other agencies such as women's shelters, hospitals and treatment agencies;
- addressing the practice of 'sly grogging' using a collaborative approach among communities, police, the Liquor Licensing Authority and other relevant agencies to ensure that laws are strictly enforced; and
- organising a local forum to discuss alcohol licensing issues within the community for the purpose of developing actions that have community input.

#### **STRATEGY AREA 8:**

#### PREVENTION OF ALCOHOL-RELATED ROAD TRAUMA

When the driver of a motor vehicle has been drinking alcohol, the risk of injury or death to themselves or others is substantially increased. Drink driving is the second most common cause of alcohol-related injury.

The Western Australian road safety strategy entitled *Arriving Safely: Road Safety Strategy for Western Australia 2003-2007* outlines a comprehensive range of evidence-based initiatives to decrease alcohol-related road crashes. Repeat drink drivers represent a much higher risk than other drivers and initiatives that target this high risk group are being considered to complement the general actions described in *Arriving Safely*.

#### **KEY GOVERNMENT INITIATIVES**

- Support the implementation of drink driving initiatives consistent with the *Arriving Safely* strategy.
- Collaborate with road safety and alcohol and other drug agencies to share resources and information where there is mutual interest.
- Introduce a comprehensive range of actions to reduce the number of repeat drink drivers.
- Focus on pre-driver education through the Road Aware Keys for Life pre-driver education program and the Steps to Safer Driving workshop.

Government will work to enhance the capacity of communities to initiate programs and respond to alcohol-related problems at a local level. Initiatives communities could undertake include:

Many of the initiatives listed in the Arriving Safely: Road Safety
 Strategy for Western Australia 2003-2007 require implementation
 by local communities and by agencies state-wide. Community
 groups and individuals will be supported to implement these
 initiatives wherever possible

#### **STRATEGY AREA 9:**

## RESPONSIBLE ACCESS AND SUPPLY OF ALCOHOL IN UNLICENSED SETTINGS

The availability and supply of alcohol in unlicensed settings, such as in private social settings, contributes to alcohol-related problems associated with hazardous and harmful alcohol use.

Problematic behaviours associated with the excessive consumption of alcohol can be commonplace in unlicensed settings, such as private parties. However, the need for the responsible service and supply of alcohol in private settings is becoming more recognised by both hosts and guests. This is

particularly important given the largest proportion of alcohol-related harms occurs from occasional intoxication by people who usually drink safely.<sup>25</sup>

Of particular concern is how alcohol is introduced to young people given they are at greater risk of experiencing harm, even from one-off drinking occasions (as outlined in Key Strategic Direction One, Strategy Area 4).

The creation of safer unlicensed drinking environments will support a culture of responsible alcohol use to develop.

#### **KEY GOVERNMENT INITIATIVES**

- Develop initiatives and targeted resources that support the creation of safer drinking environments and inform hosts about their rights and obligations when providing alcohol to guests on unlicensed and private premises.
- Develop initiatives and targeted resources that inform organisers of large public events about their rights, obligations and responsibilities when providing alcohol to patrons.
- Collaborate with local government to investigate and strengthen legislative and regulatory provisions that support a safer community with regard to alcohol-related problems.
- Identify regional resources to support communities to develop local, evidence-based alcohol control initiatives.

- local government authorities developing alcohol policies and practical management plans that outline how the organisation will manage and assist their communities to respond to alcohol problems or complaints;
- supporting community action to identify problematic unlicensed settings and develop evidence-based initiatives to reduce the problems at a local level.

### **KEY STRATEGIC DIRECTION FOUR:**

ENHANCING ACCESS TO TREATMENT AND SUPPORT FOR ALCOHOL-RELATED PROBLEMS

Investment in various forms of treatment and support will have benefits in terms of community level reductions in crime, road trauma, hospital admissions and other alcohol-related problems.

There is potential to increase savings at a community level by:

- ensuring access to evidence-based treatment;
- providing evidence-based brief interventions in a wide range of health care settings; and
- providing comprehensive programs in the justice system, such as diversion programs, to reduce re-offending and other alcohol-related problems.

The early identification and possible prevention of alcohol-related problems, such as foetal alcohol effects, is an important part of the scope of an effective treatment and support strategy.

Enhancing access to treatment and support for alcohol-related problems requires collaboration and coordination between key agencies to ensure effective outcomes.

#### **OUTCOMES**

- ENHANCED ACCESS TO A RANGE OF HIGH QUALITY HEALTH CARE SERVICES FOR THE MANAGEMENT OF ALCOHOL DEPENDENCE AND PROBLEM DRINKING.
- IMPROVED AWARENESS AND CAPACITY OF PEOPLE WORKING IN HEALTH CARE SETTINGS TO IDENTIFY ALCOHOL-RELATED PROBLEMS VIA INCREASED SCREENING AND BRIEF INTERVENTIONS.
- ENHANCED ACCESS TO TREATMENT AND REHABILITATION

  PROGRAMS FOR OFFENDERS WITH UNDERLYING ALCOHOL

  PROBLEMS, WHICH IS LINKED TO THE OFFENDING BEHAVIOUR.

#### STRATEGY AREA 1:

### TREATMENT AND SUPPORT FOR ALCOHOL-RELATED PROBLEMS AND DEPENDENCE

Treatment is effective in assisting problem drinkers reduce or abstain from alcohol use, and thus impacts on levels of alcohol-related problems in the community. Support services are those interventions that have no specific treatment component but which offer care to people, including children of parents affected by alcohol problems. These include sobering up centres and accommodation services.

#### **KEY GOVERNMENT INITIATIVES**

- Continue to provide a range of treatment and support options for alcohol-related problems through government and nongovernment agencies.
- Increase community awareness of the full range of options available to manage problem drinking and alcohol dependence.
- Enhance access to evidence-based treatment, as identified in the Drug and Alcohol Office's Strategic Framework For Enhancing Access To Treatment and Support Services available at http://www.dao.health.wa.gov.au/pdf/tss\_framework.pdf
- Include the provision of alcohol withdrawal management and treatment services in accreditation requirements for major public and private hospitals.
- Provide a 24-hour phone service providing specialist alcohol and other drug advice for health and human service workers.

- Provide a 24-hour advice and counselling service to people, including parents, affected by alcohol use.
- Ensure access to professional training in effective responses to alcohol problems.
- Review the utilisation of sobering up centres in Western Australia.
- Establish linkages between mental health and drug and alcohol data collections.
- Improve access to, and links between, services for people with co-existing alcohol and mental health problems.
- Promote and support guidelines for the treatment of alcohol problems.

- referring clients with alcohol-related problems for further assessment and treatment to local Community Drug Service Teams, general practitioners or health services;
- utilising the Alcohol and Drug Information Service and the Parent Drug Information Service for state-wide, 24-hour telephone services for people affected by alcohol-related problems;
- using Guidelines for the Treatment of Alcohol Problems and related resources available at http://www.health.gov.au/pubhlth/publicat/ document/alcprobguide.pdf; and
- being familiar with, and promoting, the Australian Alcohol Guidelines: http://www.health.gov.au/nhmrc/publications/ pdf/ds9.pdf

#### **STRATEGY AREA 2:**

### HEALTH SERVICE REORIENTATION TO INCREASE USE OF SCREENING AND BRIEF INTERVENTIONS

Brief interventions can be implemented in a wide range of primary health settings. They are highly cost effective strategies with considerable potential for harm reduction if widely implemented. This involves increasing awareness about harms associated with certain drinking levels and

helping those drinking at hazardous or harmful levels to make an informed decision about cutting down. In so doing, there will be an overall reduction in alcohol-related morbidity, mortality and associated social and economic costs to the whole community.

#### **KEY GOVERNMENT INITIATIVES**

- Establish operational instructions and guidelines, review resources and provide support for workers in primary health settings to implement brief interventions.
- Provide training and resources to support general practitioners in screening and using brief interventions with their patients.
- Provide training for health workers to enable screening and identification of risky alcohol use and the ability and confidence to instigate brief interventions with clients when required.
- Distribute guidelines to all major health services within government and non-government agencies on managing alcohol-related problems.
- Work with general practice and other health settings to overcome barriers to using brief intervention and provide incentives (or link to existing incentives) where appropriate.

- screening for drinking problems, which can be done quickly and
  effectively. Certain physical disorders or signs can suggest high
  levels of drinking, however these are not conclusive, so the use
  of standardised screening techniques are also recommended,
  such as brief questionnaires (see Guidelines for the Treatment of
  Alcohol Problems); and
- community groups, local general practitioners and local media encouraging and supporting brief interventions in primary health care settings.

#### **STRATEGY AREA 3:**

## DIVERSION AND OTHER JUDICIAL PROGRAMS FOR OFFENDERS WITH ALCOHOL-RELATED PROBLEMS

There is a significant link between alcohol use, crime and reoffending. Many people who commit crimes have underlying alcohol problems that respond to intervention. There is some evidence that early intervention, diversion, treatment and re-entry programs reduce re-offending and increase the health and socio-economic outcomes for those involved.

#### **KEY GOVERNMENT INITIATIVES**

- Implement the Drug and Alcohol Office's Strategic Framework for Enhancing Access to Treatment and Support Services initiatives, including those identified in the section entitled Enhancing Access to Diversion Options for Offenders with Alcohol and Other Drug- related Issues.
- Seek Commonwealth Government support to broaden drug diversion assistance to include people with alcohol as their primary drug of concern.
- Consider complementary actions that specifically target repeat drink drivers.
- Conduct research on:
  - The impact of imprisonment on alcohol dependency.
  - The impact of alcohol reduction programs on offending.
  - Culturally secure alcohol and offending programs.
  - Therapeutic communities and alcohol-related problems.

### **KEY STRATEGIC DIRECTION FIVE:**

INFORMATION, MONITORING AND EVALUATION OF THE ALCOHOL PLAN

In an effort to understand and continuously improve efforts to reduce the impact that hazardous and harmful alcohol use has on individuals and the community, there must be a commitment to monitor, evaluate and report progress of the Alcohol Plan.

#### **OUTCOMES**

- MONITORED PROGRESS ON THE REDUCTION OF ALCOHOL-RELATED PROBLEMS IN WESTERN AUSTRALIA.
- MONITORED IMPLEMENTATION OF THE ALCOHOL PLAN TO ENSURE AN EVIDENCE-BASED APPROACH IS BEING FOLLOWED.
- DISSEMINATED INFORMATION AND RESEARCH THAT INFORMS THE DEVELOPMENT AND IMPLEMENTATION OF INITIATIVES USING AN EVIDENCE-BASED APPROACH.

## STRATEGY AREA 1: INFORMATION ABOUT ALCOHOL-RELATED PROBLEMS

Accurate, timely and relevant information is essential to understanding the nature and extent of alcohol-related problems.

This information about the impact of alcohol on the community is very important, along with an awareness of the initiatives that can make a difference to reducing alcohol problems.

#### **KEY GOVERNMENT INITIATIVES**

- Progress as a matter of urgency the establishment of a standing interagency coordination group to share and consolidate alcoholrelated information for use state-wide, regionally and locally.
- Collect alcohol sales data annually to calculate per capita consumption.
- Conduct three-yearly, state-wide prevalence surveys of alcohol use.
- Develop and implement strategies to ensure that the recording of alcohol-related presentations, including place-of-last-drink, is incorporated into health service protocols.
- Promote and expand, as a matter of urgency, the Police Incident Management System to support intelligence-led policing of alcohol-related problems. This should also include police recording place-of-last-drink for all alcohol-related incidents attended.

- sharing of information between community groups and agencies for the purpose of reducing alcohol-related problems;
- utilising information provided to local communities about key alcohol-related indicators to aid evidence-based community action;
- translating complex data into media friendly information particularly to localise and humanise the statistics; and
- establishing systems at the local level for monitoring and recording when alcohol-related harm occurs across key areas such as violent crime, domestic violence, drink driving, injury, death, illness and public nuisance. This information should not identify individuals and should be shared with the community.

## STRATEGY AREA 2: MONITORING ALCOHOL PLAN PROGRESS

Ongoing monitoring of key measures of alcohol-related problems and initiatives provides critical feedback about performance. It also makes it possible for review and adjustments to be made to the Alcohol Plan where necessary.

Performance indicators and measures that accurately reflect these indicators have been identified.

#### THE PERFORMANCE INDICATORS FOR THE WESTERN AUSTRALIAN ALCOHOL PLAN ARE:

- Deaths from conditions attributable to hazardous and harmful alcohol consumption.
- Hospital admissions attributable to hazardous and harmful alcohol consumption.
- Alcohol attributable deaths and hospitalisations for young people aged 12 to 25 years.
- Estimated percentage of total alcohol consumption that is hazardous and harmful.
- Rates of serious night time crashes and fatalities.
- Rates of serious night time assaults.
- Economic costs of alcohol use.
- Injured people attending emergency departments from 10pm to 6am.

- Percentage of males and females who drink at hazardous and harmful levels for harms caused by acute effects of alcohol consumption.
- Percentage of males and females who drink at hazardous and harmful levels for harms caused by chronic effects of alcohol consumption.
- Number of episodes of alcohol treatment.
- Number of people completing treatment for alcohol-related problems.
- Number of drink driving offences recorded.
- Number of assault charges in high alcohol hours.
- Number of liquor licensing infringement notices and charges issued in relation to the responsible service of alcohol.
- · Number of people attending sobering-up centres.

#### **KEY GOVERNMENT INITIATIVES**

- Coordinate annual reporting about progress on implementation and performance of the Alcohol Plan.
- Develop clear and specific key performance indicators to report activities that aim to reduce alcohol-related harms associated with licensed premises.
- Evaluate media-based community awareness programs to assess behavioural impacts.
- Collection of wholesale sales data for the purposes of calculating per capita consumption.

- reporting progress on performance indicators to communities, using local measures where possible; and
- reviewing initiatives undertaken by local communities to implement the Alcohol Plan.

# IMPLEMENTATION OF THE WESTERN AUSTRALIAN ALCOHOL PLAN

The Alcohol Plan provides direction for a comprehensive and collaborative approach to reduce alcohol-related problems in the community. The direction is based on what the evidence says is effective.

The success of the Alcohol Plan relies on effective implementation of the initiatives outlined in the plan. There are four critical factors to success. These are:

- building community support and action to reduce alcohol-related problems;
- achieving coordinated and collaborative action across government, community and industry;
- focusing the use of resources and efforts on those initiatives that provide the greatest reduction to alcohol-related problems; and
- government leadership that promotes policy and practices which support the reduction of alcohol-related problems and, through unintended effects, make it no worse.

The implementation of the Alcohol Plan will result in more effective use of police, welfare and health resources and improve the health and well-being of Western Australians.

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