

Community-based alcohol prevention – local models of alcohol prevention

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Community programs and local action

- Seeks to change collectives rather than to change individual behaviour.
- Programs take into account the fact that national policies are implemented on local and regional level. At the same time, local action must be sensitive to local needs and cultural norms, and mindful of minority groups.
- The roots are on one hand on civil action, on the other hand on science -based efforts to promote public health. Early learning of evidence-based community action stems from prevention of coronary heart disease (Oppenheimer et al.2011).
- Scientifically measured outcomes also in prevention of alcohol related harms.



Why is it necessary to work also on the local level?

- Sometimes national action is not possible.
- Community action can influence, inform and contribute to national and international efforts in reducing alcohol-related harm.
- Social availability of alcoholic drinks is important: peer groups, friends, families and other social networks influence peoples' drinking.
- Local opinion climate is decisive in determining which kinds of policies will be feasible.

What can be done? List of central community action measures

- 1) Reduction of the social and commercial availability of alcohol among adolescents
- 2) Promotion of responsible alcohol sales in restaurants and bars
- 3) Early interventions and support among the risk groups or vulnerable populations
- 4) Working in specific settings or environments (schools, universities, recreational settings).
- 5) Influencing community attitudes and norms
- 5) Developing sustainable structures and local policies

1. Reduction of the social and commercial availability of alcohol among adolescents and young adults

- Many countries have legal restrictions on the age at which young people may purchase alcohol. The law is often loosely enforced.
- Commercial availability of drinks among minors can be limited by strengthening law enforcement and sanctions. Activating the entrepreneurs and staff to follow the legislation.
- The citizens, especially parents, can be engaged. Social availability of alcohol from friends, siblings and parents can be influenced.
- Implemented in several community projects, measured results.

A youngster buying alcohol in the street in Stockholm

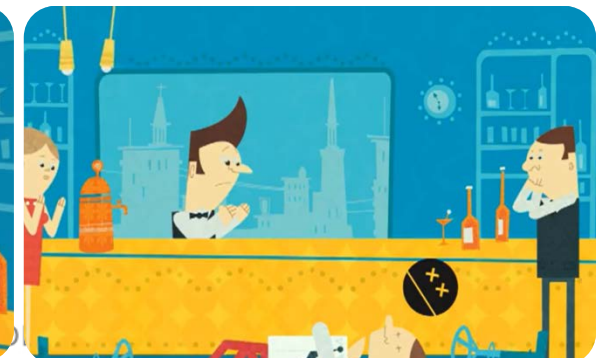
(Source: Aftonbladet)



2. Promotion of responsible alcohol sales in restaurants and bars.

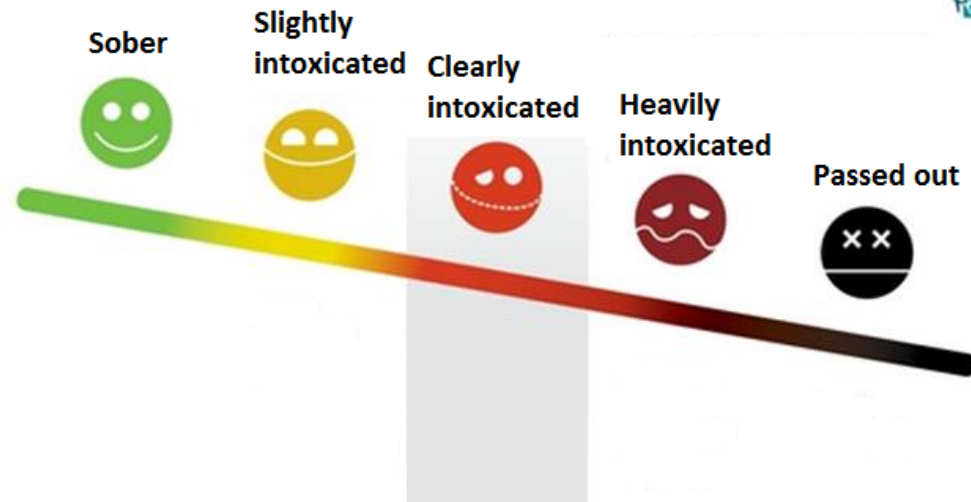
- In many countries liquor laws include legal requirements stating that alcohol is not served to drunk persons. Community programs have included efforts both to train bar staff and their managers in limiting levels of intoxication among their customers, and to increase law enforcement.
- The early programs in Responsible Beverage Service begun in North America and they had a predominant focus on the prevention of drinking and driving. Later projects have widened the aims to include assaults and night-time accidents due to night-time heavy drinking.
- Training has to be combined with increased surveillance.

2. Responsible beverage service



Degrees of intoxication

Helsedirektoratet



3. Other restrictions on local availability of alcohol /outlet densities and opening hours

- Studies suggest that limits in outlet density may be an effective means of controlling alcohol problems.
- Limits on outlet density need to be taken more seriously as an effective policy tool for the reduction of alcohol-related harm.
- In Tennant's Creek, an outback community in Australia, an Aboriginal community group mounted a long and eventually successful campaign to close the local pubs and off-premise outlets on the day when the pay checks arrived, thus reducing the harms that heavy drinking on that day had caused.

(Stockwell and Gruenewald 2004, 233; Gray et al. 2000)

4. Influencing community attitudes and norms

- Community attitudes and norms influence both the acceptability of drinking and the concern about the harms caused by it.
- Influencing community attitudes and norms are an essential part of any intervention. It is not a one-way inflow of education, but a dialogical process, an initial part of carrying out the preventive work.
- In order to succeed, the project needs to get political support, enough attention, and have some symbolic value important to the local people.
- Local stake-holders and citizens need to be allowed to contribute ideas and arguments in the formation of the reforms , to participate and have a sense of ownership. This is essential for the sustainability of the work.
- Important subpopulations' drinking norms (subgroups based on age, gender, religion, ethnicity etc.) may differ from those of the majority. The dialogical way of working is important also from this point of view.

Supportive policy provisions

- National laws like minimum drinking age, ban on sales for intoxicated customers, laws on traffic safety and laws limiting the non-licensed production of alcohol are useful and important “back-bones” for local preventive action. It would be important to get some political and administrative support from levels outside the individual community. Helps also in continuation of the work.
- It is crucial to obtain a mandate from the local leadership.
- Possibilities of cooperation with other programs with related goals (e.g. youth projects, work to prevent criminality or poverty etc.)
- When national supportive policy provisions don't exist, there may be possibilities to go forward using local regulations or restrictions.

The coordinator

- Coordinator or an activity leader gives the project the address and a face. The coordinator creates the dialogue between the community leaders and the key actors.
- Coordinator communicates the vision in terms of the change required. Emphasis on the "Why?"
- Organises the planning and implementation, creates working groups.
- Generates short-term wins to reinforce the change.
- Identifies and organises data collection to demonstrate and document the local problems, solutions and actions.
- Links to other community actors or regional support.

Choosing effective strategies; research evidence

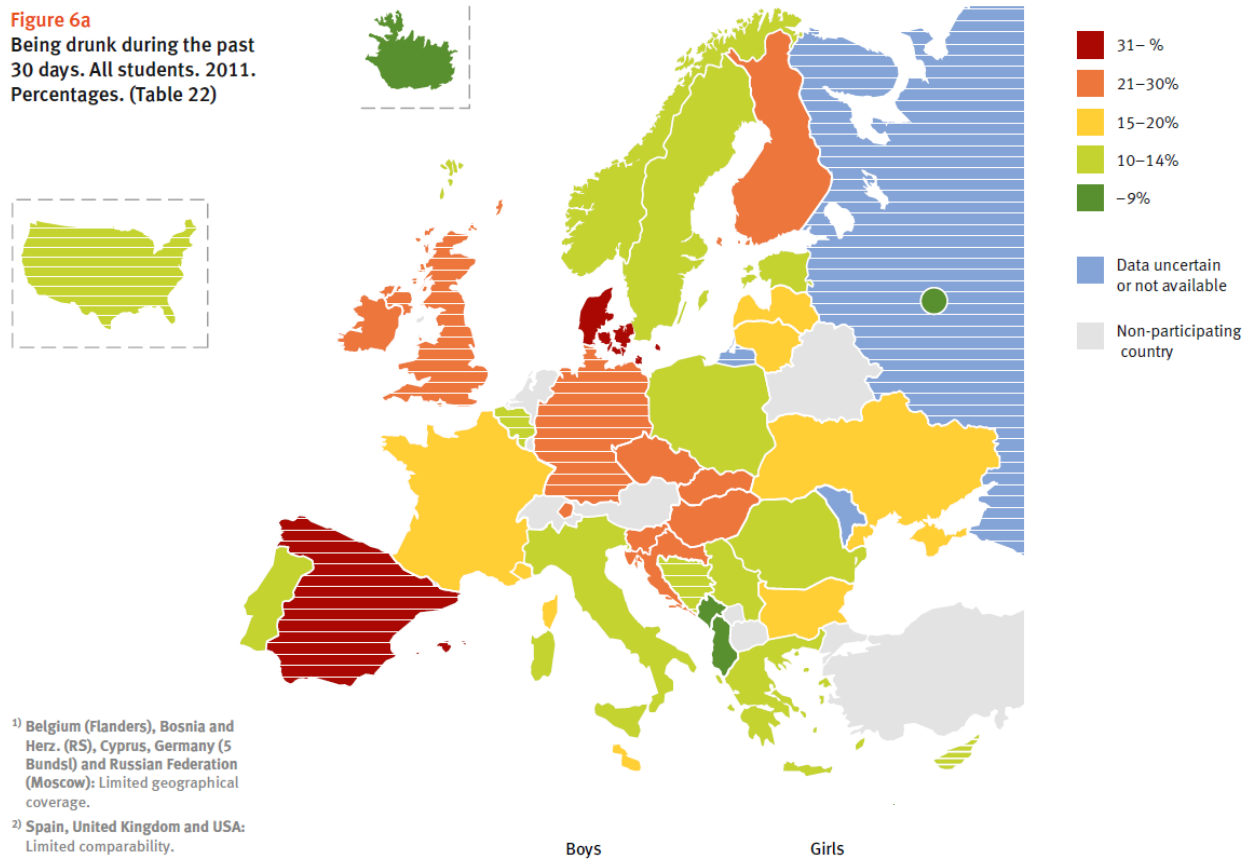
- Over recent years some systematic reviews have analysed the results from studies testing the effectiveness of substance use prevention programs.
- Several attempts have also been made to summarise the information from the expanding evaluation literature.
- Anderson, P et al (eds.)(2002)., Andréasson et al 2000; Casswell et al 1999; Giesbrecht et al 1990, Holder et al 1997; Holmila 1997; Holder 2000; Homel & Clark 1994; Wagenaar et al 2000; Wallin et al 2005, Cuijpers, 2002; Flay, 2000; Foxcroft, Ireland, Lister-Sharp, Lowe & Breen, 2003; Komro & Toomey, 2002; Tobler et al., 2000, Babor et al 2003; Edwards et al 1996; Andréasson 2002; Heather et Stockwell 2004.

Finnish experience: “Local Alcohol Policy” (Pakka) in Finland 2004-2007

- The project was carried out in Jyväskylä region with 142,000 inhabitants and Hämeenlinna region with 90,000 inhabitants.
- It aimed to
 - 1) Create local structures and working methods for alcohol prevention
 - 2) Change community attitudes and norms related to local alcohol control
 - 3) Reduce underage drinking and availability of alcohol in retail stores and licensed premises, as well as from friends, siblings and parents and
 - 4) Reduce intoxication and related harms.

Finland in Europe

Figure 6a
Being drunk during the past 30 days. All students. 2011. Percentages. (Table 22)



¹⁾ Belgium (Flanders), Bosnia and Herz. (RS), Cyprus, Germany (5 Bundesl) and Russian Federation (Moscow): Limited geographical coverage.
²⁾ Spain, United Kingdom and USA: Limited comparability.

PAKKA – actions consisted of several components of parallel and coordinated interventions

- The law enforcement and sanctions were strengthened.
- Drama-based training courses to shop and restaurant workers. Parents' educational events through schools.
- Structures for local co-operation. An action group was assembled with various stakeholders.
- Public awareness of problems was raised combining community actions and with media campaigns.
- Young adults and parents were involved in the activities.
- The results of the evaluation study were actively used in planning and implementing the local actions.

Community coalitions: who were the local actors?

- Social and health professionals
- Police
- Schools
- Media
- Liquor license authorities
- Restaurant and shop personnel
- Local politicians
- Parents and other citizens



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Sustainability as a goal

- Sustainability and continuity after the project's end was aimed from beginning.
 - to give a down-to-earth example of practical methods, which are accessible to all local actors
 - to develop the regional organisation of local preventive work.
 - to create a network of activists
- Presently, PAKKA –type activities are carried out in several local areas in Finland, and are supported by a national network and the state administration.

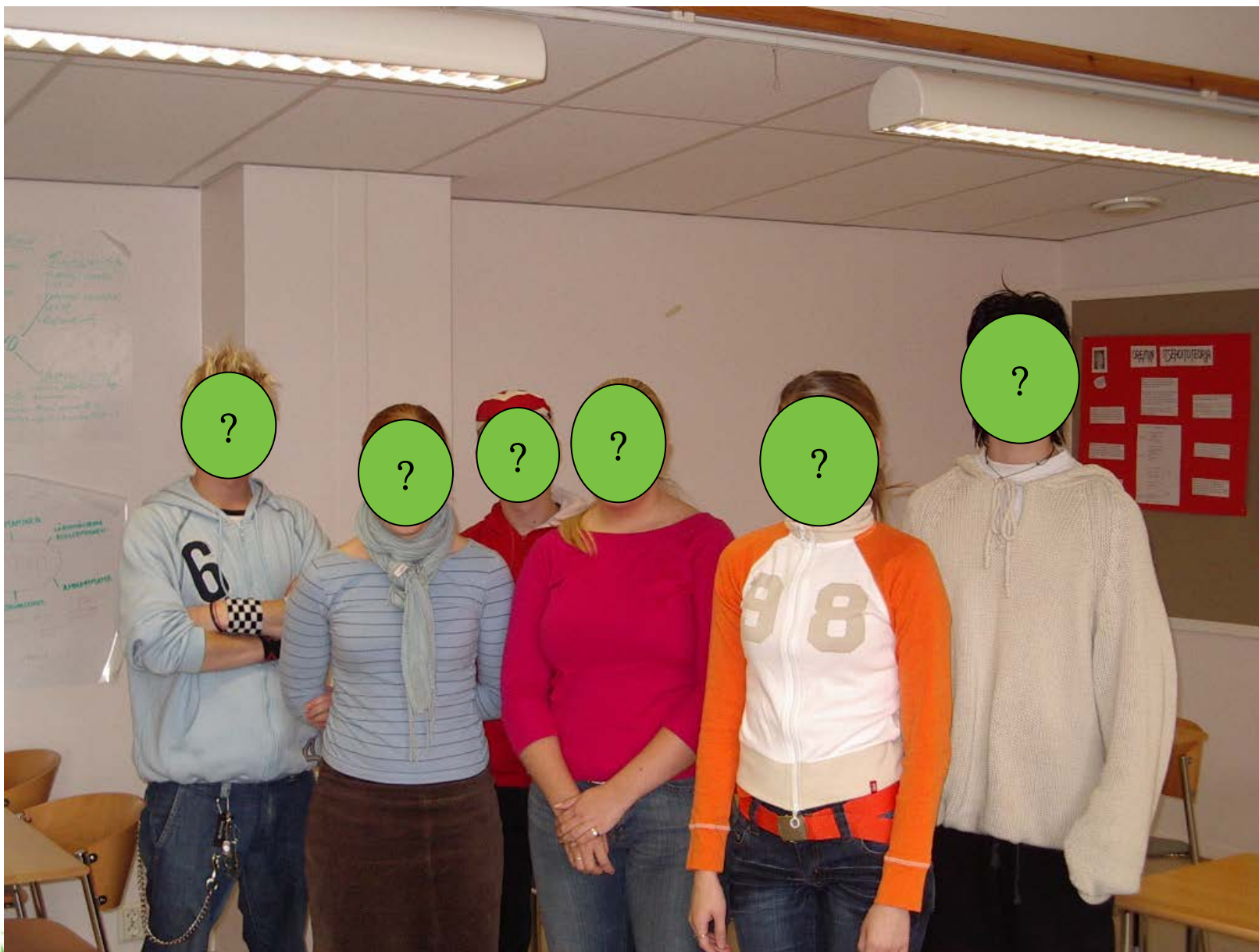
What motivated the local authorities?

- Costs of alcohol harms to municipal services (health care, social problems, social order etc.) are met at the local level.
- Social order and pleasant environment increases the possibilities for successful local economy.
- Learning about cost-effective methods: if authorities believe in the possibilities of prevention, they are more likely to put them in practice.
- Possibilities to overcome the political difficulties: alcohol issues are linked with many conflicting interests, and local authorities may not want to get involved with these, unless it is shown that agreement can be achieved in some issues. Typically, preventing the children and the young are such issues.

About research:

1. Under-age purchase trials

- The goal was to evaluate the effects of PAKKA-action on enforcement of age-limit controls: how easy is it for the under-aged to buy alcohol? (Karlsson et al 2008).
- A controlled experiment in 2004 and 2006 in an intervention and in a comparison region. The method was purchase trials. The purchases were carried out by 8 adult, but younger looking students (4 girls and 4 boys). A specialist panel was used to select the students.
- They attempted to buy a certain amount of wine, long drinks, beer or cider without showing an identity card. The experiment was carried out on Wednesdays and Thursdays between 16.00-20.00 A follow-up form was filled and the researchers supervised the experiment.



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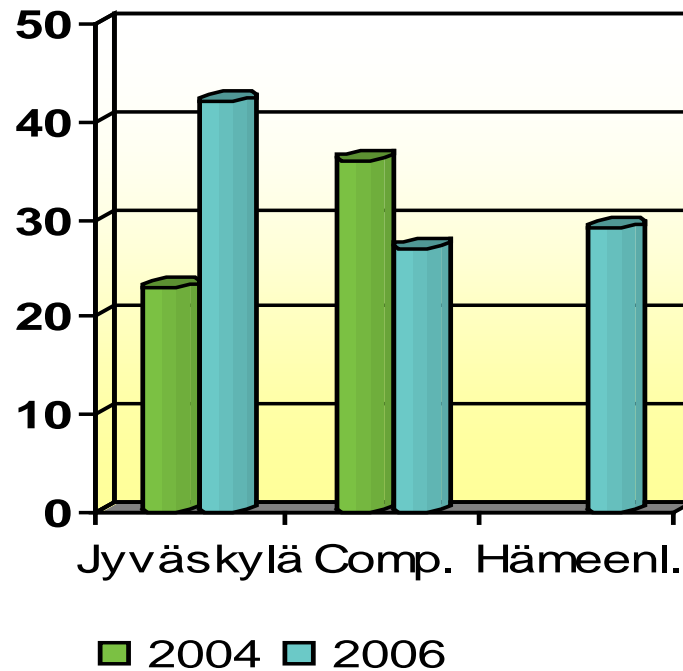
Conclusions: the under-age purchase trials

- Enforcement of the under-age control was increased both in the intervention town Hämeenlinna and in the comparison region. The results from school survey confirm the purchase trials results.
- Under-age control was most efficient in Alko monopoly shops.

2. Alcohol service on licensed premises.

- A young male actor tried to order a pint of beer.
- He was acting "obviously drunk" (assessed by a panel)
- Sample: Bars, pubs and nightclubs. In 2006 restaurants for dining were also included. (94 premises in 2004 and 100 premises in 2006 were visited).
- The researcher supervised the trials and filled in the follow-up forms describing the environment and context of the test.

Refusal rate (%) in intervention and control area in 2004 and 2006 (Warpenius et al. 2010).



Conclusions on the restaurant purchase trials

- The difference between the control area and Pakka-intervention area was statistically significant.
- The improved results in bars and pubs can most likely be explained by the increased law enforcement and surveillance.
- The RBS-training alone did not have an effect on the refusal rate.
- Many bar staff members follow informal social norms in their service practices. Alcohol service to intoxicated patrons was most common at downtown night clubs.

Results of the project : summary

- The model for regional preventive work was created and responsibility in alcohol sales increased. Pakka helped in specifying realistic goals using evidence-based effective methods, and in creating communication between municipal actors, alcohol inspection and alcohol trade.