

Outlet density & young people policy implications

Literature overview

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Outlet Density

- Much research has focused at the level of the total population
 - Strong evidence that outlet density is related to alcohol-related harms
 - Large changes in the number of alcohol outlets result in significant changes to consumption and related harm (Babor et al 2010).
 - Systematic review: studies from 2000 to 2008 - concluded density has effects on *consumption and harms* (Popova 2009).



Young people

- What conclusions can be drawn from the literature about effects of outlet density among young people
- Before 2008 few studies assessing outlet density and consumption or harm among young people
 - Mainly on US college students
 - Results may not be easily transferrable

Outlet density, young people and consumption: 2008 onward

- US, Switzerland, Scotland, New Zealand, Australia.
- Studies have found relationships btw outlet density and consumption: these varied depending on context and the measure investigated.
 - In California alcohol retailers within 0.5 miles of teenagers homes predicted binge drinking (Dang 2009).
 - Scotland, teenagers living within 200metres of an off-sales outlet were more likely to drink frequently (Young et al 2013).
 - Switzerland, density of on-premises, but not off premises, was related to volume of drinking but not to frequency of risky drinking among 12-17 school students (Kuntsche et al 2008).

Outlet density, young people and harms

- Relatively few studies on outlet density and harms among young people
- From US:
 - Drink driving (Dang 2009)
 - Youth homicide (Parker 2011)
 - Violent behaviours (Resko 2010)
 - Injuries from accidents, assaults and traffic crashes (bars with assaults) (Gruenewald 2010)
- From NZ: tertiary students (Kypri 2008)

Studies evaluating changes in density among young people

- Very few youth specific intervention studies evaluating changes in density.
- Huckle, Livingston found increased youth consumption following the liberalisation of outlets (no baseline)
- Wicki et al Geneva found restricting hours *and* density resulted in a large decrease in hospitalisations among young people.





Panel studies: mitigating factors

- Consumption was highest in areas with highest density, but over time consumption increased more rapidly among young people living in low density area.
- High mobility may mitigate the success of neighbourhood efforts to reduce underage drinking through restrictions on physical availability (Chen 2010).

Social supply

- If access to alcohol socially is easy, this may mitigate density restrictions (Chen 2010).
- In OECD countries social supply is a very large source of alcohol for young people under the drinking/purchase age
- Huckle et al 2008 found that density and social supply predicted increased drinking among teenagers.





Conclusion

- Literature suggests : density has relationships with consumption and harm among young people
- Restricting density may be useful strategy
- Babor et al – large changes
- Need more youth specific evidence of interventions

- Density is one of many factors that contributes to access to alcohol among young people

- Policy implication
 - A comprehensive policy approach which restricts both commercial and social access to alcohol at the level of country/state/province is needed.