



Health

Hunter New England
Local Health District

Research evidence for reducing alcohol-related harm

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- **What does the research tell us?**
 - Regulating supply
 - Reducing demand
 - Drink driving
 - Treatment and early intervention
 - Community programs
- **Local contributions to the evidence base**



What does the research tell us?



What does the research tell us?



– *Babor T et al, (WHO) 2010. Alcohol - No ordinary commodity³*

Highly effective	+++
Moderately effective	++
Limited effectiveness	+
Not effective	0
Insufficient evidence	?

– *National Drug Research Institute (NDRI) 2007. Restrictions on the sale and supply of alcohol: Evidence and Outcomes⁴*

Strong evidence of effectiveness	✓ ✓
Some evidence of effectiveness	✓
No evidence of effectiveness	X
Current evidence unclear	?

Regulating supply

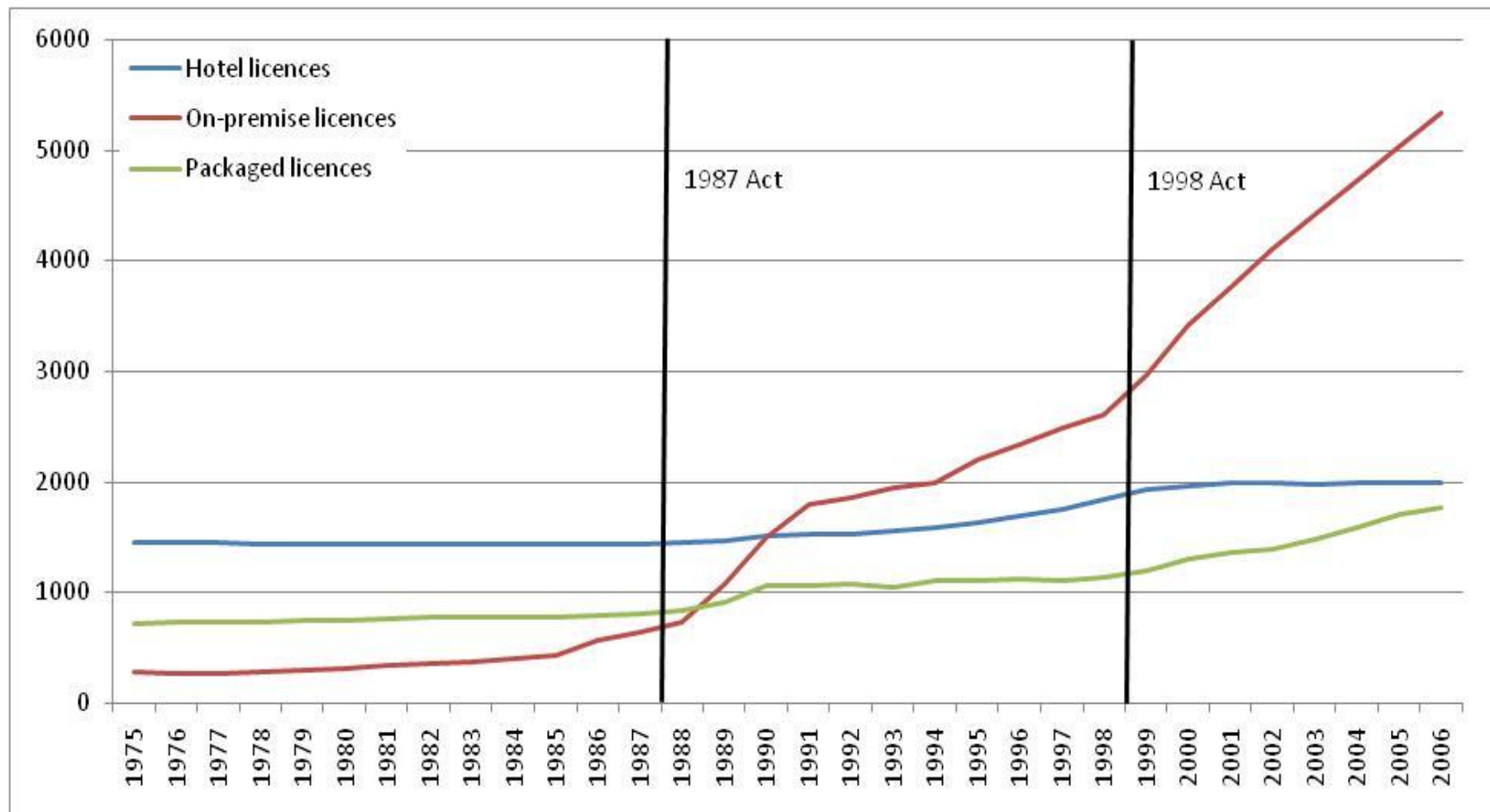


- **Availability, purchase age, hours, density, strength**

	Babor et al 2010 ³	NDRI 2007 ⁴
Ban on sales (eg. certain communities or events)	+++	✓
Minimum legal purchase age	+++	✓✓
Hours and days of sale	++	✓✓
Restrictions on outlet density	++	✓
Restrictions by strength	++	✓

- *Chikritzhs et al (2002⁵; 2006⁶)* – 1 hr increase in trading hours from midnight - 54.5% increase in assaults; 47% increase in drink drive crashes
- *Livingston (2009)⁷* – +ve association between outlet density and assaults/domestic violence (on and off-licence)

Outlet density - Victoria



- Livingston (2009)⁷



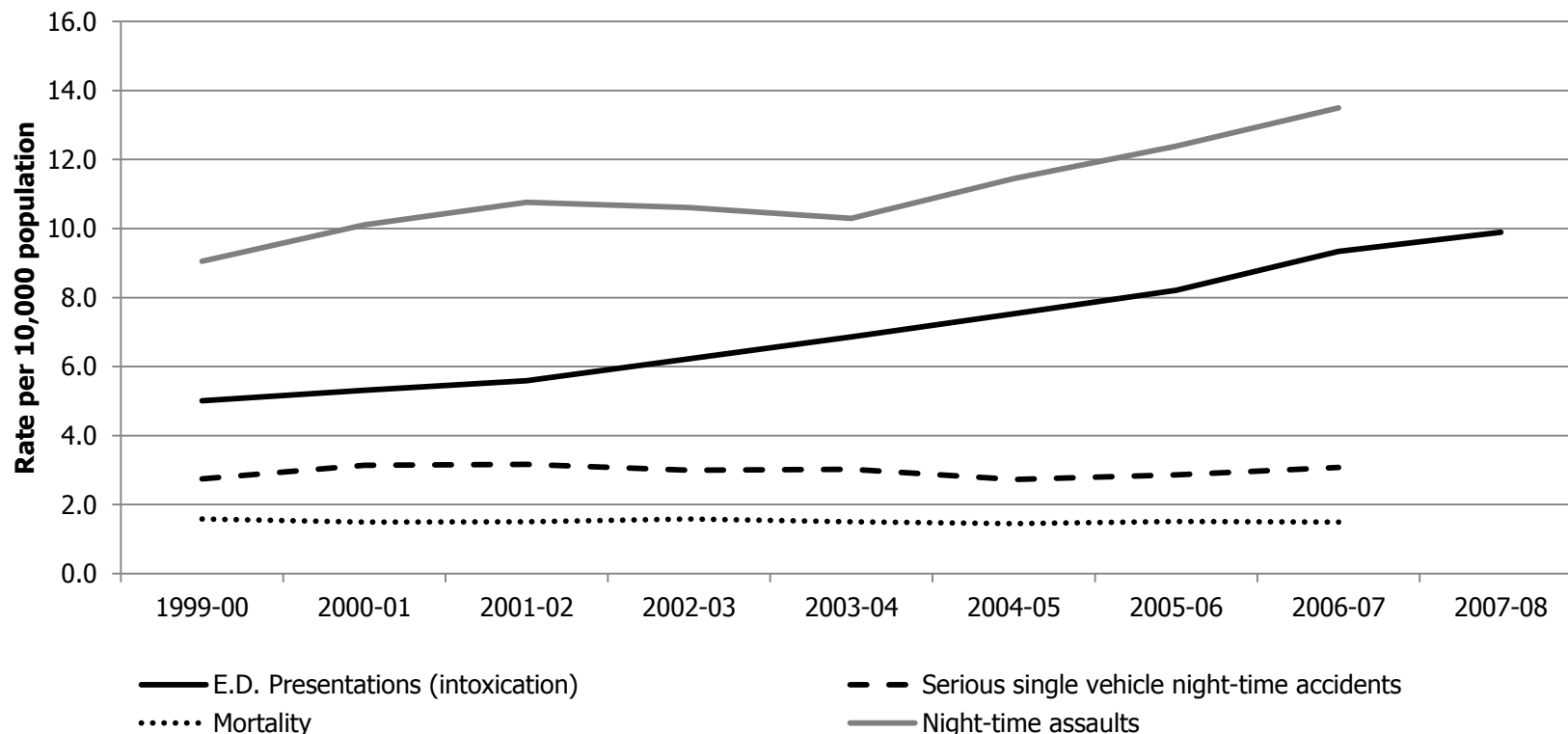
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Trends in alcohol-related harm: Victoria



- **1998 to 2008 (ED, deaths, serious single-vehicle night-time & night-time assaults)**



- Livingston (2009)⁷

Regulating supply



- **Modifying the drinking environment**

	Babor et al 2010 ³	NDRI 2007 ⁴
RSA training/policies	0/+ when enforced	-
Training in managing aggression	++	-
Enhanced enforcement of liquor legislation	++	✓
Late-night lock-outs	?	?

Reducing demand



- **Pricing and taxation**

	Babor et al 2010 ³	NDRI 2007 ⁴
Alcohol taxes	+++	✓ ✓
Minimum price	?	-
Differential price by strength	+	-
Special taxes on alcopops and youth-oriented drinks	+	-

Reducing demand



- **Education and persuasion**

	Babor et al 2010 ³	NDRI 2007 ⁴
Classroom education	0	-
Brief interventions with high-risk students	+	-
Warning labels/signs	0	-
Social marketing	0	-

Drink driving



	Babor et al 2010³	NDRI 2007⁴
RBT	+++	-
Lowered BAC limits	+++	-
Low BAC for young drivers	+++	-
Licence suspensions	++	-

Treatment and early intervention



	Babor et al 2010 ³	NDRI 2007 ⁴
Brief intervention with at-risk drinkers	+++	-
Medical/social detox	+++	-
Mutual help/self help	++	-
Mandatory treatment of repeat drink drivers	+	-

Community programs



	Babor et al 2010 ³	NDRI 2007 ⁴
Restrictions implemented via Liquor Accords or other community-based programs	-	✓ With enforcement X Without enforcement
Multi-strategic approaches	-	?



Local contributions to the evidence base





- **Reducing supply**

- Enhancing licensee responsible service capacity

25% reduction in police incidents (RCT)

- Enhancing police enforcement capacity

15% reduction in police incidents (RCT)

- **Reducing demand**

- Enhancing adolescent ‘resilience’

50% reduction in binge drinking (pilot study, RCT underway)



Local contributions to the evidence base

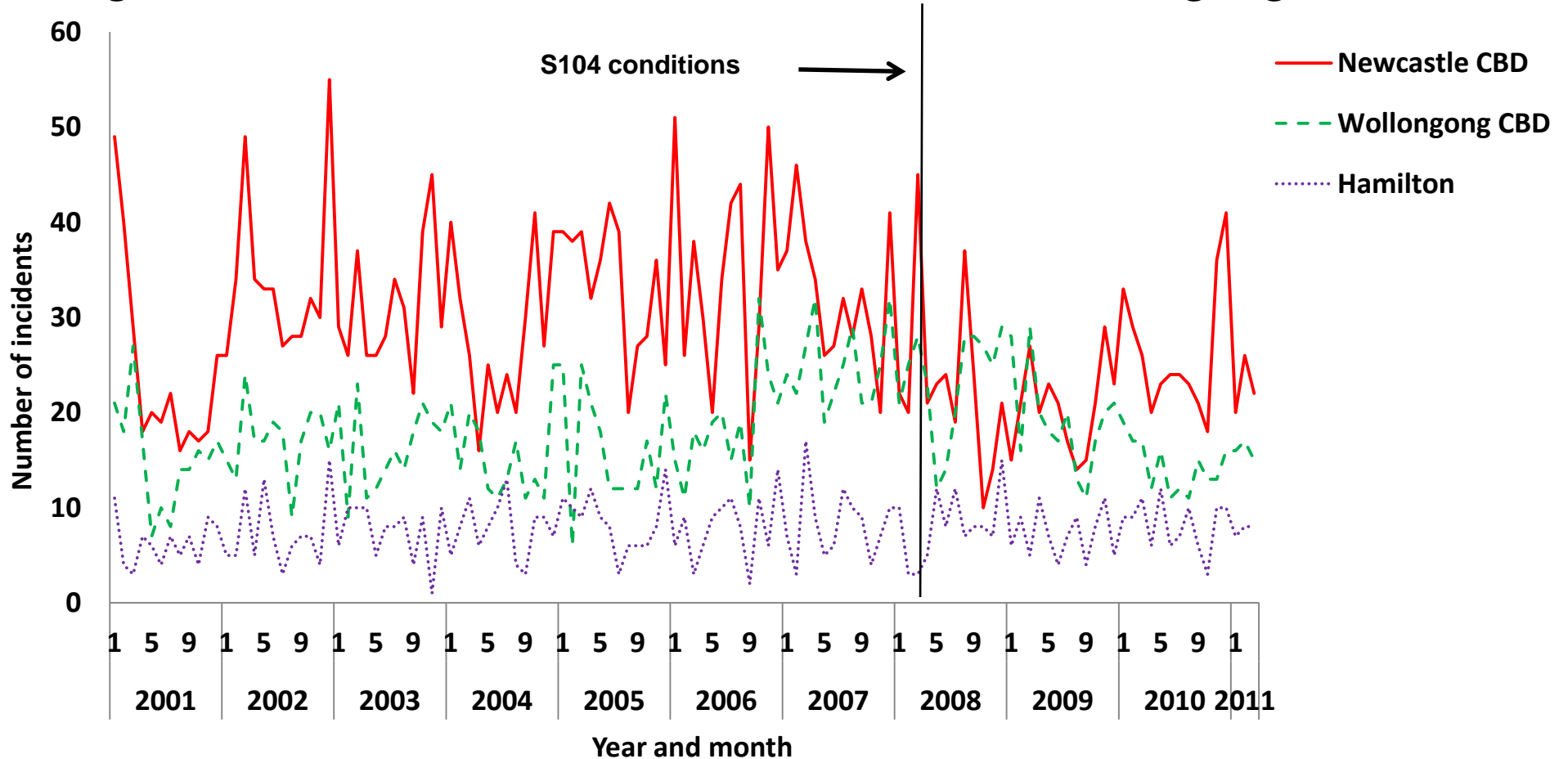
**Impact of Newcastle s104 licensing conditions
2008-2011**



'Newcastle intervention'



Night-time non-domestic assaults - Newcastle, Wollongong & Hamilton



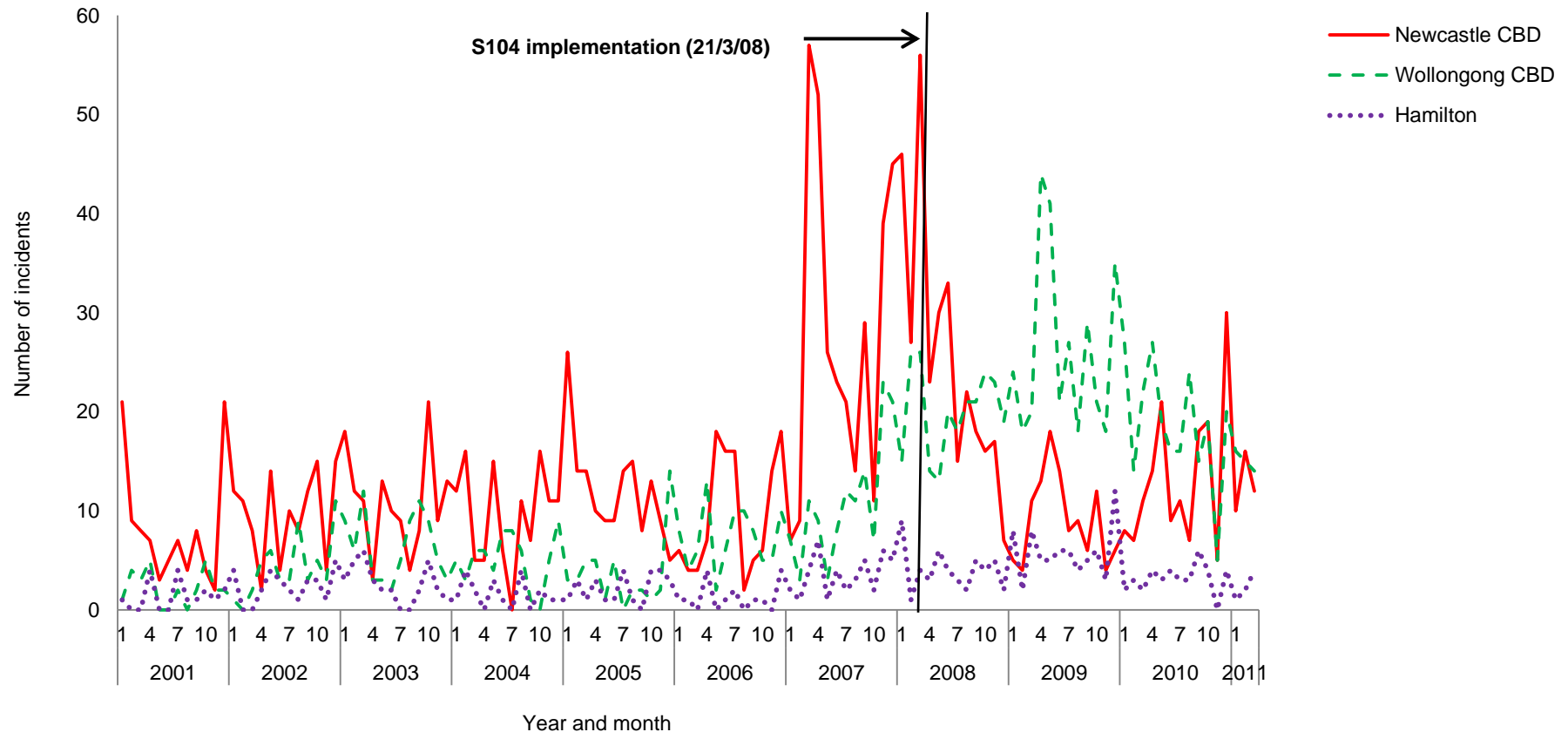
- 35% reduction in Newcastle



'Newcastle intervention'



- **Night-time street offences - Newcastle, Wollongong & Hamilton**

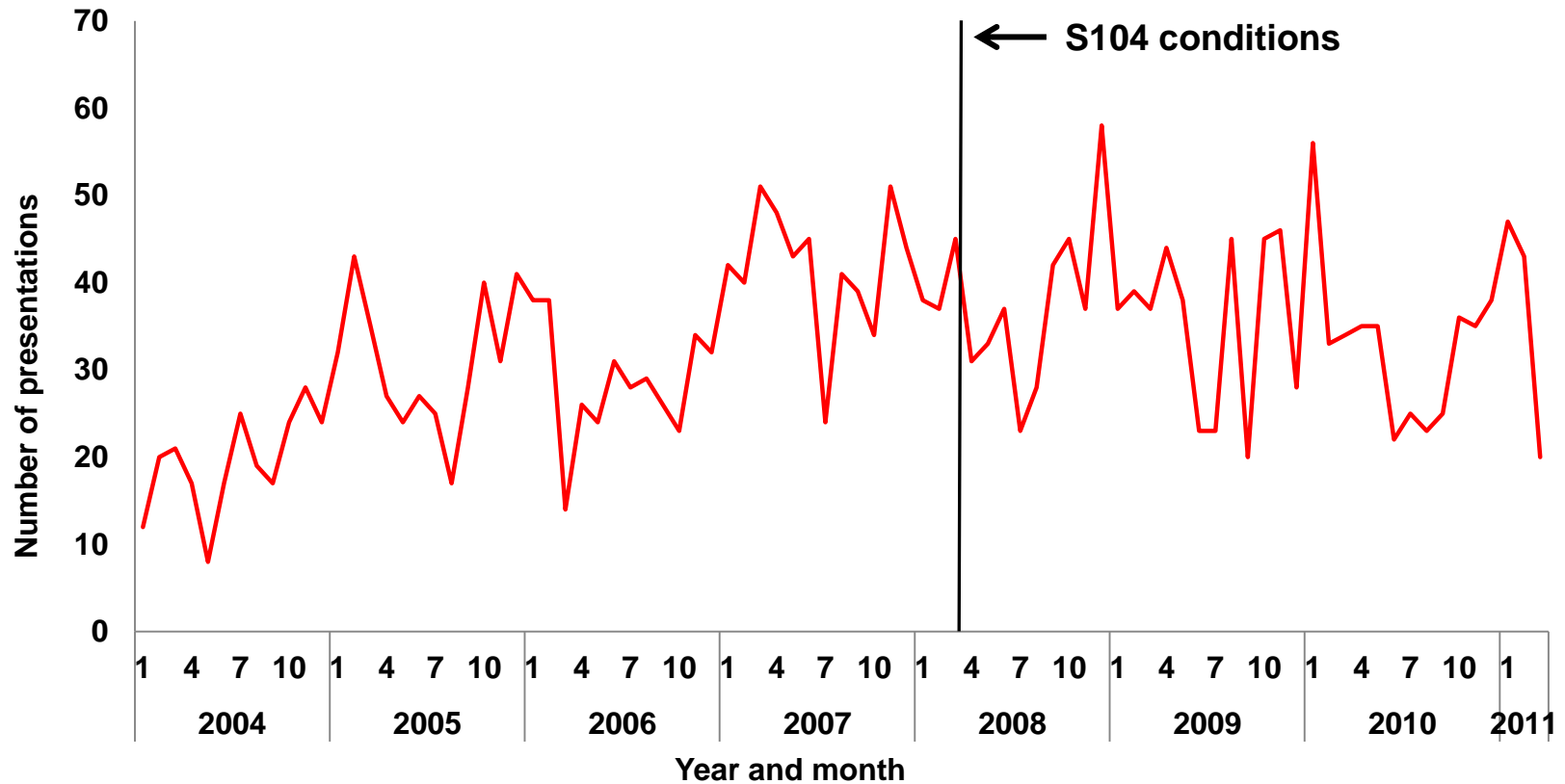


- 50% reduction in Newcastle

'Newcastle intervention'



Night-time assault-related injury emergency department presentations - Lower Hunter hospitals 2004 to 2011



- 26% reduction

'Newcastle intervention'



- **Community support**

- Random household telephone survey – Lower Hunter 2010 (n=376)

- Reduced trading hours 77%
 - Lock-out 80%
 - Responsible service of alcohol restrictions 89%

Conclusion



- Regulatory approaches have strongest evidence:
 - Density, tax, trading hours, enforcement, age
- Suggested 'local evidence' support for:
 - Multi-strategic 'Newcastle' intervention
 - Industry capacity building approach
 - Enhanced enforcement
 - Enhancing 'resilience' of adolescents (early days)
- In Newcastle
 - Some successes, more to do



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How can we add value?



- Reduce supply
 - Density?
 - Enhanced RSA/violence management/design?
 - Enhanced ‘Newcastle Intervention’?
 - Enhanced enforcement?
- Reduce demand
 - Adolescent/young adult drinking
 - Parenting?
 - University/TAFE?
- Treatment
 - Brief advice, web-based?

Evaluation



Acknowledgements



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