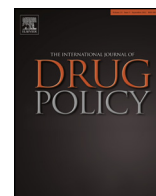




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Research paper

Unintended impacts of alcohol restrictions on alcohol and other drug use in Indigenous communities in Queensland (Australia)



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ABSTRACT

Background: ‘Alcohol Management Plans’ (AMPs) with a focus on alcohol restrictions were implemented in 19 discrete Indigenous communities, in 15 Local Government Areas, by the Queensland Government from 2002. Community residents’ perceptions and experiences of the impacts of AMPs on local alcohol and drug use are documented.

Methods: A cross-sectional study used quantitative and qualitative survey data collected during 2014–2015 in 10 affected communities. Five had some alcohol available. Five had total prohibition. Participant responses were assessed and compared by prohibition status.

Results: Overall, less than 50% of 1098 participants agreed that: i) the restrictions had reduced alcohol availability in their community and ii) that people were drinking less. Nearly three quarters agreed that binge-drinking had increased, attributed to increased availability of illicit alcohol. There were no statistically significant differences between communities with prohibition and those with some access to alcohol. Participants agreed overall that cannabis use had increased but were more equivocal that new drugs were being used. These views were less frequently reported in prohibition communities.

Conclusions: Contrary to what was intended, Queensland’s alcohol restrictions in Indigenous communities were viewed by community residents as not significantly reducing the availability and use of alcohol. Furthermore, this was compounded by perceived increases in binge drinking and cannabis use; also unintended. There is a need to strengthen resolve at all levels to reduce the supply of illicit alcohol in restricted areas.

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Introduction

Indigenous people of Australia, New Zealand, United States and Canada were initially exposed to the recreational consumption of alcohol through colonization (Brady, 2000; Frank, Morres & Ames, 2000; Jankowiak & Bradurd, 2003). This exposure was quickly followed by efforts to limit their access to alcohol by national and local alcohol restrictions with an early focus on prohibition arising from colonial cultures of temperance and/or discrimination (Brady, 2000; Kahn, Hunter, Heather & Tebbutt, 1990).

Across Australia, in recent times, policy instruments known as Alcohol Management Plans (AMPs) have been implemented in discrete remote and very remote communities (Australian Government, 2012; Smith et al., 2013). Based on concerns regarding high

levels of alcohol-related violence in far northern Queensland communities, in 2001, the state premier commissioned a study to inform Government efforts to address these issues. The resultant report by Justice Fitzgerald identified key strategy domains for action and change but cautioned that despite the best of intentions and urgent need for change, government initiatives will “continue to produce unexpected adverse consequences” (Fitzgerald, 2001).

In response to Fitzgerald’s recommendations (Fitzgerald, 2001), the Queensland Government introduced its *Meeting Challenges, Making Choices* (MCMC) policy, affecting 19 Indigenous communities situated within 15 Local Government Areas (LGAs) in Queensland from 2002 onwards (Hudson, 2011; Queensland Government, 2002). The focus of early efforts was on restricting the quantity and types of alcohol that could be legitimately possessed and consumed to immediately address high levels of alcohol misuse and violence. These efforts were to be followed by demand and harm reduction initiatives that included ambitious reforms in governance and the public sector, economic development, improvements in drug and alcohol treatment and rehabilitation services and strategies to

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reduce family violence (Queensland Government, 2002). There is general recognition that these later initiatives were largely unrealized (d'Abbs, 2015; Queensland Government, 2005). In similar settings in rural and remote Australia, supply reduction strategies have resulted in positive outcomes including a reduction in alcohol consumption and violence (d'Abbs & Togni, 2000; Gray, Siggers, Sputore & Bourbon, 2000). Historically, however, strict controls have given rise to unintended adverse consequences. For example, national prohibition in the United States in the early 20th century, while initially reducing alcohol consumption, led to 'bootlegging', drug substitution, and greater demand for more potent alcoholic beverages (Blocker, 2006; Thornton, 1991; Tyrrel, 1997).

By 2009, Queensland's alcohol restrictions had been further tightened (Brady, 2014). Implementation of these disparate and complex controls is more thoroughly described elsewhere (Clough & Bird, 2015). The AMPs, in existence for over twelve years, have been under review by the Queensland Government since October 2012 (Queensland Government, 2015).

As part of an independent evaluation (Clough et al., 2014), this paper gives voice to community residents' perceptions of the impact of this policy specifically on drug and alcohol behaviours. Differences are highlighted between communities where prohibition was enforced from 2009 and where some alcohol remained available on a restricted basis.

Methods

Setting

From 2009 in seven of the 19 communities with AMPs all alcohol was prohibited while restrictions on possession and consumption were tightened in the remaining 12 communities. In the latter, alcohol availability has been managed through 'carriage limits' (limits on quantities and types possessed) and/or local licensed premises denoted colloquially as a 'club' or 'canteen'. These 12 communities are generally located closer to the larger regional centres or towns than the remaining seven communities where all alcohol is prohibited (Queensland Government, 2009). Prior to the restrictions, the main sources of alcohol in most localities were licensed premises run by the Local Government Councils (LGCs). Supply was typically augmented by a trade in illicit alcohol ('sly grog') sourced outside of the communities, mainly in the regional centres and towns (Martin, 1998). Readers are referred to previous publications where the affected communities are described in greater detail (Clough & Bird, 2015; Clough et al., 2014). State-funded drug and alcohol prevention services for remote communities are limited and were significantly reduced in 2012 (Hunter, 2014; Queensland Nurses Union, 2014).

Survey of community residents

Although all 19 communities were provided the opportunity to participate, LGCs in 10 communities provided permission to undertake a survey among their constituents, i.e. communities were self-selecting. Participants were recruited from their resident populations of 5989 adults (aged 18 years or more) (Australian Bureau of Statistics, 2011). The survey asked participants to respond to propositions about the possible impacts of AMPs. Utilizing a mixed methods exploratory approach (Cresswell & Plano-Clark, 2011), these propositions were developed from both the MCMC program design (Queensland Government, 2002) and key themes emerging from semi-structured interviews with stakeholders including service providers in remote and regional centres (Clough et al., 2016). These stakeholders represented long-standing service agencies and community groups located both in

the communities and the regional centres. They were chosen because they held a mandate, or were in some way responsible, for alcohol management or alcohol-related issues. They were asked to provide their views, based on their long experience, of any favourable outcomes of AMPs and any unintended, unfavourable impacts (Clough et al., 2016). From this information several propositions about the effects of AMPs were developed.

Among the favourable impacts reported in this analysis two propositions reflected the intended impacts of restrictions on reducing alcohol availability and consumption while three propositions reflected perceived unfavourable and unintended impacts on alcohol and drug use and availability.

Propositions about favourable intended impacts

- "The AMP has reduced the alcohol people can get in this community."
- "Since the AMP, people have changed their drinking and are now drinking less."

Propositions about unfavourable, unintended impacts

- "There is more binge drinking now since the AMP."
- "There is more cannabis being smoked in the community since the AMP."
- "There have been new drugs coming into the community recently."

The LGCs in each community provided advice regarding the survey content and wording of the propositions and facilitated testing of the survey before research commenced in each locality.

Sampling and participant recruitment

As for previous studies of substance misuse in these small communities (Bohanna & Clough, 2011), random sampling is inappropriate. For this study, the LGCs requested that all adult community residents (i.e. aged 18 years and over) should be provided the opportunity to participate, with balanced representation of males, females, those who drink alcohol and those who do not. Participants were recruited and interviewed opportunistically in homes, public places and work spaces as advised by the LGCs. Participants' verbal responses were transcribed by the researchers. Community members, nominated by the councils were employed as cultural brokers to facilitate recruitment, to assist with obtaining informed consent and to ensure the sample reflected local age and gender balances.

Data analysis

Quantitative data

For all participants, age, gender and current alcohol use status were recorded. All participants were asked to rate their agreement with each proposition. Binary variables with values of 'agree' (=1) and 'disagree' (=0) were used in the analyses. Separate analyses were conducted in the five communities where there was complete prohibition and in the five where there remained 'some access to alcohol'. The proportions agreeing with each proposition were compared with the theoretical value of 50% (neither 'agree' nor 'disagree'), using one-sample tests of proportions (Table 1).

Qualitative information

Participants were also invited to elaborate on their reasoning for each rating and their qualitative comments were recorded verbatim. This qualitative information, although often just a phrase or a few sentences, provided elaboration and meaning and assisted with the interpretation of the findings (Green, Caracelli & Graham, 1989).

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