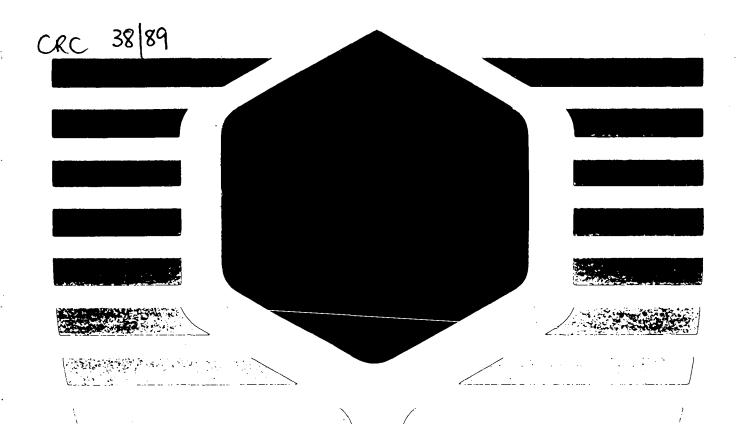
NATIONAL CENTRE FOR RESEARCH INTO THE PREVENTION OF DRUG ABUSE



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Drinking Settings, Alcohol Related Harm, and

Support for Prevention Policies

Results of a Survey of Persons Residing in the Perth Metropolitan Area

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EXECUTIVE SUMMARY

This report presents the univariate results of a household survey conducted in the latter half of 1990 in the Perth Metropolitan area. The survey focused on people's patterns and places of drinking and their knowledge and attitudes towards strategies aimed at minimising harm within the licensed drinking environment. The study had four main aims: first, to examine how types of drinking setting are related to different patterns of alcohol use and alcohol related problems; second, to discover the level of knowledge of laws relating to the sale and consumption of alcohol; third, to determine people's attitudes to the concept of server responsibility and server liability; and, fourth, to establish the level of community support for prevention initiatives targetted toward licensed drinking settings.

Demographic Data

The sample size for this study was 1160, comprising 651 females and 509 males aged 16 and over. After weighting for the number of persons per household aged 16 and over, and for gender, the sample closely matched the gender and age (16+) of the Perth metropolitan area at the time of the 1986 census.

It was found that the majority of respondents had been educated to secondary or post-secondary levels; were married or in a de-facto relationship. Of those who were employed, 42.0% were full time and 14.0% were part time. Occupations were mainly clerical and sales/service positions (24.0%), or what might be termed professional positions (21.0%). More than 20.0% relied on unemployment benefits or pensions for their income, and approximately 40.0% had an annual income of less than \$10,000. Sixty two percent of the sample were Australian born and 50.0% of those born overseas came from the UK.

In relation to response rates achieved during the survey contact was made with one or more residents in 81.1% of households visited, and the percentage of interviews completed on all in-scope respondents contacted was 68.4%. Up to three call backs per dwelling was allowed for if required.

Alcohol Use and Alcohol Related Problems

Seventy four percent of the sample (466 females and 406 males) were classified as drinkers, that is persons who had consumed alcohol in the past three months.

Data on the number of standard drinks consumed were obtained for the four most recent drinking days in the previous three months and respondents were categorised in terms of the National Health

and Medical Research Council (NH&MRC) guidelines for safe (low), hazardous (medium) and harmful (high) levels of consumption. This equates to 1-2 standard drinks per day for women and 1-4 for men (low); 3-4 for women and 5-6 for men (medium); 5 or more for women and 7 or more for men (high). These are referred to throughout as low, medium or high "risk levels", or "level of risk".

When average daily consumption was calculated the overwhelming majority of drinkers (87% of men and 94% of women) had consumed alcohol at low risk levels according to the above criteria. However, an entirely different picture emerged for the day of highest consumption. Thirty four percent of males and 21.5% of females drank at high risk levels, while 19.6% of males and 29% of females drank at medium risk levels. That is, approximately 50% of all drinkers drank above low risk levels on the occasion of highest consumption.

A total of 74 drinkers (56 males/18 females) were identified as having experienced a 'harmful' outcome (i.e., injury, involved in violence, time off work) as a result of their drinking in the previous three months, and a further 34 (10 males/24 females) had experienced problems resulting from other persons drinking when they themselves had not been drinking.

The extent of alcohol dependence among all drinkers in the sample was assessed using the Severity of Alcohol Dependence Questionnaire (SADQ). The majority of drinkers achieved positive SADQ scores by answering positively on at least one item, however, only a small percentage scored in the mild to moderate range, and none in the severely dependent range.

As many as 24.0% of the total sample reported that they had experienced problems with pubs or clubs near to their homes. The most frequently reported problems related to litter, noise and offensive behaviour. When asked if they knew where to go to complain or to find out about complaining, the majority nominated the police or said that they did not know. Less than 2.0% of respondents knew the Liquor Licensing Authority to be the appropriate authority in this area.

Characteristics of Drinking Settings Associated With Low, Medium and High Risk Drinking

Respondents were questioned on the drinking setting for the highest consumption occasion in the previous month. It was found that there was a significant tendency for heavier consumption to occur on licensed premises, mainly hotels, as opposed to private residences. High risk consumption was also significantly associated with large groups (6 or more) of mainly males in full to overcrowded venues.

Other factors found to be associated with high risk drinking were: buying in rounds; listening to music; dancing; playing bar games; strippers; drinking situations where little or no food was eaten; and where obviously drunk persons were still able to buy alcohol. There was about a one in five chance that drugs were used on this occasion, most likely marihuana or prescription drugs which, in the latter case, were more prevalent among women.

Low risk consumption was found to be most often associated with drinking in private residences, or in venues where a sit down meal was eaten (restaurants), and which were only one quarter to half full. Low risk consumption was also associated with drinking in small groups of family and relatives, or with friends of both sexes, and with venues where there was no entertainment or where watching television or just talking took place.

Characteristics of Drinkers and Drinking Situations Associated With Incidence of Alcohol Related Harm

Those drinkers (n=74) who had experienced some alcohol related harm following their own drinking in the past three months were mainly young (under 25), single, Australian born males, very likely employed, and earning up to \$30,000 p.a.

The context of drinking preceding the harm was likely to have been buying in rounds with a large group of mainly male friends in a hotel or tavern where obviously drunk patrons were able to continue buying alcohol, and where the main activities were listening to music, dancing and playing bar games such as pool or darts.

Knowledge of Laws Relating to the Sale and Consumption of Alcohol

Three questions sought to find out the extent of people's knowledge (drinkers and non-drinkers) of the section of the W.A. Liquor Licensing Act 1988 concerned with who commits an offence when juveniles and intoxicated persons are served alcohol. Overall, a majority of respondents knew that

certain individuals (i.e., barstaff, managers, licensees) commit an offence when such persons are served alcohol. There were, however, some notable differences in levels of knowledge between different categories of respondents.

It was found that, overall, a higher percentage of non-drinkers answered the questions correctly than was the case for drinkers and persons with experience in the sale of alcohol (hereafter, persons with experience in pubs). The most notable finding, however, was that, with one or two exceptions, persons with experience in pubs answered fewer questions correctly than did drinkers, non-drinkers, or the total sample.

Despite the fact that public drunkenness has not been an offence in W.A. since April 1990, almost two thirds of respondents still believed this to be an offence, and almost one third did not know, or were unsure, that it is an offence to drink alcohol in a public place.

On those questions dealing with the maximum level of fines for licensees and/or their employees if juveniles or intoxicated persons are served alcohol, the majority of respondents thought that they are 'about right' or 'too low' in the case of the former and, interestingly, 'too high' in the case of the latter.

In the case of an intoxicated person drinking on licensed premises a majority of respondents thought that such a person ought to be subject to a fine.

Attitudes to Server Responsibility and Liability, and Drinking to Intoxication

Little support was found for the notion that licensees or their employees should be held partly responsible for persons who become intoxicated on licensed premises, or liable when an intoxicated person leaves and causes harm to a third person. However, half of the respondents believed that a co-drinker might be responsible for a person becoming intoxicated on licensed premises. Nonetheless, there was overwhelming acceptance that to continue to serve an obviously drunk person increased the risk of an accident.

Two questions sought to find out whether or not people thought it 'alright' to drink alcohol in various locations, or when engaged in certain activities. The majority of respondents thought that the only places where it was 'alright' to drink alcohol were licensed premises if drinkers blood alcohol levels (BAL) remained under the legal limit for driving (BAL>0.08), and private residences irrespective of the BAL attained. Few respondents though it was 'alright' to drink on licensed premises if over the legal limit.

There was a very strong disapproval for drinking while operating machinery or when involved with boats, and a very low tolerance for drinking in public places, such as parks or sporting venues.

Support for Prevention Strategies and Policies

Respondents were asked to indicate whether or not they supported a range of 25 prevention initiatives. Very high levels of support (>90%) were found for initiatives such as: training licensees and barstaff in responsible practices, and training bouncers in ways to minimise violence; stricter enforcement of the licensing law; and improved public transport. Moderate to high levels of support (>50%<80%) were also found for initiatives such as: increased police presence at licensed premises; alternative transport for intoxicated customers; raising the drinking age; reducing the legal BAL to 0.05, and for identity cards as proof of age. Little support was found for reduced hours for licensed premises; limiting the size of licensed premises; limiting car parking at licensed premises; alcohol-free entertainment areas; and banning the sale of beer in jugs.

Support was strongest among non-drinkers, while persons with experience in pubs gave least support.

Strong support was found for pubs and clubs to offer things such as no smoking areas and a range of healthy food. While considerably fewer respondents said that they would visit pubs and clubs more often were this the case there is, nevertheless, a large potential market of up to 40% of people who might visit pubs and clubs were such things introduced.

On the question of labelling alcohol containers to make it easier for people to monitor how much they drink, it was found that women were much more likely than men to indicate a preference for labels which show the number of standard drinks. Men were almost equally divided between labels showing percentage alcohol by volume, and labels showing the number of standard drinks. There was virtually no support for labels showing the number of grams of alcohol.

Conclusions and Recommendations

A principal aim of the study was to identify characteristics of drinking settings which are associated with an elevated risk of alcohol related problems. It is noteworthy that similar characteristics were identified as being associated both with 'high risk' consumption of alcohol and the actual experience of harm.

Prevention planners can make use of this information for targetting health promotion initiatives at identified high risk settings. For example, crowded venues where young people can listen to music, dance and drink alcohol are high risk. One way of reducing the level of risk might be for

sponsorship of such events to be arranged by State Health Promotion Foundations with the responsible service of alcohol as a condition. In addition, media campaigns with a safe drinking message might usefully employ images conjured up by the high risk variables identified, e.g., mostly male groups drinking beer in crowded hotels.

Another application of this information is to assist in the identification of legislative means to render drinking settings safer. Examples suggested by our findings would be the banning of price discounting schemes, stricter enforcement of crowding levels, a requirement that food be more available on licensed premises, and that measures are taken to prevent the service of alcohol to intoxicated persons.

This latter point could be achieved by making it mandatory for licensees and/or their principal agent (i.e., the manager) to be trained in responsible practices, including knowledge of licensing law, as a condition of holding a liquor licence. Consideration might also be given to mandatory training of all bar staff as a necessary pre-requisite for employment. This study found considerable community support for initiatives such as these. Furthermore, the low level of knowledge on key aspects of licensing law demonstrated by persons with experience in pubs would strongly suggest that positive steps are required to address this issue.

Strong public support was also found for initiatives which, if implemented, might reduce the incidence of alcohol related problems. For example, there was strong support for identity cards as proof of age, stricter enforcement of licensing laws by police, and for police to be more visible in and around licensed premises.

On a number of other prevention initiatives there was only minimal public support which would suggest there is a need for some specific education based campaigns. For example, a little under half of respondents favoured the creation of a new type of licence where only low alcohol drinks could be sold. However, there was a significant number of people who were undecided who might be influenced to support such a policy initiative were an appropriate public education campaign to be implemented.

Another area with implications for education is that concerning server responsibility and server liability. These concepts received little community support, a view which might be amenable to change through education, particularly if serving people to intoxication could be given as high a profile as the issue of juvenile drinking where there is strong public support for action to prevent this. However, there is strong community support for enforcing the law against serving people who are intoxicated which, if incorporated into an education campaign, might influence opinion on questions of server responsibility and server liability.

Despite the fact that the concept of standard drink labelling was new to most people, the idea was popular among men and more so among women. This level of support would seem to indicated that the Ministerial Council on Drug Strategy should ensure that this occurs as announced earlier this year.

Finally, 24.0% of the sample reported that they had experienced problems from nearby licensed premises but hardly any knew about the appropriate authority to complain to. This finding has clear implications for the need to publicise the procedures outlined in the Liquor Licensing Act (1988) for lodging complaints.

Recommendations

The WA Health Department might like to consider the use of public awareness campaigns which complement the introduction of policy initiatives, whether they be by the Health Department or some other government body, e.g. the police. There is now considerable evidence that such campaigns can greatly enhance the effectiveness of enforcement measures such as random breath testing and strategies to enforce the liquor licensing laws with regard to serving individuals to the point of intoxication. Given the association between drinking on licensed premises and negative outcomes, such as heavy drinking and resulting harm, public awareness campaigns might focus on the following initiatives:

- (i) The introduction of "skipper schemes" in licensed establishments; co-operating establishments could receive free publicity for their efforts.
- (ii) The introduction of ID cards for individuals aged 18-21 years of age as a method of controlling juvenile drinking on licensed premises; it should be noted there was strong support even among drinkers for this scheme.
- (iii) Supporting the WA Hotels' Association in the running of their new training scheme designed to train bar staff, managers and licensees in the responsible service of alcohol; a public awareness campaign would serve to support staff in their difficult task of refusing service to intoxicated customers; and free publicity could also be given to particularly responsible establishments.
- (iv) Publicity given to enforcement strategies designed to limit intoxication on licensed premises would greatly assist police as well as bar staff in pursuing this aim.

(v) Given that most drinking whether preceding harm or otherwise occurs at private and unlicensed locations health promotional activities of various kinds might well recommend responsible hosting strategies. Such strategies have been shown to be effective in teaching skills and knowledge which social hosts might effectively use to minimise the risks attending excessive consumption of alcohol by their guests.

Given the apparent importance of settings in promoting at risk drinking the 'Drinksafe' campaign might develop a number of 'Drinksafe' entertainments for young people which encourage the moderate consumption of alcohol. Such settings would need to provide entertainment which would be highly attractive to young people and might include such features as positive identification for 18-21 year olds; all beer to be low alcohol (i.e., less than 3.8% v/v alcohol) and wine to be lower strength than the norm of 11.0%-13.0% v/v alcohol; no spirits to be sold; and all barstaff to be trained in responsible serving practices. The fact that low alcohol drinks will be available should not be advertised as this knowledge may result in patrons drinking higher strength alcoholic beverages beforehand.

The fact that beer was the preferred beverage of the highest risk group, i.e. young males, and was also associated with heavy consumption for both male and female drinkers suggests that strategies should be developed which encourage the consumption of lower strength beers. The Hotels' Association could be supported and encouraged in schemes which encourage licensees to always provide reduced and low alcohol beer on tap and to always serve reduced alcohol beer unless full-strength beer is explicitly requested.

Given that drinking in large, mostly male groups, is most often associated with "high risk" consumption for both males and females, consideration might be given to incorporating some pertinent messages in future 'Drinksafe' and 'Respect Yourself' campaigns, which caution young drinkers to try and avoid the very strong peer pressure being exerted at such times.

1.0 INTRODUCTION

The study reported here provides data on the relative contribution of drinker characteristics, levels of consumption, and the drinking setting, to alcohol related problems. The study had four main aims: first, to examine how types of drinking setting, or contexts, are related to different levels of consumption and alcohol related problems. In particular, the study sought to contrast low, medium and high risk drinkers and their particular drinking settings. A similar comparison is made between the drinking settings and contexts of persons who experienced a harmful outcome and those who did not experience any harm.

The second aim was to determine the level of knowledge of laws relating to the sale and consumption of alcohol. The third aim was to find out what people's attitudes are to the concepts of server responsibility and server liability. The knowledge of laws and attitudes to the concepts of server responsibility and server liability will inform the extent to which educational programs need to be developed for the general public, as well as the training needs of hospitality industry employees.

The final aim was to establish the level of community support for prevention initiatives which are targetted towards the licensed drinking environment. While most interventions in this area have focused on individual drinkers, increasing attention is being directed towards modifying drinking settings associated with harm. Identifying patterns and places of drinking, particularly high and low risk drinking situations, is essential if intervention strategies which focus on particular drinking settings rather than individual drinkers are to be effective. Similarly, measuring the degree of support for such policies may influence their likelihood of being implemented.

Further support for focusing on licensed premises is the success attributed to training licensees and barstaff to carry out responsible practices, collectively known as "server intervention", which are reported to have reduced the incidence of intoxication on licensed premises (1,2), and to have reduced offences at special events, e.g., rock concerts, large sporting events etc (3). Furthermore, community policing strategies involving stricter enforcement of licensing laws have been shown to be effective in reducing alcohol related assaults in the vicinity of licensed premises (4,5).

Alcohol is often implicated in crime, in violence and in health and social problems. However, while studies have linked drinking contexts (6) and demographic and psychological characteristics (7) of drinkers to alcohol related offences and problems, few studies link alcohol related harm to specific drinking contexts while controlling for drinker characteristics. Roman states that "there are essentially no studies which provide empirical evidence about the situational settings most conducive to the dual presence of drinking and crime"(8). The relative risk of the occurrence of alcohol related assaults, drink-driving offences and other alcohol related violence following drinking in various

contexts (e.g., in private homes, at licensed premises, in public places) is unknown, nor is the relative contribution of 'setting' and 'individual' factors to the occurrence of these events known. Furthermore, little is known about people's attitudes to the notions of responsibility and liability in the context of serving alcohol, nor is there much known about the level of public support for prevention policies and strategies.

Mapping the use of various drinking settings and contexts will enable comparisons to be made with objective data on alcohol related offences and harm. It is anticipated that the findings will facilitate the planning of preventive and corrective interventions. The targets of these strategies will include drinkers, alcohol retailers and law enforcers. It is expected that opportunities for better enforcement of existing legislation will also be identified and that community perceptions of, and support for, prevention initiatives will be clarified.

Many studies have examined the level of alcohol consumption which occurs within various settings. (9-14) Community surveys have focused on trends in levels of consumption for various groups and examined to a lesser degree their association with self-reported problems. Research on consumption in licensed premises has tended to be descriptive rather than attempting to analyse the effect of the drinking context on subsequent problems (9,10). In the USA studies have shown that most people drink at home, men more so than women, and that most drinkers drank with friends rather than family or alone (11-13). In Western Australia recent statistics reveal that young people, males and heavy drinkers did their heaviest drinking in licensed premises (14). The relationship between heavy drinking and different types of alcohol related problems however, is complex. For example, studies conducted by the National Centre for Research into the Prevention of Drug Abuse (NCRPDA) in conjunction with the WA Police have shown that most alcohol related traffic accidents in Perth occur following drinking in private residences (15).

Although it is likely that level of consumption is a risk factor for alcohol related offences and problems, such studies do not establish clear links between problems and specific contexts. The study of drinking contexts is very complex and requires consideration of may dimensions including: time of consumption (day of week, time of day), physical setting, social setting (drinking companions and associated activities), psychological factors (reasons and motivations for drinking on an occasion), and the type and rate of consumption of different beverage types. Association between these dimensions and alcohol related problems will point to possible risk factors. Until this approach is taken, the relative contribution of individual factors and setting factors to subsequent offences and problems will remain unknown.

While the difficulty in establishing precise causal links between alcohol consumption and alcohol related problems is widely acknowledged, those problems which occur during and after attendance at

licensed premises are believed serious enough to warrant closer attention from police, licensing authorities, researchers and, hopefully, the liquor industry. In particular, the relationship between types of licensed premises and regular occurrences of breaches of the Liquor Act, such as the serving of under-age or intoxicated patrons, has not been examined; nor have the barriers to successful enforcement of these laws been identified. Furthermore, licensed premises have been shown to be implicated in drink-driving offences, intoxication and assaults (15-21), but the relative contribution of individual factors and setting factors has yet to be determined. It is important not only to define the likelihood of problems occurring following drinking in various contexts, but also to discover the factors associated with this increased risk, and the impediments to eliminating or counteracting their effect.

Many studies have shown associations between factors such as drinking rate and total consumption, and various features such as, noise, crowding, lighting, layout, music and the role of 'bouncers' (22-26). Group size, group behaviour and consumption rates of drinking companions have also been examined (27-31). Other contextual factors have also been examined, for example, serving practices (32, 33), and entertainment (22, 34). While such studies may give clues about risk factors and about variables which need to be controlled in future studies, they have not in fact identified independent risk factors for offences or alcohol related problems.

Thus while there is a large body of literature which identifies questions and methodological issues which need to be addressed, there have been few studies which attempt to investigate the relative contribution of the drinking setting to alcohol related offences and harm, or to identify risk factors which can be modified within these settings.

This study attempts to address these issues by contrasting contextual variables with levels of consumption on the most recent occasion of heaviest drinking, and by contrasting contextual variables in the instance of drinkers who reported harmful outcomes with drinkers who did not report any harmful outcomes. Furthermore, this study identifies the extent to which the public are likely to support prevention policies and strategies which aim to reduce the incidence of alcohol related problems and harm.

2.0 METHOD

2.1 Sample

A sample size of 1160 was achieved as follows: During the survey two samples were obtained. The first, and main sample, comprised 1021 persons aged 16 years and over, and the second sample comprised 251 persons aged between 16 - 29 years inclusive. The reason for obtaining the second sample was because of interest in young persons, especially young drinkers. The results of an analysis of the second sample are reported elsewhere (35).

Initial analyses of the main sample (1021) found that 18 - 24 year olds were under-represented when compared to census data. Because of the importance of this age group in studies of drinking it was decided to include the 139 persons in this group from the second sample with the main sample, thus achieving an effective sample of 1160, and at the same time achieving a closer representation of 18 - 24 year olds with the census data. Such a procedure was possible because both the questionnaire and the process involved in obtaining data were identical for both samples.

Both samples were designed by the Australian Bureau of Statistics (ABS), the main sample being representative by age, sex and socio economic status (SES) of people residing in the Perth Metropolitan area, and the second sample being drawn from Collectors Districts (CD's) with a high proportion of persons aged 16-29 years at the last census. The sample areas were drawn from the 1986 National Census CD's designated for the Perth Metropolitan Region Statistical Division.

When analysing data on drinking settings and the characteristics of drinkers who were found to have experienced harm as a result of their drinking (see Section 4, Alcohol Use and Alcohol Related Problems, and Section 6, Characteristics of Drinkers and Drinking Situations Associated with Incidence of Alcohol Related Harm), both the main sample (1021) and the second sample (251) were combined to create a sample of 1272. This was done because the number of drinkers from both samples who experienced harm was low (n=108), and because only 59 of these fitted the criteria relevant to the analysis, which was they had to have been drinking themselves when the "harm" occurred, and information about the drinking occasion obtained. Those persons who had experienced problems as a result of another persons drinking (n=34), but who not been drinking themselves and who had not experienced any other form of harm, and those where insufficient data* were obtained (n=15) were excluded from the analysis.

^{*} Data not obtained due to respondents declining, or unable to answer further questions relating to the drinking occasion preceding the harm.

2.2 Sampling Procedure

Because the unit of interest was one person per household a general sampling technique involving area sampling was used. This involved systematically selecting CD's with probability proportional to the size of the CD, and then selecting a fixed number of dwellings within each CD. Systematic selection is a technique which ensures that each household within a CD has an equal chance of selection, and so ensures that a broad cross section of the population is included in the sample. The advantage of this approach is that the design is approximately self weighting, except that it does not allow for different numbers of people in households who meet the interview criteria (i.e., aged 16 and over). Therefore it was necessary to weight the sample according to the number of 'in scope' persons per household to offset this.

A total of 94 CD's were initially selected by the ABS: 75 being for Sample 1, representative of age (16 years and over), sex and SES. Similarly, Sample 2 was to be representative of age, sex and SES of persons aged 16-29 years inclusive, and to be drawn from 19 CD's identified as having a relatively higher proportion of persons in that age range. These 94 CD's were subsequently reduced to 64 using a random number generator to select 51 CD's for Sample 1 and 13 for Sample 2.

Twenty households were randomly selected from within each of the 64 CD's. This was achieved by using a random number generator in conjunction with a grid overlaid on a map of each CD to select a start point. The required 'skip' between households was calculated by dividing the number of dwellings within each CD by 20. This method eliminated the need for interviewers to select dwellings, thus removing any associated subjectivity. Only private dwellings were selected for the survey, with hotels/motels, hospitals, prisons, boarding schools and business houses being excluded.

In each of the target households the number of in-scope persons was identified and recorded (either the number of persons between 16-29 years inclusive or over the age of 16, depending on which sample was involved). The respondent for the survey was the in-scope person whose birthday fell closest to the day of interview. This guarded against the introduction of any selection bias. Only persons who were permanent residents of a dwelling were included in the sample.

The survey was conducted between 10 September - 12 December 1990 by a team of 8 experienced interviewers (6 females and 2 males, ranging in age from 20 years to 56 years). A total of 1272 completed interviews were obtained from 2929 households contacted (Table 1), comprising 1021 interviews for the main sample (target = 1000) and 251 for sample two (target = 251).

Table 1: Survey response rates

Survey responses	n
Completed interviews	1272
Interview refused	514
No interview for other reasons ¹	73
Non-qualifying resident ²	517
No contact made ³	553
Total households contacted	2929

The actual response rates can be expressed in three ways:-

- (1) Contact was made with one or more residents in 81.1% of households visited.
- (2) Response rates for household surveys are sometimes reported as a percentage of the interviews completed on all in-scope respondents actually contacted by the researcher. This method would give a response rate of 68.4%.
- (3) In 21.8% of households where contact was made there was no in-scope resident which, it should be noted, is likely to be an underestimate as it is likely that a number of those who refused would also have been out of scope. Thus if it is conservatively assumed that the same percentage of households where no contact was made had no in-scope resident, then the response rate was 56.2% calculated across all households in the survey.

Interviews were in-house, face-to-face and conducted on both weekdays and weekends during the hours of 9 am and 7.30 pm. Three call-backs per household were required and if no contact had been

¹ E.g., unable to gain access because of security gates, savage dogs, in-scope resident not available before end of interview period.

² Non-qualifying residents were those outside of age range (i.e., 16-29 years), non-English speaking, and qualifying persons too sick to be interviewed.

³ This was after allowing for three call backs.

made by the third call, a letter (Appendix 1) was left asking the in-scope person within that household to participate in the survey by arranging an interview at their convenience.

Supervision was conducted once in the field with each interviewer. Completed questionnaires were handed in at a weekly briefing session which helped facilitate interviewer contact, information dissemination, and permitted management of any problems encountered in the previous week.

A 6.3% validation was undertaken which involved re-interviewing at dwellings where questionnaires showed major discrepancies, as well as a random selection of households from each of the eight interviewer areas.

All completed questionnaires were edited and coded by NCRPDA research staff before fully verified data entry at Curtin Computing Centre. Data analyses were carried out using SAS and have been confined to two and three way contingency tables and to chi-square tests to determine the level of significance between variables.

2.3 Interview Procedures

Quantitative and qualitative data were collected by means of a four-part questionnaire (Appendix 2), the design of which was undertaken by researchers at NCRPDA during April-August 1991. Section one of the questionnaire required respondents to answer interviewer administered questions covering:

- (a) Demographic details (all respondents).
- (b) Consumption data (drinkers only) for the four most recent occasions in the previous three months and the location where it was consumed. Consumption on each drinking occasion was measured as 'standard drinks' (approx 10 gms of alcohol = 1 standard drink), and was based on respondents estimates. The process used to determine the number of 'standard drinks' was as follows: during the section of the interview dealing with consumption, respondents were informed at a certain point that the next question required them to understand what is meant by a 'standard drink'. They were then shown a page of information about what constitutes a 'standard drink' (Appendix 3). Respondents were then asked to estimate the number of standard drinks for each beverage type consumed on each drinking occasion.
- (c) The specific brand of alcohol consumed (if known) on the most recent drinking occasion; and the number, type and size of container they were drinking from.

- (d) Preferred labelling for drink containers (i.e., standard drinks, percentage alcohol by volume, or grams of alcohol) (see labelling diagrams at Appendix 4).
- (e) Details of the drinking setting (i.e., location, who with, size of group, type of activities etc.) on the occasion of highest consumption in the last four drinking days provided this was within the last month. For respondents who reported fewer than four drinking days in the last month the heaviest of these was chosen.
- (f) Whether or not prescribed or other drugs were used on the occasion of highest consumption, and the type of drug(s) used.

Section two of the questionnaire was self administered* and was completed by all respondents. This section contained questions designed to determine attitudes to, knowledge of, opinions on, and support for a range of alcohol related issues. These included:

- (a) The extent to which respondents thought alcohol was involved in different problems.
- (b) Opinions on whether or not it is alright to drink alcohol in certain places.
- (c) Knowledge of laws relating to alcohol, and the extent to which they supported the existing maximum fines for breaches of these laws.
- (d) The extent to which they have experienced problems with pubs or clubs near to where they live, and whether or not they knew where or with whom they could lodge a complaint about the pub or club.
- (e) Attitudes to questions of responsibility and liability in relation to the service of alcohol.
- (f) Level of support for a number of ideas for reducing problems related to the use of alcohol.
- (g) Attitudes to, and support for, health initiatives (i.e., no smoking areas) in pubs and clubs.

^{*} In the case of respondents with reading and/or writing difficulties, this section was completed for respondents by the interviewers.

Section three of the questionnaire was a self completion section for drinkers only and contained questions on:

- (a) Whether or not respondents had had any 'harmful' outcomes resulting from their drinking in the previous three months.
- (b) Attitudes to drinking and driving*
- (c) Alcohol dependency using the Severity of Alcohol Dependency Questionnaire (SADQ, 34) which included a number of new items.

Section four of the questionnaire was administered by interviewers and was completed only by those respondents who answered 'yes' to any one of the questions on 'harmful' outcomes in Section 3. The questions in Section 4 were the same as those in Section 1 which dealt with consumption and the setting details of the drinking occasion which preceded the 'harmful' outcome.

While developing the questionnaire two pre-tests were undertaken (June, 1990 with 15 respondents and July 1990 with 20 respondents) before the questionnaire was piloted for two weeks in August 1990, with 50 respondents.

2.4 Definitions

Consumption

The time period used in the survey for assessing the quantity and frequency of alcohol consumption was the four most recent drinking days in the previous three months. Each respondent was required to provide details, where necessary, of each occasion of drinking on a specific drinking day. Thus, drinking day means the specific day on which drinking occurred, and drinking occasion means the particular occasion, of which there could be more than one, when drinking occurred on a drinking day. A drinking occasion is one where the actual setting changed (i.e., when the drinker left one location, say home, to drink at, for example, a hotel), and is not related to different times of drinking at a single location.

In the case of the occasion of heaviest consumption this related to a particular drinking occasion, or a drinking day if a single occasion only was involved, in the previous month. Thus only those respondents who had consumed alcohol in the month prior to the interview were required to answer questions relating to the drinking setting on the occasion of highest consumption (Section 1 of

^{*} The results from the drink driving questions have been reported elsewhere (34) and so are not included in this report.

questionnaire). In the event of there being more than one drinking occasion where consumption levels were identical, the most recent occasion was the one chosen for questions relating to the drinking setting. This means, of course, that the actual consumption will be understated for those persons who drank on more than one occasion on a particular drinking day.

For the purpose of the analysis relating to consumption it was decided to adopt a three point scale 'level of risk'; viz, 'low', 'medium' and 'high'. This equates to the NH&MRC guidelines (36) on 'safe', 'hazardous' and 'harmful' drinking, which is 1-4 standard drinks per day for males and 1-2 per day for females ('low risk'); 5-6 standard drinks per day for males, 3-4 per day for females ('medium risk'); 7 or more standard drinks per day for males, 5 or more per day for females ('high risk').

3.0 DEMOGRAPHIC CHARACTERISTICS OF SAMPLE

3.1 Results

After weighting for gender and the number of persons over 16 years in each household, a sample closely matching the 1986 census figures for the Perth Metropolitan area was achieved (Table 2).

Table 2: Demographic characteristics

	1986 C	ensus	Survey	y Sample (n:	=1160)*
					weighted
	n	%	n	<u></u> %	%
Gender					
Male	407403	48.8	509	43.9	48.9
Female	428077	51.2	651	56.1	51.1
Age					
16-17	34659	4.1	38	3.3	3.9
18-24	206099	24.7	279	24.1	25.0
25-29	84660	10.1	99	8.5	8.5
30-39	164421	19.7	237	20.5	19.5
40-49	117394	14.0	175	15.1	16.0
50-59	89181	10.7	108	9.3	9.5
60 +	139066	16.6	222	19.2	17.6
Marital Status					
Single	219369	28.6	372	32.1	33.2
Married/defacto	435587	56.8	602	51.9	53.5
Separated/divorced	v				
widowed	111833	14.6	186	16.0	13.3
Drinker					
Yes	-	-	872	75.2	74.2
No	-	-	288	24.8	25.8

^{*} Comprised of main sample (n=1021) and 139 persons aged 18-24 years from second sample of persons aged 16-29 years (n=251).

Table 3 presents data on the highest level of education, employment, type of job and income of respondents. The majority (58.9%) had been educated to secondary school level; 24.3% achieved a trade certificate or diploma; and 11.6% had attended university.

Fifty six percent of respondents were employed, either full time (41.8%) or part time (14.2%). Those respondents without a job were either retired (13.4%) or engaged in home duties (13.4%). Ten percent were students and 7.1% were unemployed, that is either looking for work.or on social security or some other form of benefit.

The occupation of those employed shows the greater percentage (30.7%) were in "white collar" jobs such as managerial, administration and clerical. Almost 15.0% were employed in "blue collar" jobs and 14.5% in sales and service. The difference between the figures for 'retired' under *Employment Status* (13.4%) and *Occupation* (12.7%) is explained by fewer persons answering the question on occupation (167 v's 148).

Forty percent of respondents claimed to earn less than \$10,000, and a further 17.4% earn between \$11-20,000. Thus almost 60.0% of the sample earn less than \$20,000, or less than \$400 per week.

Table 3: Education, employment, occupation and income of respondents

	n	%	Weighted %
Highest level of education attained	7.2		
Primary	57	4.9	4.6
Secondary	681	58.8	58.9
Post-secondary	278	24.0	24.3
Tertiary	135	11.7	11.6
Other	6	0.5	0.6
Total	1157	100.0	100.0
Employment status			
Employed full time	462	39.8	41.8
Employed part time	171	14.7	14.2
Unemployed	80	7.0	7.1
Home Duties	172	14.8	13.4
Student	108	9.3	10.1
Retired	167	14.4	13.4
Total	1160	100.0	100.0

Cont / ..

.. Table 3 Cont ..

Table 3 Cont	n	%	weighted _%
Occupation	· · · · · · · · · · · · · · · · · · ·		
Manager / admin /			
professional	225	20.8	21.3
Clerical	106	9.8	9.4
Sales / service	158	14.6	14.5
Trades / labourers	144	13.3	14.7
Student / home duties /			
unemployed	295	27.3	26.9
Retired	148	13.7	12.7
Inadequately described	6	0.5	0.5
Total	1082	100.0	100.0
Estimated annual income			
\$0 - 10000	453	41.4	40.4
\$11000 - 20000	193	17.6	17.4
\$21000 - 30000	243	22.2	22.6
\$31000 - 40000	118	10.8	11.2
\$41000 - 50000	44	4.0	4.2
\$51000 - 60000	26	2.4	2.6
\$61000 and above	17	1.6	1.6
Total	1094	100.0	100.0

3.2 Birthplace of Respondents

Table 4 shows that 59.5% of the sample were born in Australia, and of these 1.2% (n=12) were of Aboriginal or Torres Strait Islander descent.

Because of low numbers for some overseas born respondents the data were collapsed, where applicable, into regions (e.g., Middle East) or continents (e.g., Europe). The majority of the overseas born came from the United Kingdom and Ireland (20.5% of sample), while a further 7.9% came from continental Europe including Eastern bloc countries such as the former USSR, Poland and Yugoslavia.

Table 4: Birthplace of respondents and descent of Australian born

Table 4:	Birthplace of respondents and descent of Australian born							
					weighted			
	Birthplace	Descent	<u> </u>	%	%			
	Australia	Aboriginal	8	0.7	0.8			
		Torres Strait Islander	4	0.3	0.4			
		Other descent	705	61.1	58.3			
	United Kingdom							
	& Ireland		221	19.2	20.5			
	Europe		86	7.5	7.9			
	Asia		53	4.6	5.0			
	New Zealand		27	2.3	2.5			
	Africa		23	2.0	2.3			
	Canada & USA		11	1.0	1.0			
	Middle East		4	0.3	0.3			
	Other		7	0.6	0.9			
	Total		1153	100.0	100.0			

3.3 Respondents with Experience in Alcohol Industry

In order to compare answers on several items it was necessary to identify various categories of respondents. One such category was persons who had, in the previous two years, held a job involving the sale of alcohol for consumption on licensed premises.*

After weighting, almost nine percent of the sample (n=101) were identified has having experience in pubs. Of these, 55.4% were females and 45.6% were males. Figure 1 shows the type of job involved. Predictably, the position of 'barstaff' accounts for the greater percentage of the different jobs, followed by table staff (waiters) and "other", such as bottle shop attendants.

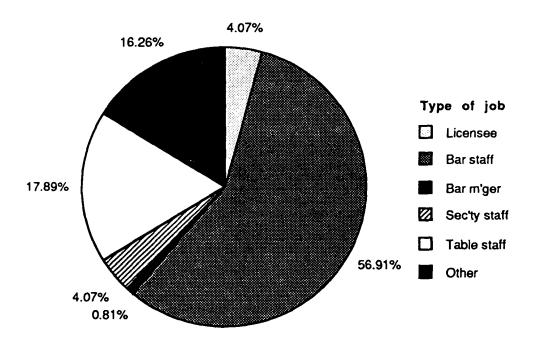


Figure 1: Type of job held by persons employed in the hotel industry in past two years (n=101)

^{*} Referred to throughout as 'persons with experience in pubs'.

4.0 ALCOHOL USE AND ALCOHOL RELATED PROBLEMS

This section presents data comparing average daily consumption with that on a recent occasion of highest consumption*. Also in this section are data on the number of persons who might be exhibiting some degree of dependence on alcohol; data on those persons who had recently (within past 3 months) encountered problems as a consequence of their drinking; and data related to problems experienced by people who live in the proximity of licensed premises.

4.1 Levels of Consumption

Data on average daily consumption and consumption on a recent occasion of highest consumption are presented below

4.1.1 Average daily consumption

Figure 2 shows that most respondents were found to have an average daily consumption well within the guidelines for low risk drinking (i.e., 1-2 standard drinks per day for women, and 1-4 per day for men).

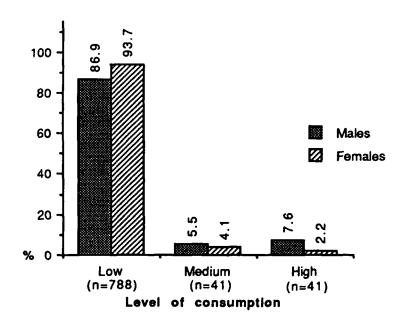


Figure 2: Average daily consumption by gender

Average daily consumption in this instance is based on reported consumption on the last four drinking days in the previous three months, and a recent occasion of highest consumption is the particular drinking occasion in the last four drinking days in the previous three months when most alcohol was consumed. In the event of two or more occasions having the same level of consumption, the most recent ocasion was used.

4.1.2 Consumption on heaviest drinking occasion

On a recent occasion of highest consumption, however, a markedly different drinking pattern is observed (Figure 3). Approximately half the sample were found to have consumed alcohol at medium to high risk levels, half of them (n=235) at high risk levels. It should be noted, however, that consumption in this instance will be understated because it refers only to a single drinking occasion (highest consumption) on a drinking day, consumption on other occasions on the same drinking day are excluded.

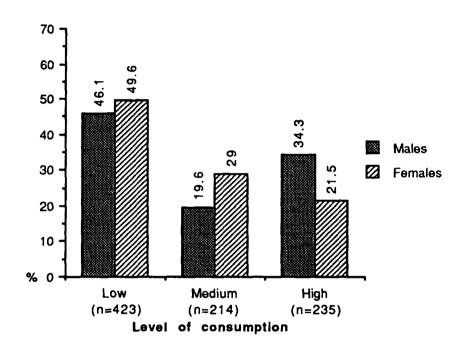


Figure 3: Consumption by gender on heaviest drinking occasion

4.1.3 Mean consumption

Table 5 presents alcohol consumption data by gender in three ways: first, the average consumption per day over the four most recent days on which alcohol was consumed in the previous three months; second, the mean consumption per drinking day; third, the mean consumption on the day of highest consumption.

It was found that average daily consumption was approximately half that recommended by the NH&MRC, and average consumption on any drinking day was equivalent to the recommended levels (1-2 standard drinks per day for women, and 3-4 standard drinks per day for men). However, on a high consumption occasion the average consumption was found to be nearly double the levels recommended by NH&MRC.

Table 5: Mean alcohol consumption by gender

	Males			Females			
	Mean	\$D	Range	Mean	ŞD	Range	
Consumption in Standard Drinks							
Average per day	2.1	4.08	0.01 - 30.0	0.6	1.39	0 0- 16.8	
Per drinking day	4.4	5.49	0.0 - 36.0	2.5	3.04	0 0- 33.0	
Highest day	6.8	7.11	0.0 - 37.0	3.6	4.56	1.0 - 49.0	

4.2 Degree of Alcohol Dependence

Table 6 presents the distribution of Severity of Alcohol Dependence scores by gender. The majority of drinkers achieved a positive SADQ score, with males recording a mean score of 4.77 (SD 5.57), and females a mean of 4.25 (SD 4.42). Only 10.2% of males and 8.2% of females scored in what might be termed the mild (11-20) to moderate (21-30) range, and none at all in the severely dependent range (31+).

Table 6: Scores on severity of alcohol dependence

	Males(n=406)	Females(n=466)	
% SADQ score	%	%	
Score= 0	18.6	29.2	
Score= 1-10	71.1	62.5	
Score=11-20	8.5	8.0	
Score=21-30	1.7	0.2	
Score=31-60	0.0	0.0	
Total	100.0	100.0	

4.3 Problems Associated with the Consumption of Alcohol

This section presents data on the extent to which drinkers encountered problems (referred to as 'harm') as a consequence of their drinking, or the drinking of others, in the previous three months. There were two reasons for restricting this item to the last three months. First, it corresponds to the time frame used for measuring alcohol consumption, that is the last four drinking days in the previous three months. Second, as interviewers were required to obtain detailed information about the drinking occasion which preceded the harm, it was thought appropriate that this be as recent as possible to avoid problems associated with memory loss over a more extended period.

So that the results in this section are representative the data reported in Table 7 is based on the main sample of 1160, as opposed to the combined samples (n=1272) which was used in the analysis reported in Section 6 below.

Ninety six respondents reported having experienced problems (11.0% of drinkers), 59 reporting only one problem, 19 reported having two problems, 12 reported three problems and six reported four or more problems.

Table 7 shows that the majority of affirmative responses (56) concerned problems with other persons who were drunk. Twenty six of these (19 women and 7 men) had not themselves been drinking at the time they experienced problems with drunken persons. In the case of the respondents' own drinking, the most often reported problems were being involved in a violent argument or fight (28 responses); having had an injury (24 responses) and taking time off work to recover (23 responses). The fewest responses were recorded for being charged with drink driving (2 responses).

Table 7: Alcohol related harm experienced in past 3 months by 872 drinkers

In the past three months	Frequency of 'Yes' Response*			
have you had:	n	%		
Problems from own drinking:				
Had an injury that was partly due to drinking alcohol	24	2.7		
Been charged with drink-driving	2	0.2		
Been involved in a violent argument or fight while under the influence of alcohol	28	3.2		
Had an accident while under the influence of alcohol resulting in damage costing more than \$100	5	0.6		
Been asked to leave a place, such as a party, pub, or club, because you had had too much to drink	15	1.7		
Been charged for an offence other than drink-driving after drinking alcohol	7	0.8		
Taken time off work to recover from the effects of drinking alcohol	23	2.6		
Problems from others drinking:				
Been involved in a violent argument or fight with another person who was clearly under the influence of alcohol	56	6.4		
No problems:	776	89.0		

^{*} Because of multiple responses to items the total 'n' is greater than 872 and the total percent is greater than 100.

4.4 Use of Other Drugs on Heaviest Consumption Occasion

4,4,1 Drug use by gender

Table 8 shows that both males and females were more likely to report using other drugs when drinking at high risk levels than when drinking at low to medium risk levels.

Table 8: Use of prescribed or other drugs by level of risk and by gender on the occasion of highest consumption.

Level of Risk

	Males			Females		
	Low	Medium	High	Low	Medium	High
Were drugs used?	(n=184) %	(n=79) %	(n=134) %	(n=225)	(n=136) <u>%</u>	(n=97) %
						-
No	93.5	91.1	80.6	86.7	86.8	79.4
Yes	6.5	8.9	19.4	13.3	13.2	20.6

4.4.2 Type of drugs used

Marijuana was the most widely used illicit drug, particularly by males (Table.9.). 'Other' drugs, such as heart and blood pressure tablets, were the most widely used prescribed drugs, particularly by females.

Table 9: Type of drugs used on occasion of highest consumption

Drugs Used	Males (n=397)	Females (n=458)n
Tranquillisers	2	2
Analgesics	4	5
Antihistamines	4	3
Marijuana	26	20
Amphetamines	1	3
Ecstasy	0	2
LSD	2	0
Heroin	1	1
Other	21	35

4.5 Residents' Experiences of Problems from Nearby Licensed Premises

Table 10 shows the extent of 'problems' attributed to licensed premises which people living in the Perth metropolitan area claim to have experienced while in their own homes during the previous 12 months. It was found that almost 24.0% of people had experienced some form of problem with licensed premises.

The main 'problems' reported were litter (13.1%) and noise - either traffic noise (12.1%), loud music (10.8%), or other noise from the licensed premises (7.7%).

Disorderly conduct in the vicinity of licensed premises had been experienced by 10.2% of respondents and offensive behaviour by 9.2%. The 'problem' least experienced by respondents was property damage (4.8%).

Table 10: Experience of problems from nearby pubs or clubs

Total Sample

		(n=1160)	•	
	Yes	No	Unsure	
Problems Experienced	<u>%</u>	%	%	
Litter.	13.1	85.6	1.7	
Excessive traffic noise.	12.1	85.6	2.3	
Loud music.	10.8	88.1	1.1	
Other noise coming from the premises.	7.7	90.9	1.4	
Offensive behaviour.	9.2	88.9	1.9	
Damage to your property.	4.8	94.0	1.2	
Fear for your personal safety.	6.4	92.3	1.3	
The peace and quiet of your neighbourhood being disturbed by any activity occurring on the premises.	7.8	89.5	2.8	
The peace and quiet of your neighbourhood being disturbed by disorderly conduct occurring near to the premises.	10.2	86.4	3.4	
Percentage reporting any of the above	23.9	69.2	6.9	

4.6 Summary

Average daily consumption of alcohol was found to be well within the levels recommended by the NH&MRC. However, typical consumption on a drinking day was slightly in excess of these guidelines and, of more concern, over half of the sample drank in excess of the guidelines on at least one drinking occasion out of their last four.

As many as 11.0% of drinkers had experienced at least one serious problem in the previous 3 months as a result of their own drinking and/or someone else's. The most numerous of these was being involved in a "violent argument or fight" with someone else who was under the influence of alcohol. These incidents were most frequently reported either by non-drinking women or men who had also been drinking. Among other problems reported by respondents arising from their own drinking, receiving an injury and taking time off work to recover from the effects of alcohol were the most common.

Most drinkers scored a positive but low SADQ score. Ten percent of men and 8.0% of women scored in the mild to moderate range of alcohol dependence.

The fact that 20.0% of people who drank at high risk levels on the occasion of heaviest consumption also used other drugs is a matter of concern for health professionals. This would suggest the need for education campaigns which target at risk groups (i.e., 16-24 year olds and older women using prescribed drugs) warning of the danger in combining alcohol with other drugs. The fact that a number of respondents admitted using prescribed drugs in combination with alcohol would seem to indicate the need for doctors to ensure adequate instructions and warnings are given to patients when prescribing drugs.

As many as 24.0% of respondents claimed to have experienced problems from nearby licensed premises which, when placed in the context of the whole of the Perth metropolitan area, indicates quite a serious problem for a large number of people. Furthermore, it should be noted that not everyone surveyed lived in the immediate vicinity of licensed premises, therefore the prevalence of problems might be higher among those people who do live close. Many of these problems might be alleviated by training hospitality workers in responsible serving practices, and if the police were to pay greater attention to enforcing the licensing laws in respect to serving persons who are intoxicated.

5.0 CHARACTERISTICS OF THE DRINKING SETTINGS ASSOCIATED WITH LOW, MEDIUM AND HIGH RISK DRINKING

This section presents data relevant to characteristics of the drinking setting (i.e., drinking location, size of drinking group, type of activities, etc.) by level of consumption on a recent occasion of highest consumption within the last four drinking days.*

5.1 Type of Drinking Location

The drinking locations and level of consumption of respondents on the occasion of highest consumption are reported in Figure 4. High risk consumption was more likely to be associated with drinking in hotels and taverns, and low and medium risk consumption were much more likely to be associated with drinking at a person's own home or at other locations (i.e., at work, in a park or at the beach).

The overall differences between licensed and unlicensed locations and consumption were found to be highly significant ($X^2=29.3$, df=4, p<0.001)

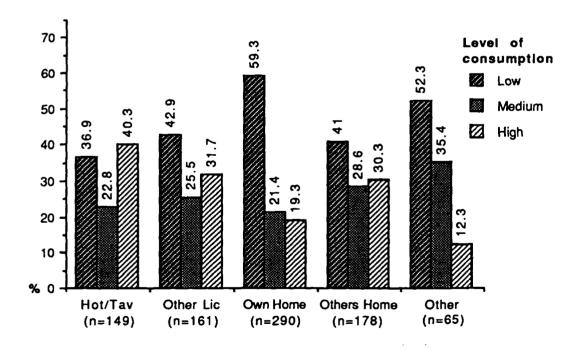


Figure 4: Drinking location by level of consumption

^{*} Level of consumption is shown as low (1-2 standard drinks for women, 1-4 for men), medium (3-4 standard drinks for women, 5-6 for men) and high (5 or more standard drinks for women, 7 or more for men).

5.2 Type of alcoholic beverage consumed

Figure 5 reports the type of beverage consumed on the occasion of highest consumption. Beer was the preferred beverage for 58.7% of males, and wine for 53.1% of females. Slightly more men (17.2%) drank spirits than drank wine (17.0), and slightly more women (19.4%) drank spirits than drank beer (14.8%). Women were more likely than men to report drinking 'other' beverages (i.e., cocktails, coolers, liqueurs). These gender differences in beverage preference were found to be highly significant ($X^2=245.0$, df=6, p<0.001).

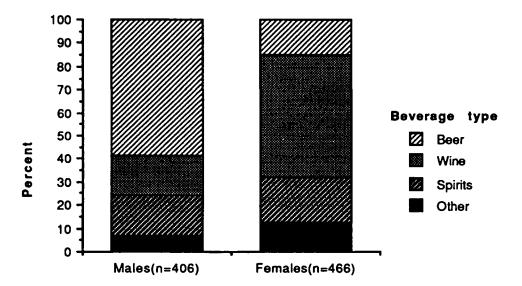


Figure 5: Type of beverage consumed on occasion of highest consumption

5.3 Degree of 'Satisfaction' with the Drinking Occasion

Figures 6 & 7 show that most drinkers reported that the drinking occasion was 'very satisfying'. Fifty five percent of women (n=251) and 52.6% of men (n=211) found the occasion very satisfying. Only 4.4% of women (n=20) and 2.7% of men (n=11) found the occasion 'unsatisfying'. Both men and women were more likely to report a high consumption occasion as 'very satisfying' than 'moderately satisfying' or 'unsatisfying'.

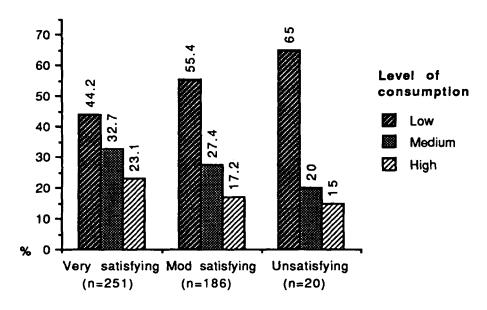


Figure 6: How satisfying was drinking occasion by level of consumption (Females)

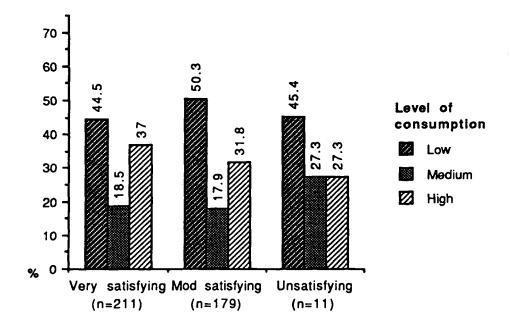


Figure 7: How satisfying was drinking occasion by level of satisfaction (Males)

5.4 Characteristics of the Drinking Group

5.4.1 Size of drinking group

Low and medium risk consumption was mostly associated with smaller groups, or with drinking alone. In groups of between 2-5 persons 83% of females (Fig. 8) and 72.7% of males (Fig. 9) drank at low and medium risk levels. In large groups (6 or more persons), almost 50.0% of males drank at high risk levels compared to 29.3% of females who were more likely to report low to medium risk consumption when in large groups.

These differences were found to be highly significant for both females ($X^2=31.4$, df=8, p<0.001) and males ($X^2=44.5$, df=8, p<0.001).

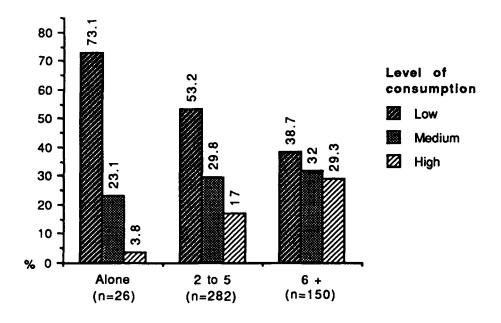


Figure 8: Size of drinking group by level of consumption (Females)

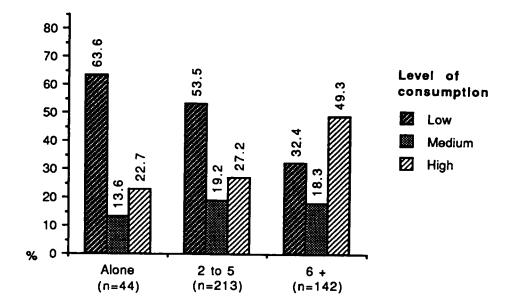


Figure 9: Size of drinking group by level of consumption (Males)

5.4.2 Composition of drinking group

Figure 10 shows that the majority of female drinkers (61.2%) reported drinking in groups comprising roughly equal numbers of males and females, compared to 47.7% of male drinkers who drank in such groups (Fig. 11). Forty seven percent of males drank in mostly male groups compared to 15.2% of females, and 23.6% of females drank in mostly female groups compared to only 5.3% of males.

Females drinking in mostly male groups were more likely to drink at high risk levels, and when drinking in groups of equal numbers of males and females, or mostly females, they were more likely to drink at low to medium risk levels. These differences were found to be significant ($X^2=22.7$, df=8, p=<0.01).

Males were slightly more likely to drink at high risk levels in groups comprised of mostly males than they are in groups comprising equal numbers of males and females, or mostly female. However, these differences were not significant.

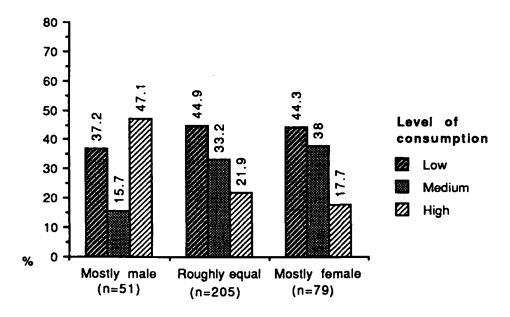


Figure 10: Composition of drinking group by level of consumption (Females)

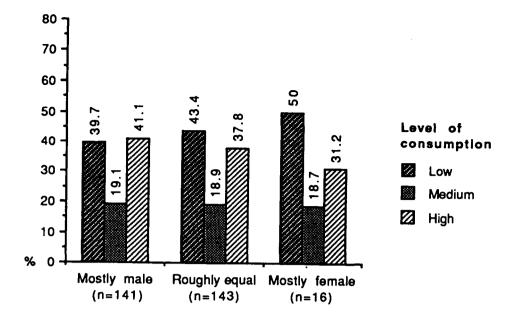


Figure 11: Composition of drinking group by level of consumption (Males)

5.5 Characteristics of Licensed Settings

N.B. The data in this section applies only to questions 29 - 37 in Section 1 of the questionnaire which were related to drinking at licensed locations. For these analyses the locations are not differentiated by type of licensed premises, but are based on aggregate data for all license types. Therefore the relationships between drinking location and the different variables do not necessarily reflect what might be the case were the analyses to have been on the basis of license type. Further analyses will be required to discover the relationship between license type and the different variables, and it is anticipated that such analyses will be reported separately.

5.5.1 Gender ratio at drinking location

Figure 12 shows that when the gender ratio at licensed drinking locations is compared against consumption levels, a higher proportion of high risk consumption occurred where there were mostly males, and a higher proportion of low and medium risk consumption occurred where there were mostly females.

Where there were roughly equal numbers of males and females proportionately more persons drank at low risk levels, and there was little difference between the numbers drinking at medium and high risk levels. The overall differences were found to be significant ($X^2=10.5$, df=4, p=0.03).

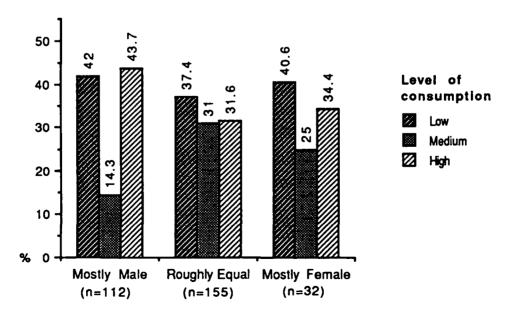


Figure 12: Gender ratio at licensed drinking location by level of consumption

5.5.2 Extent of crowding

Figure 13 shows that as the extent of crowding at a drinking location increases, so to does the likelihood of medium to high risk consumption. Where drinking locations were only a quarter to half full, low risk consumption was more likely to be reported. Overall these differences were not significant.

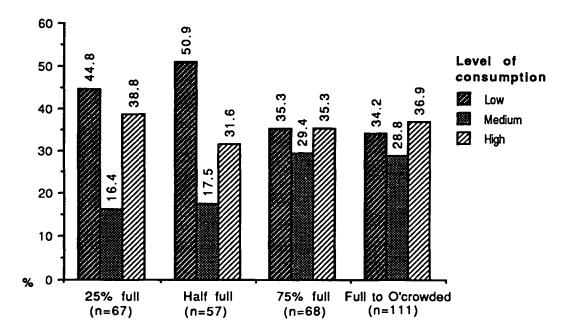


Figure 13: Extent of crowding at licensed drinking location by level of consumption

5.5.3 Availability of discounted drinks

Figure 14 presents data on whether or not the price of alcoholic drinks were discounted on the occasion of heaviest consumption. The great majority of drinkers (n=240) answered 'no' to this question regardless of their level of consumption. Of those who drank at locations where drinks were discounted, proportionately more drank at high risk levels than at locations where drinks were not discounted.

Overall, these differences were not significant.

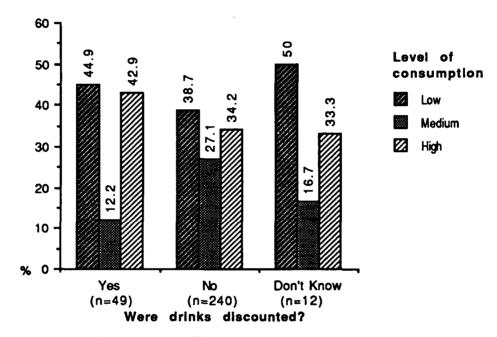


Figure 14: Availability of discounted drinks at licensed drinking location by level of consumption

5.5.4 Intoxicated persons buying alcohol

Figure 15 summarises data on the question of whether or not obviously drunk persons were still able to buy alcohol at the particular drinking location on the occasion of heaviest consumption. The majority of drinkers (n=169) answered 'no' to this question and in the case of those answering 'yes', the majority (50.5%) were identified as drinking at high risk levels, compared to 27.8% of those who answered 'no'. These differences were found to be highly significant ($X^2=17.1$, df=2, p<0.001).

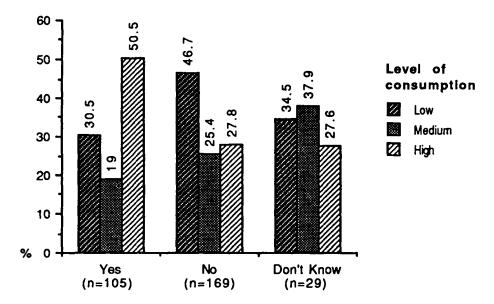


Figure 15: Were obviously drunk persons still buying alcohol at licensed drinking location by level of consumption

5.5.5 How drinks were paid for

Figure 16 presents data on the mode of payment for drinks on the occasion of heaviest consumption. Persons identified as drinking at low or medium risk levels were more likely to report one person in the drinking group, either someone else or themselves, as paying for drinks. Those drinking at high risk levels were more likely to report sharing the cost among the group or drinking in rounds (i.e., 'shouting'). These differences were found to be highly significant (X²=25.9, df=6, p<0.001).

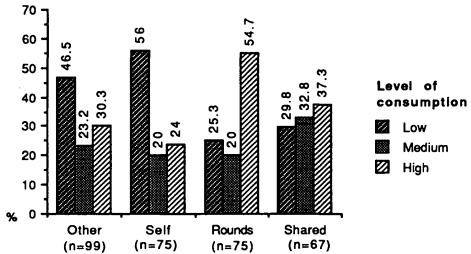


Figure 16: How drinks were paid for at licensed drinking location by level of consumption

5.5.6 Type of entertainment (females)

The type of entertainment most often reported by women was music, with more reporting recorded music (i.e., records/tapes, DJ) than live music, particularly rock bands (Table 11). Venues where high risk drinking occurred were also more likely to be those where recorded music was the type of entertainment, especially where the source of the music was a DJ (41.2%).

Proportionately more women (63.6%) drank at high risk levels while watching television compared to other forms of entertainment, although the actual numbers in this case are low (n=11).

Low risk consumption among women was found to be most often associated with drinking locations where no entertainment was provided (57.1%).

Table 11: Type of entertainment by level of respondents consumption risk on occasion of highest consumption (Females)

Consumption

Type of	Low Risk	Medium Risk	High Risk	Total
Entertainment	%	%		<u>n</u> %
Records/tapes	34.3	34.3	31.4	(35) 100.0
Rock band	35.3	35.3	29.4	(17) 100.0
Other live music	32.4	40.5	27.0	(37) 100.0
DJ	32.3	26.5	41.2	(34) 100.0
Strippers/Lingerie etc	0	0	0	(0) -
Skychannel	100.0	0	0	(1) 100.0
TV	18.2	18.2	63.6	(11) 100.0
None	57.1	35.7	7.1	(28) 100.0

5.5.7 Type of entertainment (males)

The type of entertainment most often reported by men was music in the form of records and tapes, and live music other than rock bands (Table 12). However, high risk drinking was more likely at venues where rock bands were present (59.1%) or where the source of the music was a DJ (51.7%).

Proportionately more men (66.7%) drank at high risk levels where 'strippers' and/or Skychannel (54.5%) were the types of entertainment, although the actual numbers in both cases are low (6 and 11 respectively).

Low risk consumption among men was found to be most often associated with drinking locations where no entertainment was provided (52.8%), or where television was the type of entertainment (47.1%)

Table 12: Type of entertainment by level of respondents consumption risk on occasion of highest consumption (Males)

Consumption

Type of Entertainment	Low Risk %	Medium Risk	High Risk	To n	otal %
Records/tapes	42.2	22.2	35.7	(45)	100.0
Rock band	18.2	22.7	59.1	(22)	100.0
Other live music	38.7	12.9	48.4	(31)	100.0
DJ	37.9	10.3	51.7	(29)	100.0
Strippers/Lingerie etc	33.3	0	66.7	(6)	100.0
Skychannel	27.3	18.2	54.5	(11)	100.0
TV	47.1	11.8	41.2	(17)	100.0
None	52.8	22.2	25.0	(36)	100.0

5.6 Type of Food Eaten on the Occasion of Heaviest Consumption

This section is concerned with eating at all types of drinking locations, licensed and unlicensed, and which were not differentiated for the analysis. Further analyses will be required to discover the relationship between consumption, location and types of meal, and it is anticipated that such analyses will be reported separately.

Figure 17 shows that low or medium risk levels of consumption are most often associated with more formal types of eating, such as a sit down meal at a restaurant or at home, and that proportionately more high risk consumption is associated with eating at barbecues or with eating snack type meals. Where no food was eaten there was more likely to be low to medium risk consumption than high risk consumption.

The majority of drinkers reported either eating a 'sit-down' meal (44.9%, n=383)) or eating nothing (23.5%, n=200). Fifty five percent of those who ate a meal and 49.5% of those who ate nothing drank at low risk levels compared to 18.0% and 30.0% respectively who drank at high risk levels.

A minority of drinkers ate at barbecues or picnics (8.6%, n=73), or ate 'fast food' (5.4%, n=46). Thirty five percent of those at barbecues and 37.0% of those who ate 'fast food' drank at high risk levels compared to 34.2% and 23.9% respectively who drank at low risk levels. Of the 17.6% (n=150) of drinkers who said they ate only 'nibbles' (i.e., nuts, potato chips etc), 40.7% drank at low risk levels and 38.7% drank at high risk levels.

These overall differences were found to be highly significant ($X^2=58.4$, df=8, p<0.001)

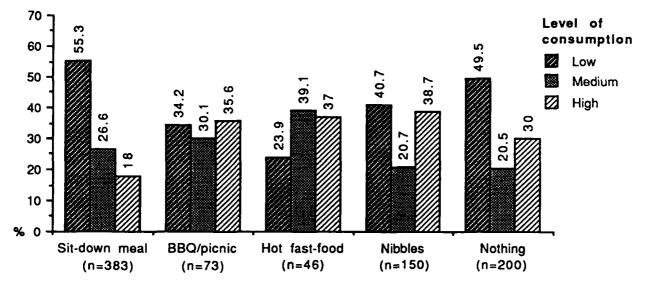


Figure 17: Type of meal by level of consumption

5.7 Transport To and From the Drinking Location

Information on transport was sought only from those respondents who had been drinking away from home on the occasion of highest consumption. Transport options included 'public transport' and 'other', however, as few respondents reported these options, these data have been omitted from Tables 13 - 16..

5.7.1 Transport to drinking location

The majority of women nominated "other driver" (n=164) when travelling to the drinking location, followed by "self" (n=90) (Table 13). In contrast, the majority of men (n=142) drove themselves to the drinking location, with "other driver" (n=72) being the next preferred option (Table 14).

Table 13: How respondents travelled to drinking location on occasion of highest consumption by level of consumption risk (Females)

Type of Transport	Low Risk	Medium Risk	High Risk	T n	otal %
Drove self	53.3	26.7	20.0	(90)	100.0
Other driver	41.7	38.6	19.6	(164)	100.0
Taxi	21.4	14.3	64.3	(14)	100.0
Walked	21.7	43.5	34.8	(23)	100.0

Consumption

Table 14: How respondents travelled to drinking location on occasion of highest consumption by level of consumption risk (Males)

Consumption Type of Transport Low Risk Medium Risk High Risk Total % <u>‰</u> <u>%</u> <u>%</u> Drove self 49.3 19.0 31.7 (142) 100.0 Other driver 41.7 20.8 37.5 (72)100.0 Taxi 6.7 20.0 73.3 (15)100.0 Walked 30.3 24.2 45.4 (33)100.0

5.7.2 Transport from the drinking location

Interestingly, more women drove from the drinking location (Table 15) than drove to it (94 v's 90), while fewer men drove from the drinking location (Table 16) than drove to it (115 v's 142).

Of those who drove from the drinking location 22.6% of men had drunk at high risk levels (Table 16) compared to 14.9% of women (Table 15), and 24.5% of women had drunk at medium risk levels compared to 19.4% of men. Men were much more likely than women to have been drinking at high risk levels when they were not themselves driving. For example, 44.1% of men who reported leaving the drinking location with another driver had drunk at high risk levels compared to 23.3% of women.

Table 15: How respondents travelled from drinking location on occasion of highest consumption by level of consumption risk (Females)

	00p				
Type of Transport	Low Risk	Medium Risk	High Risk	_ <u>n</u>	otal %
Drove self	60.6	24.5	14.9	(94)	100.0
Other driver	36.5	40.2	23.3	(159)	100.0
Taxi	20.0	20.0	60.0	(20)	100.0
Walked	23.8	42.9	33.3	(21)	100.0

Consumption

Table 16: How respondents travelled from drinking location on occasion of highest consumption by level of consumption risk (Males)

	Consumption				
Type of Transport	Low Risk	Medium Risk	High Risk	T n	otal <u>%</u>
Drove self	58.3	19.1	22.6	(115)	100.0
Other driver	35.5	20.4	44.1	(93)	100.0
Taxi	11.5	11.5	76.9	(26)	100.0
Walked	27.3	27.3	45.4	(33)	100.0

Consumntion

5.8 Reasons for Drinking on Occasion of Heaviest Consumption

Respondents could nominate as many reasons as necessary for drinking on the occasion of heaviest consumption.

5.8.1 Reasons for drinking (females)

Numerically, the reason nominated most often by women was 'to enjoy the taste of a drink, or enjoy drinking with food', followed by 'to celebrate a special occasion', the latter also being the most important reason for drinking on that occasion (Table 17).

The reasons least often nominated by women, and which are included in Table 17, were: 'it was expected of me' and 'to help me meet people'. Reasons excluded from the table due to extremely low numbers were: 'to make it easier to do something I probably shouldn't do', and 'can't say'.

Women nominating 'to help me meet people' and/or 'to pass the time' as reasons for drinking were more likely to have drunk at high risk levels than was the case for other reasons for drinking.

Low risk consumption among women was most often associated with 'to help me relax' and/or 'other' reasons for drinking.

Table 17: Reasons for drinking on occasion of highest consumption by level of consumption risk (Females)

Consumption

Reason for	Low Risk	Medium Risk	High Risk	T	otal
Drinking	%	%	%	n	<u>%</u>
Celebrate special occasion	43.0	32.8	24.2	(186)	100.0
To help meet people	62.5	0	37.5	(8)	100.0
To help relax	52.1	22.3	25.5	(94)	100.0
To join in with other people	42.5	31.9	25.5	(141)	100.0
Expected of me	72.7	18.2	9.1	(11)	100.0
To enjoy taste of a drink, or enjoy drinking with food	8 45.6	35.5	18.9	(217)	100.0
To pass time	42.8	21.4	35.7	(14)	100.0
Other	53.3	20.0	26.7	(30)	100.0

Most important reason for drinking on that occasion: To celebrate a special occasion (34.5%, n=157).

5.8.2 Reasons for drinking (males)

Numerically, the reason nominated most often by men was 'to enjoy the taste of a drink, or enjoy drinking with food', followed by 'to join in with other people', with the former being the most important reason for drinking on that occasion (Table 18).

The reasons least often nominated by men, and which are included in Table 18, were: 'it was expected of me' and 'to help me meet people'. Reasons excluded from the table due to extremely low numbers were: 'to make it easier to do something I probably shouldn't do', and 'can't say'.

Men nominating 'to help me meet people' and/or 'to pass the time' as reasons for drinking were more likely to have drunk at high risk levels than was the case for other reasons for drinking.

Low risk consumption among men was most often associated with 'to help me relax', or 'to enjoy the taste of drink, or enjoy drinking with food'.

Table 18: Reasons for drinking on occasion of highest consumption by level of consumption risk (Males)

Consumption

Reason for	Low Risk	Medium Risk	High Risk	Total	
Drinking	%	<u> </u>	%	<u> </u>	<u>‰</u>
Celebrate special occasion	38.6	16.5	44.9	(127)	100.0
To help meet people	20.0	23.3	56.7	(30)	100.0
To help relax	48.3	15.4	36.3	(91)	100.0
To join in with other people	42.1	19.5	38.4	(159)	100.0
Expected of me	43.7	18.7	37.5	(16)	100.0
To enjoy taste of a drink, or enjoy drinking with food	3 53.6	17.7	28.7	(181)	100.0
To pass time	32.0	12.0	56.0	(25)	100.0
Other	36.4	15.1	48.5	(33)	100.0

Most important reason for drinking on that occasion: To enjoy the taste of a drink, or enjoy drinking with food (27.6%, n=111).

5.9 Reasons for Choosing Particular Drinking Location on Occasion of Heaviest Consumption

Respondents were asked to nominate from a list of 16 as many reasons as they wished for choosing to go to the particular drinking location.

5.9.1 Reasons for choosing particular location (females)

Numerically, the reasons most often cited by women were: 'people I know will be there'; 'the atmosphere'; and 'the convenience of being at home', with the former being the most important reason. Reasons least often cited were: 'because I work there'; 'other entertainment'; 'getting drunk if I wanted to'; and 'can't say' (Table 19).

When comparing reasons for choosing a particular drinking location with levels of consumption it was found that women who cited 'getting drunk if I wanted to'; 'the music'; and 'I could drink alcohol there' were more likely to have been drinking at high risk levels. Low risk consumption among women was found to be most often associated with reasons such as: 'convenience of being home', 'other entertainment', and 'can't say'.

Table 19: Reason for choosing drinking location on occasion of highest consumption by level of consumption risk (Females)

Consumption

Reason for choosing	Low Risk	Medium Risk	High Risk	Total	
drinking location	%		%	n	<u>%</u>
Convenience of being at home	61.1	27.0	11.9	(126)	100.0
Close to home	37.9	31.0	31.0	(58)	100.0
People I know will be there	39.5	30.2	30.2	(215)	100.0
I could drink alcohol there	11.1	25.9	63.0	(27)	100.0
The activities	52.2	26.1	21.7	(23)	100.0
The atmosphere	30.4	35.2	34.4	(125)	100.0
I work there	44.4	11.1	44.4	(9)	100.0
The music	28.6	19.0	52.4	(42)	100.0
Other entertainment	57.1	35.7	7.1	(14)	100.0
Special event there	44.3	33.9	21.8	(124)	100.0
Getting drunk if I wanted to	0	27.3	72.7	(110)	100.0
Cost or type of food	47.4	39.5	13.2	(38)	100.0
Cost of alcoholic drinks	16.7	41.7	41.7	(12)	100.0
Friendliness of people serving there	54.5	27.3	18.2	(22)	100.0
Can't say	66.7	6.7	26.7	(15)	100.0
Other	42.9	39.3	17.9	(28)	100.0

Most important reason for choosing particular drinking place was: People I know will be there (29.0%, n=133).

5,9,2 Reasons for choosing particular location (males)

Numerically, the reasons most often cited by men were the same as those cited by women: 'people I know will be there'; 'the atmosphere'; and 'the convenience of being at home', and, as also was the case with women, the former was the most important reason. Reasons least often cited by men were also the same as those cited by women: 'because I work there'; 'other entertainment'; 'getting drunk if I wanted to'; and 'can't say' (Table 20).

When comparing reasons for choosing a particular drinking location with levels of consumption, men who cited 'getting drunk if I wanted to'; 'the music'; and 'I could drink alcohol there' were more likely to have been drinking at high risk levels. Low risk consumption among men was found to be most often associated with reasons such as: 'I work there', 'the convenience of being home' and 'can't say'.

Table 20: Reason for choosing drinking location on occasion of highest consumption by level of consumption risk (Males)

Consumption

Reason for choosing	Low Risk	Medium Risk	High Risk	Total	
drinking location	<u>%</u>	%	_%	<u>n</u>	_%
Convenience of being at home	57.4	18.8	23.8	(101)	100.0
Close to home	35.1	22.8	42.1	(57)	100.0
People I know will be there	37.2	20.4	42.4	(191)	100.0
l could drink alcohol there	28.3	23.9	47.8	(46)	100.0
The activities	41.4	13.8	44.8	(290	100.0
The atmosphere	33.0	22.0	44.9	(109)	100.0
I work there	61.1	16.7	22.2	(18)	100.0
The music	31.2	15.6	53.1	(32)	100.0
Other entertainment	31.2	12.5	56.2	(16)	100.0
Special event there	51.2	11.0	37.8	(82)	100.0
Getting drunk if I wanted to	11.1	5.6	83.3	(18)	100.0
Cost or type of food	40.7	37.0	22.2	(27)	100.0
Cost of alcoholic drinks	30.8	17.9	51.3	(39)	100.0
Friendliness of people serving there	38.7	29.0	32.3	(31)	100.0
Can't say	53.8	23.1	23.1	(13)	100.0
Other	31.2	1.2	37.5	(32)	100.0

Most important reason for choosing particular drinking place was: *People I know will be there* (30.1%, n=120).

5.10 Drinking Companions

Respondents were asked to nominate what best described the people they were drinking with on the occasion of heaviest consumption.

5.10.1 Type of drinking companions (females)

Women mostly reported drinking with friends of both sexes, or with family and relatives, and least drinking with business associates and strangers (Table 21).

Women were more likely to drink at a high risk level when drinking with work mates (34.5%) and business associates (37.5%), although in the latter case the actual numbers are extremely low (n=8). They were more likely to drink at low risk levels when drinking with family members or with relatives (63.9%), than when drinking with other persons or types of groups.

The differences between drinking companions and consumption levels among women were found to be significant ($X^2=33.0$, df=14, p<0.01).

Table 21: Who drinking with by level of respondents consumption risk on occasion of highest consumption (Females)

Consumption

Who drinking with	Low Risk	Medium Risk	High Risk	To n	otal %
Work mates	37.9	27.6	34.5	(29)	100.0
Business Associates	25.0	37.5	37.5	(8)	100.0
Friends of both sexes	34.5	32.4	33.1	(142)	100.0
Friends of opposite sex	29.4	29.4	41.2	(17)	100.0
Acquaintances	44.0	44.0	12.0	(25)	100.0
Friends of same sex	42.3	38.5	19.2	(26)	100.0
Family and/or relatives	63.9	24.1	12.0	(83)	100.0
Strangers	66.7	33.3	0	(3)	100.0

5.10.2 Type of drinking companions (males)

Men mostly reported drinking with friends of both sexes and, to a lesser extent, with family and relatives, and least drinking with friends of the opposite sex and with strangers (Table 22).

Men were more likely to drink at a high risk level when drinking with friends of both sexes (49.2%) and with acquaintances (46.1%). They were more likely to drink at low risk levels when drinking with business associates (80.0%) and with family members or with relatives (55.3%).

The differences between drinking companions and consumption levels among men were found to be significant ($X^2=48.2$, df=14, p<0.001).

Table 22: Who drinking with by level of respondents consumption risk on occasion of highest consumption (Males)

Consumption

Who drinking with	Low Risk	Medium Risk	High Risk	Total n %
Work mates	42.4	39.4	18.2	(33) 100.0
Business Associates	80.0	13.3	6.7	(15) 100.0
Friends of both sexes	35.0	15.8	49.2	(120) 100.0
Friends of opposite sex	40.0	20.0	40.0	(5) 100.0
Acquaintances	38.5	15.4	46.1	(26) 100.0
Friends of same sex	28.6	30.9	40.5	(42) 100.0
Family and/or relatives	55.3	17.0	27.7	(47) 100.0
Strangers	55.6	22.2	22.2	(9) 100.0

5.11 Types of Activity at the Drinking Location on the Occasion of Heaviest Consumption

Respondents could answer as many as they wished of the 11 activity items previously identified as those most often engaged in at drinking locations.

5.11.1 Activities at drinking location (females)

In terms of total numbers, talking, eating, listening to music and playing games (other than bar games and outdoor sports) were the activities most often mentioned as taking place at the drinking location. Least mentioned activities were reading, sexual and gambling (Table 23).

Women were more likely to report activities most often associated with licensed premises, such as pool or darts (62.5%), or dancing (42.1%) in association with high risk consumption. Low risk consumption was more often associated with activities most likely to be taking place at unlicensed locations, such as watching TV (67.0%), playing games (61.1%). Eating, which takes place at all types of location, was also closely associated with low risk consumption.

That alcohol consumed at high levels might promote or facilitate sexual promiscuity is clear from the 50.0% of women who reported sexual activity taking place in association with high risk consumption. It should be noted, however, that the actual numbers were low (n=10).

Table 23: Type of activity by level of respondents consumption risk on occasion of highest consumption (Females)

Consumption

Type of Activity	Low Risk	Medium Risk	High Risk	T	otal
	%	%	%	n	%
Dancing	29.5	28.4	42.1	(88)	100.0
Bar games (e.g., pool/darts)	18.7	18.7	62.5	(16)	100.0
Outdoor sports	46.1	38.5	15.4	(13)	100.0
Gambling	40.0	60.0	0	(5)	100.0
Playing other games	61.1	16.7	22.2	(180)	100.0
Watching TV	67.0	17.6	15.4	(91)	100.0
Eating	49.3	32.3	18.4	(294)	100.0
Sexual	40.0	10.0	50.0	(10)	100.0
Listening to music	35.8	27.8	36.4	(187)	100.0
Reading	100.0	0	0	(2)	100.0
Talking	47.9	29.8	22.3	(403)	100.0

5,11.2 Activities at drinking location (males)

In terms of total numbers talking, eating, and listening to music were the activities most often mentioned as taking place at the drinking location. Least mentioned activities were reading, sexual and gambling (Table 24).

Men were more likely to report activities most often associated with licensed premises, such as dancing (55.8%) and pool or darts (54.2%), in association with high risk consumption. Listening to music, which takes place at all types of location, was also closely associated with high risk consumption among males (52.2%). Low risk consumption was more often associated with activities most likely to be taking place at unlicensed locations, such as watching TV (50.0%) and playing games (42.9%). Eating, which takes place at all types of location, was also closely associated with low risk consumption (49.0%).

That alcohol consumed at high levels might promote or facilitate sexual promiscuity is clear from the 100.0% of men who reported sexual activity taking place in association with high risk consumption. It should be noted, however, that the actual numbers were low (n=7).

Table 24: Type of activity by level of respondents consumption risk on occasion of highest consumption (Males)

Consumption

Type of Activity	Low Risk	Medium Risk	High Risk	Total
	<u>%</u>	%	%	<u>n</u> %
Dancing	24.4	19.8	55.8	(86) 100.0
Bar games (e.g., pool/darts)	37.5	8.3	54.2	(48) 100.0
Outdoor sports	40.0	28.0	32.0	(25) 100.0
Gambling	53.3	13.3	33.3	(15) 100.0
Playing other games	42.9	23.8	33.3	(21) 100.0
Watching TV	50.0	16.3	33.7	(86) 100.0
Eating	49.0	18.4	32.6	(196) 100.0
Sexual	0	0	100.0	(7) 100.0
Listening to music	28.3	19.5	52.2	(159) 100.0
Reading	54.5	18.2	27.3	(11) 100.0
Talking	44.3	21.7	33.9	(327) 100.0

5.12 Summary

It was found that there was a significant tendency for high risk consumption to occur on licensed premises, mainly hotels, as opposed to private residences. High risk consumption was also significantly associated with large groups (6 or more) of mainly males buying in rounds.

Other factors found to be associated with high risk drinking were: buying in rounds; listening to music; dancing; playing bar games; strippers; drinking situations where little or no food was eaten; and where obviously drunk persons were still able to buy alcohol.

Low risk consumption was found to be most often associated with drinking in private residences, or in venues where a sit down meal was eaten (restaurants), and which were only one quarter to half full. Low risk consumption was also associated with drinking in small groups of family and relatives, or with friends of both sexes, and with venues where there was no entertainment or where watching television or just talking took place.

These findings indicate a need for servers of alcohol in licensed premises to be aware of the risk potential when groups of mainly young males are drinking together, especially in venues where music is the main source of entertainment, and where little or no food is available. This also points to the need for a more thorough scrutiny of such types of drinking venues by licensing authorities and, given the potential for violence to occur in and around such venues, by police.

6.0 CHARACTERISTICS OF DRINKERS AND DRINKING SITUATIONS ASSOCIATED WITH INCIDENCE OF ALCOHOL RELATED HARM

This section presents data on those persons identified as having experienced harm (referred to below as the 'harm sample') during the previous three months as a result of their own drinking, or the drinking of others when they themselves had also been drinking.

Drinkers who had experienced harm were defined as those persons who answered 'yes' to any one of the eight questions in the Section on Alcohol Use and Alcohol-Related Problems. (see Section 4.0, Table 6), and who had themselves been drinking at the time they experienced problems with a person who was drunk. Those persons experiencing harm were interviewed about the particular drinking occasion immediately preceding the harm using the identical questions reported in Section 5.0 -Characteristics of the Drinking Settings Associated with Low, Medium and High Risk Drinking. Thus the harm data which are presented in this section are compared to similar data relating to the most recent occasion of highest consumption for drinkers who had not experienced any harm (referred to below as the 'no harm sample').

Because it was necessary to enquire in detail about drinking occasions associated with harm, questions about the experience of harm were confined to the past three months. The serious and infrequent nature of the selected indicators of harm resulted in few people (n=96) from the sample of 1160 being identified as experiencing harm. Consequently, it was decided to combine the main sample (n=1021) with the second sample of 16-29 year olds (n=251), thus creating an effective sample size of 1272. Nine hundred and eighty five of this larger sample were drinkers, 108 (11.0% of drinkers) of whom were identified has reporting problems as a result of their own drinking or the drinking of others. However, only 59 of the 108 are included in the analyses of data reported below. Excluded from the analysis are 34 persons (10 male/24 female) who had not been drinking at the time they experienced problems with other persons who had been drinking. Also excluded from the analysis are 15 persons (11 male/4 female) who experienced harm as a result of their own drinking and who, for various reasons, were not interviewed about the particular drinking occasion which preceded the harm. However, demographic data relating to these 15 respondents was available, and so they are included in Tables 25 and 26 below.

No weightings have been applied to the data in this section since the analyses conducted explore relationships between variables and do not require the sample to be representative. Any differences in numbers are due to missing data.

6.1 Comparisons on Demographic Variables

Demographic data from the harm sample were compared with the no harm sample (Tables 25 & 26). In percentage terms, the harm sample contains more males; more 18-24 year olds; more single persons; more full time employed; fewer tertiary educated; more employed in trades and/or labouring positions; more with incomes between \$11000-\$30000; and more Australian born, than the no harm sample.

Where feasible, the data were collapsed as follows to facilitate significance tests between the harm and no harm samples:

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Sex (X^2=26.4, df=1, p<0.001);
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Age, collapsed into two groups - 16-29 years and 30 plus ($X^2=36.6$, df=1, p<0.001);

Marital status, collapsed into two groups - married/de facto and single (separted, divorced, widowed) ($X^2=38.6$, df=1, p<0.001);

Employment, collapsed into two groups - employed (full time) and unemployed (part time employed, home duties, student, looking for work, sickness benefit, retired)($X^2=10.5$, df=1, p<0.01);

Occupation, collapsed into three groups - white collar (professional, clerical, sales, service), blue collar (trades, labourers, transport, mining, agriculture) and other (armed services, pensioner, home duties, student, unemployed) (X²=22.7, df=2, p<0.001);

Income, collapsed into four groups - under \$10,000 p.a., \$11,000 - \$20,000 p.a., \$21,000 - \$30,000 p.a., and \$31,000 plus p.a. ($X^2=9.2$, df=3, p<0.05).

There were no significant differences for education or country of birth.

Table 25: Demographic Comparisons - Drinkers experiencing no harm with drinkers experiencing harm.

		No Harr	n(n=877)	Harr	n(n=74)*
		n	%	n	
Gender					
	Male	394	44.9	56	75.7
	Female	483	55.1	18	24.3
Age					
	16-17	47	5.4	4	5.4
	18-24	184	21.0	45	60.8
	25-29	132	15.1	8	10.8
	30-39	177	20.2	10	13.5
	40 +	336	38.4	7	9.4
Marital	status				
	Single	289	32.9	57	79.2
	Married/defacto	470	53.6	12	16.7
	Separated/divorced/				
	widowed	118	6.8	3	4.2
Birthpla	ace				
	Australia	565	64.9	54	73.0
	Overseas	306	35.1	20	27.0

^{*} Includes 15 persons who are excluded from the subsequent analysis (section 6.2 on) because no further information was obtained relating to the specific drinking occasion.

Table 26: Employment, occupation and income of drinkers experiencing no harm with drinkers experiencing harm

		No Harm	n(n=877)	Harn	m(n=74)	
		n	%	<u> </u>	<u>%</u>	
Employn	nent status					
	Employed full time	376	42.9	46	62.2	
	Employed part time	139	15.8	9	12.2	
	Unemployed	59	6.7	10	13.5	
	Home Duties	116	13.2	1	1.3	
	Student	90	10.3	7	9.4	
	Retired	97	11.1	1	1.3	
Educatio	n (highest level attained))				
	Primary	26	3.0	-	-	
	Secondary	502	57.4	50	67.6	
	Post-secondary	228	26.0	17	23.0	
	Tertiary	115	13.1	5	6.7	
	Other	4	0.5	2	2.7	
Cont./						

		<u>n</u>	%	n	<u>%</u>
Occupat	ion*				
	Manager / admin /				
	professional	184	22.1	13	18.6
	Clerical	84	10.1	3	4.3
	Sales / service	137	16.5	16	22.8
	Trades / labourers	109	13.1	23	32.8
	Student / home duties /				
	unemployed	230	27.6	14	20.0
	Retired	85	10.2	1	1.4
	Inadequately described	3	0.4	-	-
Income					
	\$0 - 10000	308	37.2	22	29.7
	\$11000 - 20000	135	16.3	20	27.0
	\$21000 - 30000	193	23.3	22	29.7
	\$31000 - 40000	112	13.5	6	8.1
	\$41000 and above	80	9.7	4	5.4

^{*} The total number with an occupation (n=70) differs from that shown at employment (n=64). It is assumed that this results from persons not employed at time of survey nominating their previous job, or type of job they would normally do.

6.2 Risk Levels of Alcohol Consumption

N.B. The harm data from this point on is confined to the 59 respondents from whom information was obtained relating to the drinking occasion which preceded the harm.

Figure 18 compares the percentage of respondents from both samples who drank at low, medium and high risk levels. Harm respondents were almost six times more likely to have drunk at high risk levels than no harm respondents, and much less likely to have drunk at low to medium risk levels. The overall difference in consumption was found to be highly significant ($X^2=63.8$, df=2,p<0.001).

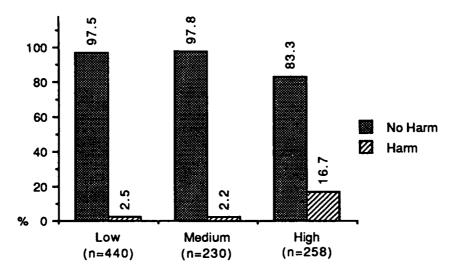


Figure 18: Consumption levels of persons experiencing "no harm" and those experiencing "harm"

6.3 Type of Drinking Location

Figure 19 summarises data on the type of location respondents were drinking at on the occasion in question. Those respondents experiencing harm were more likely to have been drinking at licensed locations, especially hotels and taverns, and no harm respondents were more likely to have been drinking at private locations.

Almost 50% of persons experiencing harm did so after drinking at hotels and taverns, and a further 20.3% did so after drinking at other licensed locations such as night clubs. Conversely, 30.5% experienced harm after drinking at their own or others home.

The difference between licensed and unlicensed locations in the case of the harm sample were found to be highly significant ($X^2=30.7$, df=2, p<0.001)

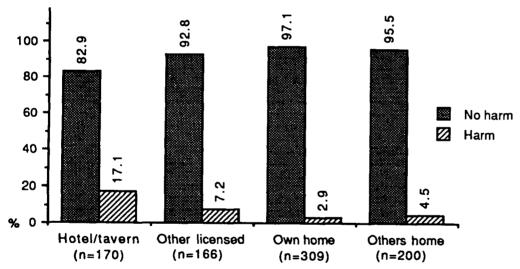


Figure 19: Drinking locations of persons experiencing "no harm" and those experiencing "harm"

6.4 Characteristics of Drinking Group

6.4.1 Size of drinking group

Figure 20 describes the size of the group in which respondents had been drinking. Harm respondents were more likely than no harm respondents to have been drinking in large groups (6+), and no harm respondents were more likely than harm respondents to have been drinking alone or in small groups (2-5). The overall difference in the size of the drinking group was found to be significant $(X^2=9.22, df=2, p=<0.01)$.

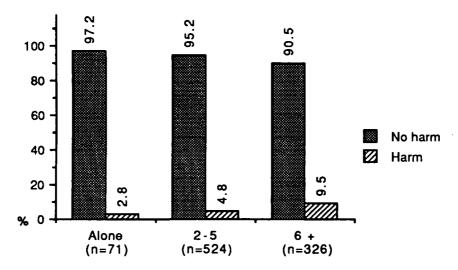


Figure 20: Size of drinking group of persons experiencing "no harm" and those experiencing "harm"

6.4.2 Composition of drinking group

Figure 21 presents data on the gender composition of the drinking group. Persons experiencing harm were more likely to report they had been drinking in mostly male groups, and persons not experiencing harm were more likely to report drinking in groups comprising roughly equal numbers of males and females, or in mostly female groups. These overall differences were found to be significant ($X^2=8.61$, df=2, p=<0.01).

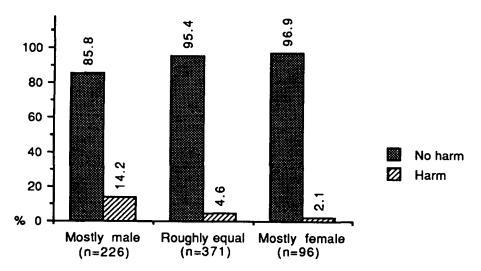


Figure 21: Composition of drinking group of persons experiencing 'no harm" and those experiencing "harm"

6.4.3 Gender ratio of drinking group

Figure 22 shows the estimated ratio of males to females at the drinking location of harm and no harm respondents. Note: these data refer only to licensed drinking locations.

Those experiencing harm were slightly more likely to report roughly equal numbers of males and females at the drinking location, compared to those who reported mostly males or mostly females.

Those experiencing no harm were proportionately more likely to report mostly females, and slightly more likely to report mostly males at the drinking location, compared to those who reported roughly equal numbers of males and females.

These overall differences were not significant.

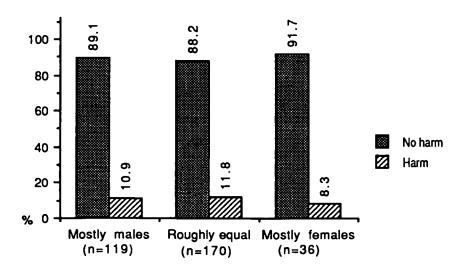


Figure 22: Gender ratio at drinking location of persons experiencing "no harm" and those experiencing "harm"

6.5 Other Characteristics of Drinking Group

Table 27 summarises the data on who respondents in both samples had been drinking with. Persons who experienced harm were more likely to report drinking with friends of both sexes (51.9%) and friends of the same sex (15.4%) compared to persons in the no harm sample (42.2% and 1.4% respectively). People in the no harm sample were more likely to report drinking with their immediate or close family (20.2%) compared to the harm sample (3.8%).

Table 27: Who persons experiencing harm and those experiencing no harm had been drinking with.

	Harm	n (n=52)*	No Har	m (n=639)*
Who Drinking With	<u>n</u>	%	<u>n</u>	%
Work mates	5	(9.6)	61	(9.5)
Business associates	0	(0)	22	(3.4)
Friends of both sexes	27	(51.9)	270	(42.2)
Friends of opposite sex	2	(3.8)	25	(3.9)
Acquaintances	6	(11.5)	49	(7.7)
Friends of same sex	8	(15.4)	73	(11.4)
Family/relatives	2	(3.8)	129	(20.2)
Strangers	2	(3.8)	10	(1.6)

^{*} Persons drinking alone or with one other are excluded.

6.6 Characteristics of Licensed Drinking Venues

N.B. The data in this section applies only to questions 20 - 29 in Section 4 of the questionnaire which were related to drinking at licensed locations. For these analyses the locations are not differentiated by type of licensed premises, but are based on aggregate data for all license types. Therefore the relationships between drinking location and the different variables do not necessarily reflect what might be the case were the analyses to have been on the basis of license type. Further analyses will be required to discover the relationship between license type and the different variables, and it is anticipated that such analyses will be reported separately.

6.6.1 Extent of crowding

The extent of crowding at the drinking location of harm and no harm respondents is reported in Figure 23. Persons from the harm sample were more likely to report the drinking location was either three quarters full or that it was full to overcrowded, while those in the no harm sample were more likely to report that the drinking location was only a quarter full. These overall differences were found to be significant ($X^2=8.19$, df=3, p<0.04).

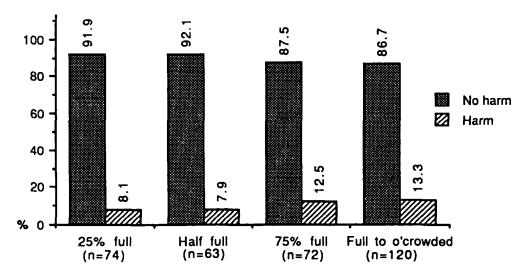


Figure 23: Extent of crowding at drinking location of persons experiencing "no harm" and those experiencing "harm"

6.6.2 Availability of discounted drinks

Figure 24 presents data on whether or not the price of alcoholic drinks was discounted at the drinking location. The majority of respondents in both samples said that drinks were not discounted. However, respondents in the harm sample were much more likely to report drinks were discounted than was the case for the no harm sample. These overall differences were found to be highly significant ($X^2=14.30$, df=2, p<0.001).

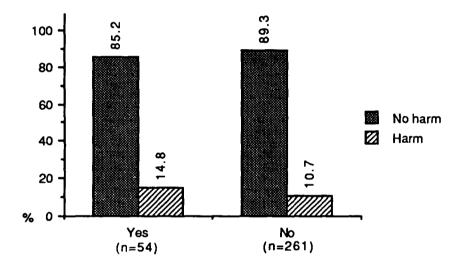


Figure 24: Were drinks discounted at drinking location of persons experiencing "no harm" and those experiencing "harm"

6.6.3 Intoxicated persons still buying alcohol

Figure 25 shows that harm respondents were significantly more likely to report that obviously drunk people (i.e., slurring speech, staggering, spiling drinks, unco-ordinated, etc.) were still buying drinks, compared to no harm respondents ($X^2=67.24$, df=2, p<0.001).

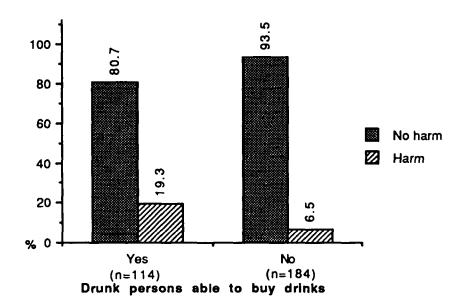


Figure 25: "No harm" and "harm" respondents who reported drunk persons able to buy drinks at licensed drinking location

Note: Respondents who answered 'don't know' have been omitted

6.6.4 How drinks were paid for

Figure 26 presents data on how drinks were paid for on the particular drinking occasion. More persons in the no harm sample reported that someone else paid for their drinks than any other form of payment, while persons in the harm sample were much more likely to report the cost was shared, especially buying in rounds('shouting'). These overall differences were found to be highly significant $(X^2=21.32, df=3, p<0.001)$.

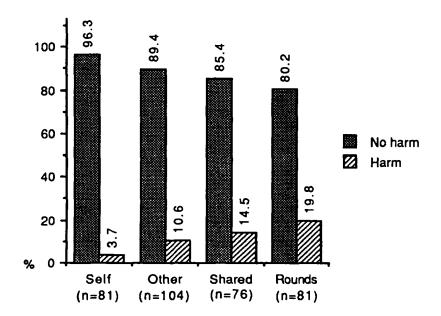


Figure 26: How persons experiencing "no harm" and those experiencing "harm" paid for drinks

6.6.5 Type of entertainment

Table 28 summarises the data on the type of entertainment at the licensed drinking location. Persons in the harm sample were more likely to report entertainment involving recorded music, especially that presented by a DJ, and persons in the no harm sample more likely to report live music, other than rock bands where there was little difference between the two samples. Respondents in the harm sample were much less likely to report no entertainment, than was the case for persons in the no harm sample.

Table 28: Type of entertainment at drinking location of persons experiencing harm and those experiencing no harm

	Harm (n=36)		No Harm (300)	
Type of Entertainment	<u>n</u>		n	%
Records/tapes	10	(27.8)	76	(25.3)
Rock band	5	(13.9)	41	(13.7)
Other live music	7	(19.4)	65	(21.7)
DJ	12	(33.3)	58	(19.3)
Strippers/Lingerie etc.	1	(2.3)	6	(2.0)
Skychannel	1	(2.3)	11	(3.7)
TV	1	(2.3)	27	(9.0)
None	4	(11.1)	65	(21.7)

6.7 Activities at Drinking Location

N.B. As with the previous section further analyses are required to discover the realtionships between type of drinking location and the various variables, and it is anticipated that such analyses will be reported separately.

The type of activities at the place of drinking are summarised in Table 29. Persons in the harm sample were much more likely to have been drinking at locations where there was music (64.4%), dancing (45.8%) and bar games such as pool and darts (30.5%), than was the case for persons in the no harm sample (39.8%, 18.9%, and 7.2% respectively). Those persons in the "harm' sample reporting these activities were also more likely to have been personally involved in them than was the case for the no harm sample. Fifty seven percent of respondents in the no harm sample reported eating as an activity at the drinking location, and 56.0% said they participated in this. In contrast, 22.0% on the harm sample reported this and only 20.3% reported participating.

Table 29: Type of activities at the drinking location of persons experiencing harm and those experiencing no harm.

	Harn	n (n=59)	No Harm (n=869)	
Type of Activities	<u>n</u>	%	<u> </u>	%
Dancing	27	(45.8)	164	(18.9)
Bar games	18	(30.5)	63	(7.2)
Outdoor sports	2	(3.4)	38	(4.4)
Gambling	5	(8.5)	18	(2.1)
Playing other games	1	(1.7)	42	(4.8)
Watching TV	9	(15.2)	186	(21.4)
Eating	13	(22.0)	495	(57.0)
Sexual	5	(8.5)	14	(1.6)
Listening to music	38	(64.4)	346	(39.8)
Reading	1	(1.7)	11	(1.3)
Talking	47	(79.7)	743	(85.5)

N.B Respondents could select as many activities per occasion as were appropriate.

6.8 Consumption of Food

N.B. This section is concerned with eating at all types of drinking locations, licensed and unlicensed, and which were not differentiated for the analysis. Further analyses will be required to discover the relationship between consumption, location and types of meal, and it is anticipated that such analyses will be reported separately.

Figure 26 describes the type of meal, if any, eaten by respondents on the drinking occasion. Respondents in the "harm' sample were more likely to report eating 'fast food' or that they ate nothing, and respondents in the no harm sample were more likely to report eating a sit down meal. The overall differences in the type of meal eaten were found to be highly significant ($X^2=37.91$, df=4, p<0.001).

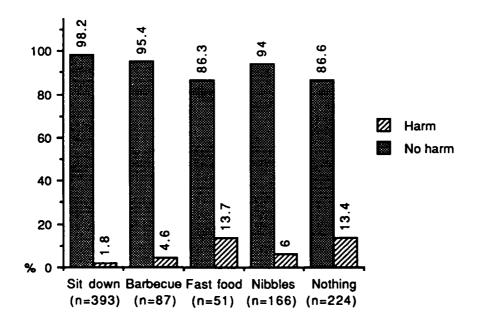


Figure 27: Type of meal eaten by persons experiencing "no harm" and those experiencing "harm"

6.9 Summary

Those drinkers (n=74) who had experienced some alcohol related harm following their own drinking in the past three months were mainly young (under 25), single, Australian born males, very likely employed, and earning up to \$30,000 p.a.

The context of drinking preceding the harm was likely to have been buying in rounds with a large group of mainly male friends in a hotel or tavern where obviously drunk patrons were able to continue buying alcohol, and where the main activities were listening to music, dancing and playing bar games such as pool or darts. There was about a one in three chance that drinks would have been discounted on this occasion.

These findings highlight the need for server training programs to emphasise the need to pay special attention to groups of drinkers who are drinking in rounds. This should be incorporated with training in strategies which address large groups of mostly male drinkers.

Licensing authorities and police need to ensure that overcrowding does not occur and police should be encouraged to pay more attention to venues where large groups of young males attend. The fact that a greater proportion of persons experiencing harm cited dancing and listening to music as activities at such venues should be taken into account by police and by policy makers when planning any prevention initiatives which aim to target certain types of drinking environments.

While the times during which drinks are discounted are limited, the findings reported here indicate a potential for an increased risk of harm occurring when drinks are discounted compared to when no discounts are offered. This would seem to suggest the need for legislation outlawing discount schemes as means for reducing the risk of alcohol related harm.

7.0 KNOWLEDGE OF LAWS RELATING TO THE SALE AND CONSUMPTION OF ALCOHOL

To compare differences in knowledge between different categories of respondent, drinkers, nondrinkers and those persons who were or who had been employed in the sale of alcohol (hereafter, persons with experience in pubs) in the past two years, were identified. This section presents the responses from these three groups, along with those of the total sample.

Percentage figures in this section have been weighted by the number of persons over 16 years per household, and by gender, in order that they be representative of the wider population. The actual numbers provided are unweighted. Where significant differences (at the the <0.05 level of significance) were found between responses given by drinkers, non-drinkers, and persons with experience in pubs, these are reported in the various tables.

7.1 Laws Relating to Serving Alcohol to Juveniles

Table 30 shows that a majority of respondents overall were aware of who commits an offence if someone under 18 years drinks alcohol on licensed premises. Of note are the responses from persons with experience in pubs. In only one question (concerning the manager) did these respondents achieve a higher percentage of correct answers (63.8%) than the total sample (62.5%). Conversely, 25.7% of persons with experience in pubs did not think that the manager commits an offence, compared to 23.6% of the total sample.

In the case of a member of staff serving an underage drinker, 66.1% of persons with experience in pubs recorded the correct answer, compared to 72.7% of the total sample.

Table 30: "When someone who is under 18 years of age drinks alcohol on licensed premises which of the following people commits an offence?"

	Total			Alcohol
	Sample	Drinkers	Non-drinkers	Trade
	(n=1160)	(n=871)	(n=289)	(n=101)
	%	%	%	%
The member of staff who served the underage drinker	d			
Yes	72.7	73.7	71.6	66.1
No	18.1	17.1	19.8	24.1
Unsure	9.2	9.2	8.6	9.8
The underage drinker themselves				· ·
Yes	90.3	91.1	88.7	88.0
No	5.7	4.6	7.8	8.3
Unsure	4.0	4.2	3.5	3.7
Any adult who buys the alcohol for the underage drinker				
Yes	84.2	84.2	85.2	80.9
No	9.0	8.2	9.5	15.0
Unsure	6.8	7.6	5.3	4.1
The manager				
Yes	62.5	62.6	61.9	63.8
No	23.6	23.0	25.1	25.7
Unsure	13.9	14.4	13.0	10.5

7.2 Laws Relating to Serving Intoxicated Customers

Table 31 shows that, with the exception of the item the drunk customer themselves, an overall majority of respondents were aware of who commits an offence when an obviously drunk person then drinks alcohol on licensed premises. There were, however, significant differences (at the p<0.05 level of significance) between responses given by drinkers, non-drinkers, and persons with experience in pubs.

It was found that, with the exception of the item the drunk customer themselves, non-drinkers recorded a higher percentage of correct answers than was the case for drinkers and persons with experience in pubs. Of particular note is the fact that, with the exception of the item the drunk customer themselves, respondents with experience in pubs recorded a lower percentage of correct answers than both drinkers and non-drinkers.

Only 24.0% of all respondents knew that *no offence* is committed by a drunken person themselves when alcohol is consumed on licensed premises, compared to 61.4% who thought an offence was committed. Interestingly, 60.9% of persons with experience in pubs thought that the drunken customer commits an offence compared to only 45.3% who knew that the manager commits an offence.

Table 31: "When someone who is obviously drunk then drinks alcohol on licensed premises, who of the following people commits an offence?"

	Total			Alcohol
	Sample	Drinkers	Non-drinkers	Trade
	(n=1160)	(n=871)	(n=289)	(n=101)
	%	%	%	%
he member of staff who s he drunk customer.	erved			
Yes	63.4	61.7	69.2	58.8
No	22.6	23.1	17.5	32.6
Unsure	14.0	15.2	13.3	8.6
			$(X^2=15.2, df=4,$	p=0.004)
The drunk customer hemselves.				
Yes	61.4	58.2	68.7	60.9
No	24.0	26.1	18.2	27.9
Unsure	14.7	15.6	13.2	11.2
			$(X^2=13.1, df=4,$	p=0.01)
Any person who buys alco on behalf of a drunk custor				
Yes	62.6	59.0	72.6	58.3
No	23.1	25.4	15.0	32.4
Unsure	14.3	15.6	12.4	9.3
			(X ² =26.8, df=4,	p=0.000)
The manager				
Yes	50.7	49.9	54.9	45.3
No	29.6	30.3	23.9	40.2
Unsure	19.7	19.8	21.2	14.5
			$(X^2=12.0, df=4,$	

7.3 General Knowledge of Licensing Laws

7.3.1 Licensee's responsibilities

It was found that more than 90.0% of respondents knew that a licensee could be charged for selling alcohol to minors and for trading outside of permitted hours, and that a majority (>50.0%) knew that a licensee could be charged for permitting disorderly conduct and for selling alcohol to a person buying it for a minor (Table 32).

Less than half of the respondents knew that a licensee could be charged for allowing a drunken person on the premises or for selling alcohol to to such a person. Similarly, less than half of the respondents knew that it is an offence for a licensee to permit customers to become drunk on licensed premises. Non-drinkers recorded a higher percentage of correct answers for these three items than was the case for drinkers and respondents with experience in pubs, however, the only significant difference between respondents answers was for the third of these items Serving a person to the point of intoxication (X²=12.7, df=4, p<0.01).

Of note is the fact that respondents with experience in pubs recorded a lower percentage of correct answers than non drinkers in relation to selling alcohol to drunk persons; permitting disorderly conduct; allowing a drunk person on the premises; serving someone to the point of intoxication; and for selling alcohol to someone buying it for a minor. Only one third of respondents with experience in pubs knew that it is an offence for a licensee to allow a drunk on the premises or to serve someone to the point of intoxication.

Table 32: "In Western Australia can the licensee of a pub, club or restaurant be charged for permitting any of the following to occur on the premises?"

	Total Sample (n=1160) %	Drinkers (n=871) %	Non-drinkers (n=289) %	Alcohol Trade (n=101)	
Selling alcohol to persons					
under 18 years of age.					
Yes	91.1	92.7	84.9	96.3	
No	3.4	2.0	8.3	1.6	
Unsure	5.4	5.3	6.7	2.1	
		$(X^2=35.1, df=4, p<0.001)$			
Selling alcohol to persons			(,,	F	
who are drunk.					
Yes	46.7	45.3	50.4	49.3	
No	22.3	22.7	19.9	27.6	
Unsure	31.0	32.0	29.8	22.1	
0	21.0	J 2. 0	(not significant)		
Trading outside of			(not arguint	uiit <i>j</i>	
permitted hours.					
Yes	93.0	94.8	86.5	96.1	
N o	2.4	1.1	6.4	2.3	
Unsure	4.6	4.1	7.1	2.3	
Olisure	4.0	4.1	$(X^2=37.6, df=4,$		
Parmittina disardarly			$(X^2=37.0, u1=4,$	p<0.001)	
Permitting disorderly					
conduct.	62 N	(5.2	(2.2	<i>57</i> 0	
Yes	63.9	65.3	62.3	57.8	
No	11.1	10.5	12.4	15.0	
Unsure			27.2		
411 .			(not significant)		
Allowing someone who appea	rs				
drunk to enter the premises.		•••			
Yes	33.0	30.9	38.3	34.2	
N o	28.3	29.0	24.7	33.6	
Unsure	38.7	40.1	37.0	32.2	
			(not significant)		
Selling alcohol to a person buy	ving				
it for someone under 18.					
Yes	59.4	59 .1	61.4	54.8	
No	21.3	21.2	20.6	27.5	
Unsure	19.3	19.7	18.0	17.7	
			(not significant)		
Serving a person to the point			. •	•	
of intoxication.					
Yes	34.1	31.9	40.7	33.1	
No	31.0	31.6	27.2	39.0	
Unsure	35.0	36.4	32.1	27.9	
			$(X^2=12.7, df=4,$		

7.3.2 Public drunkenness and public drinking

Table 33 shows that despite the fact that public drunkenness has been decriminalized in Western Australia since April 1990, over 60% of respondents still believed this to be an offence. No significant difference was found between categories of respondents to this question. On the other hand, while an overall majority (70.0%) of respondents knew that it is an offence to consume alcohol in a public place, significantly fewer non-drinkers knew this to be so than was the case for drinkers and persons with experience in pubs.

Table 33: "In Western Australia is it an offence to..?"

	Total Sample (n=1160)	Drinkers (n=871) %	Non-drinkers (n=289) %	Alcohol Trade (n=101)
Be drunk in a public place				
Yes	63.4	65.1	60.6	61.9
No	17.0	15.8	18.8	21.0
Unsure	19.6	19.1	20.6	17.1
		(not significant)		
Drink alcohol in a public place				
Yes	70.6	73.2	62.7	78.0
No	15.0	14.2	18.3	9.8
Unsure	14.4	12.6	19.0	12.2
		$(X^2=17.2, df=4, p<0.01)$		

7.4 Knowledge of Where or With Whom to Lodge Complaints Against Licensed Premises

Question 9 in Section 2 of the questionnaire sought information on whether or not respondents had experienced any problems from nearby licensed premises (See Section 4.5, Table 9), and which was followed by a further two questions on where to lodge a complaint, or where to go to find out about lodging a complaint against licensed premises.

Because of the similarities in responses to these two questions they have been collapsed to form a single figure (Fig. 27). It was found that only 1.4% correctly nominated the Liquor Licensing Authority as the appropriate place to lodge a complaint or to find out about lodging a complaint. The majority (45.2%) nominated the police to be the appropriate authority, and 30.0% did not know where to lodge a complaint or where to go to find out about lodging a complaint.

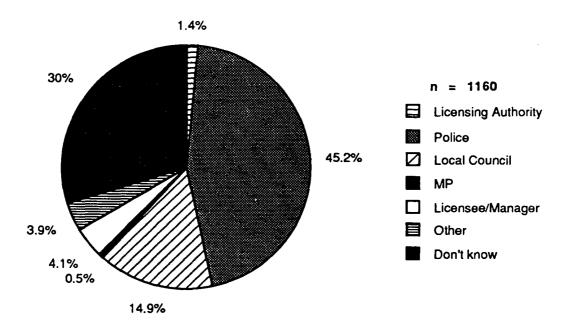


Figure 28: Where or with whom should a complaint be lodged about licensed premises

7.5 Support for Maximum Fines for Offences Under the Western Australia Liquor Licensing Act 1988

Attitudes towards server and licensee liability were explored in relation to the degree of support for the existing maximum fines under the W.A. Licensing Act for serving underage persons and obviously drunk persons. The reported responses are for three groups - the total sample, persons with experience in pubs, and those persons identified from the data as drinking at hotels and taverns (pub drinkers) on the occasion of highest consumption.

7.5.1 Fines relating to underage drinking on licensed premises

Overall, it was found that there was little difference in the responses given by respondents in the three groups on the question of fines for underage drinking (Table 34). The majority of respondents believing that the maximum fines are either 'about right' or 'too high'. In the latter instance this response was particularly so in the case of the maximum fine for barstaff with 47.7% of the total sample, 68.4% of persons with experience in pubs, and 62.9% of drinkers believing a fine of \$2000 too high.

Table 34: "Do you think the following maximum fines are too low, about right, or too high when an underage person drinks alcohol on licensed premises?"

		Total	Alcohol	Pub
	Response	Sample	Trade	Drinkers
		(n=1160)	(n=101)	(n=158)
Maximum Fine		%	%	%
\$2000 for the barstaff				
	Too low	8.9	1.7	6.6
	About right	43.4	30.0	30.5
	Too high	47.7	68.4	62.9
\$2000 for the underage drinker				
	Too low	24.0	23.3	21.7
	About right	47.1	41.7	39.0
	Too high	28.9	35.0	39.3
\$2000 for any person who buys alcohol for the underage drinker				
	Too low	33.1	27.6	22.9
	About right	44.2	43.8	40.2
	Too high	22.7	28.6	36.9
\$5000 for the manager				
	Too low	16.8	10.5	11.6
	About right	45.0	43.2	39.1
	Too high	38.1	46.3	49.3
\$5000 for the licensee				
	Too low	20.6	14.5	16.0
	About right	43.5	43.3	37.0
	Too high	35.9	42.2	47.0

7.5.2 Fines relating to serving intoxicated persons on licensed premises

What is of note in Table 35 is that a substantial majority of respondents believe that an obviously drunk persons who drinks alcohol on a licensed premises ought to be subject to a fine. Other findings of note are that in most other cases respondents believed the fines to be 'too high'. This is particularly so in the case of drinkers and persons with experience in pubs where, with the exception of the 'nil' fine for intoxicated customers, a majority of these respondents believed all the fines 'too high'.

Table 35: "Do you think the following maximum fines are too low, about right, or too high when a customer who is obviously drunk then drinks alcohol on licensed premises?"

	Response	Total Sample	Alcohol Trade	Pub Drinkers
Manimum Eina		(n=1160)	(n=101)	(n=158)
Maximum Fine		%	%	%
\$2000 for the barstaff	Too to-	12.6	2.2	<i>C A</i>
	Too low	12.6	2.2	6.4
	About right	43.5	32.4	27.7
	Too high	43.9	65.4	65.9
Nil for the intoxicated customer				
	Too low	67.2	61.3	49.5
	About right	29.6	33.9	43.4
	Too high	3.2	4,8	7.1
\$1000 for any person who buys alcohol for the intoxicated customer				
	Too low	31.2	17.5	15.0
	About right	37.2	35.1	28.8
	Too high	31.6	47.4	56.2
\$5000 for the manager			,	
	Too low	15.5	7.7	8.5
	About right	42.9	34.2	35.1
	Too high	41.5	58.1	56.4
\$5000 for the licensee				
	Too low	15.5	7.7	8.5
	About right	40.8	34.2	33.6
	Too high	41.3	56.2	56.4

7.6 Summary

Overall, a majority of respondents knew that certain individuals (i.e., barstaff, managers, licensees) commit an offence when juveniles and intoxicated persons are served alcohol. There were, however, some notable differences in levels of knowledge between different categories of respondents, especially on the question of serving intoxicated persons.

A higher percentage of non-drinkers knew that certain persons commit an offence when intoxicated persons are served alcohol on licensed premises than was the case for drinkers and persons with experience in pubs. However, the most notable finding was that persons with experience in pubs had slightly less knowledge of licensing laws relating to serving intoxicated persons than was the case for drinkers, non-drinkers, or the total sample.

Despite the fact that public drunkenness has not been an offence in W.A. since April 1990, almost two thirds of respondents still believed this to be an offence, and almost one third did not know, or were unsure, that it is an offence to drink alcohol in a public place.

Very few respondents knew where to go to lodge complaints about licensed premises which, in the light of the finding that some 24.0% of people surveyed had experienced problems from nearby licensed premises when in their own homes, should be a matter of some concern to licensing authorities.

These findings clearly point to a need for educating the public about certain aspects of licensing law, and about the correct procedures to follow for lodging complaints against licensed premises. The need for education is especially pronounced in the case of persons employed in the sale of alcohol on licensed premises. Public education might be achieved through media campaigns and, in the case of persons working in the hospitality industry, through mandatory server training programs.

8.0 ATTITUDES TO SERVER RESPONSIBILITY AND LIABILITY, AND DRINKING TO INTOXICATION

As with the previous section - Knowledge of Laws Relating to the Sale and Consumption of Alcohol - the results reported in this section on server responsibility and liability allow for comparisons between drinkers, non-drinkers and persons with experience in pubs, as well as for the total sample. Results on attitudes to drinking to intoxication are presented for the total sample only.

Percentage figures in this section have been weighted by the number of persons over 16 years per household, and by gender, in order that they be representative of the wider population. The actual numbers provided are unweighted.

8.1 Attitudes to Server Responsibility and Liability

Respondents were asked to answer a series of eight questions (Q's 13-20 in Section 2 of Questionnaire) after having first read a short story, or vignette, which was presented to them in two parts. The two parts of the vignette were as follows:

"John decides to have a drink with a couple of friends on his way home from work. When he arrives at the pub his friends Anne and Steve are buying beer in jugs. John doesn't want to drink much so decides to buy his own drinks. The barstaff clear away the empties promptly and always ask if they want more drinks. Before John realises it he has lost track of the number of beers he has had in the last hour, but still decides to drive home. On the way home he is pulled over for a random breath test and is found to be over 0.08."

There followed two questions:

"Do you think that the barstaff of the pub are <u>partly</u> responsible for John exceeding the legal limit?"

"Do you think that the licensee of the pub is <u>partly</u> responsible for John exceeding the legal limit?"

The story then continued:

"Back at the pub, Anne and Steve are still drinking and it is now clear that they are obviously drunk. The barstaff continue to serve them alcoholic drinks for the next

hour. Anne decides to leave and risks driving the short distance home. On the way home she reacts too slowly to avoid hitting a pedestrian on a crossing. Her blood alcohol level was found to be 0.12. The resulting court case awards 1 million dollars in compensation to the victim who is now permanently crippled".

This was followed by a further six questions:

"Do you think that continuing to serve someone who is obviously drunk may increase the risk of them having an accident?"

"Do you think that the licensee of the pub should be made to pay some compensation to the injured victim?"

"What percentage of the \$1 million in damages should the licensee be made to pay?"*

"Do you think that the barstaff of the pub should be made to pay some compensation to the injured victim?"

"What percentage of the \$1 million in damages should the barstaff be made to pay?"*

"Do you think that Steve was partly responsible for Anne getting drunk?"

The most notable findings were the very low level of support for the notion of responsibility and, especially, liability, particularly from persons with experience in pubs. All categories of respondents were more likely to say that a fellow drinker was partly to blame for someone getting drunk, than were prepared to accept that the servers of alcohol are partly responsible (Table 36).

Non-drinkers were found to be more supportive of the various notions and persons with experience in pubs the least supportive. Nonetheless, there was overwhelming acceptance that continuing to serve an intoxicated person increases the risk of an accident.

Where significant differences were found are shown in Table 36.

^{*} Because they were concerned with percentages as opposed to 'yes' / 'no' answers, questions relating to the amount of damages which should be paid have been ommitted from the results summarised in Table 35.

Table 36 Showing responses to questions on responsibility and liability given by drinkers, non-drinkers and persons experienced in sale of alcohol

	Total Sample (n=1160) %	Drinkers (n=871) %	Non-drinkers (n=289) %	Alcohol Trade (n=101)
Barstaff partly responsible				
Yes No Unsure	27.5 68.0 4.5	21.3 74.2 4.5	43.5 51.8 4.6 (X ² =62.6, df=4,	26.5 68.9 4.6 p<0.001)
Licensee partly responsible				
Yes No Unsure	21.4 72.1 6.5	16.4 78.2 5.4	36.5 55.0 8.5 (X ² =71.0, df=4,	16.3 75.5 8.2 p<0.001)
Continuing to serve a person who is intoxicated increases the risk of an accident				
Yes	92.4	92.2	95.3	84.2
N o Unsure	4.9 2.8	5.7 2.1	2.1 2.6 (X ² =27.0, df=4,	6.9 8.9 p<0.001)
Licensee should pay some compensation				
Yes No	34.4 46.5	31.0 50.5	46.0 33.0	25.7 56.9
Unsure	19.2	18.5	20.9 (X ² =38,7, df=4,	17.4
Barstaff should pay some compensation				
Yes No	16.8 65.1	14.2 69.2	25.7 51.3	10.8 74.6
Unsure	18.0	16.6	23.0 (X ² =42.4, df=4,	14.6
Co-drinker was partly responsible for other drinker getting drunk				
Yes	49.4	47.9	56.6	44.0
N o Unsure	38.7 11.9	39.2 12.9	35.6 7.8 (X ² =12.7, df=4,	39.8 16.2 p<0.01)

8.2 Attitudes to Drinking and 'Intoxication' in Different Situations

Information was sought on the extent to which people think it is alright to drink alcohol in certain places if they stay under the legal limit for driving (BAL >0.08) or if they are over this limit.

Table 37 shows there was little support for drinking alcohol outside of clearly identifiable areas such as licensed premises and/or private residences irrespective of what a persons blood alcohol level may or may not be. Similarly, people showed little support for drinking in public places.

In the case of drinking and remaining under 0.08, only licensed premises (90.7%), a persons own home (95.4%) and the home of a friend (91.0%) received majority support. It was found that a persons own home (82.0%) or that of a friend (61.2%) are the only two locations where a majority of respondents believed it to be alright to drink alcohol if over 0.08.

A substantial difference was found between those who thought it was alright to drink on licensed premises if under 0.08 (90.7%) compared to those who thought it was alright if over 0.08 (39.8%). Similarly, 91.0% of respondents thought it was alright to drink in a friends home if under 0.08 compared to 61.2% who thought it was alright to do so if over 0.08.

Very few people feel it is alright to drink alcohol, irrespective of BAL, when operating machinery, on boats, or in motor cars.

Table 37 "Do you think it is alright for a person to drink alcohol in the following places if they stay <u>under</u> the legal limit of 0.08, or if they are <u>over</u> the legal limit?"

	Und	er Legal (n = 1160)		Ove	er Legal I (n = 1160)	
Alright to drink alcohol	Yes	No	Unsure	Yes	No	Unsure
in following places	%%	%	%	%	%	%
On licensed premises (e.g. pubs, restaurants)	90.7	7.2	2.1	39.8	52.6	7.6
In their own home	95.4	3.3	1.3	82.0	11.5	6.5
In a friends home	91.0	6.7	2.3	61.2	28.7	10.1
In the street	11.5	85.1	3.3	2.6	95.3	2.1
At a sporting event	28.5	65.6	5.9	10.7	84.3	5.0
In public parks/reserves	22.0	72.7	5.3	6.4	89.7	3.9
At the beach or riverside	28.4	64.1	7.5	10.1	84.2	5.7
In motor vehicles if intending to drive	9.8	87.9	2.3	1.1	98.0	0.9
If operating power or sail boats	8.5	88.2	3.2	0.9	97.7	1.4
While operating machinery	3.1	95.3	1.6	0.5	98.9	0.6
During their working hours (including their lunch time)	12.8	81.6	5.6	2.6	94.1	3.3

8.3 Summary

The results reported above on server responsibility and server liability suggest that these are relatively difficult concepts for people to understand. On the one hand an overwhelming majority of people agreed that continuing to serve an intoxicated person increases the risk of an accident. However, on the other hand, few people would allow that the person doing the serving could be either responsible for someone becoming increasingly intoxicated, or financially liable for injuries caused by an intoxicated person. Clearly there is a need for the public to be educated about the extent to which the servers of alcohol can minimise the risk of intoxication and so reduce the incidence of alcohol related harm, as well as the fact that it is illegal to sell alcohol to intoxicated persons.

These findings also reinforce the repeated calls made in this report for licensees and managers of licensed premises, along with barstaff, to be trained in responsible serving practices. The findings also point to the need for police to be more thorough in prosecuting licensees and their employees who serve intoxicated persons. Moves such as this would bring to the attention of the public the fact that persons serving alcohol have both a legal and moral obligation to prevent intoxication on licensed premises, as well as a duty of care to prevent intoxicated persons harming themselves or others on licensed premises.

The fact that the vast majority of people thought that the only place it is alright to drink alcohol is in licensed premises or in private residences, suggest that stricter controls on consumption elsewhere, especially in workplaces, ought to be given serious consideration by policy makers.

9.0 SUPPORT FOR PREVENTION STRATEGIES AND POLICIES

The level of support given by drinkers, non-drinkers and persons with experience in pubs for a range of 25 initiatives in the area of Training Strategies; Serving Strategies; Legislative Policies; Availability Policies; Police Strategies; and Transport Strategies are presented in Tables 38 to Table 43. Where appropriate, significant differences (at the p<0.05 level of significance) between the answers of the main categories of respondents are reported. In each case responses from the total sample are included for comparison.

9.1 Support for Training of Bar Personnel

Table 38 shows that a high level of support (>90.0%) was found for training strategies aimed at licensees, managers, barstaff and security staff ("bouncers"). The only notable difference between the main categories of respondents was on the question of training barstaff where persons with experience in pubs were significantly less likely to support this proposition ($X^2=18.1$, df=4, p=0.00).

Table 38: "To what extent do you support the following training strategies?"

	Total			Alcoho
	Sample	Drinkers	Non-drinkers	Trade
	(n=1160)	(n=871)	(n=289)	(n=101)
	%	%	%	<u></u>
Training all licensees about licensing laws and responsible management practices as a condition of holding a liquor licence				
Support	95.2	95.7	94.6	92.9
Oppose	1.1	0.8	1.9	1.6
Undecided	3.7	3.5	3.4 (not signific	5.4 ant)
Training all barstaff to serve alcohol responsibly				
Support	92.0	92.8	93.3	82.7
Oppose	2.6	2.7	1.2	5.4
	5.4	4.5	5.5	11.8
Undecided			$(X^2=18.1, df=4,$	p<0.01)
Undecided Bouncers to be trained in ways to cut down violence			(X ² =18.1, df=4,	p<0.01)
Bouncers to be trained in	90.1	90.7	(X ² =18.1, df=4,	89.1
Bouncers to be trained in ways to cut down violence	90.1 3.9	90.7 3.3		

9.2 Support for Responsible Serving Strategies

Table 39 shows more than 90.0% support was found for licensees to provide free breath tests on request, and a similarly high level of overall support (>70.0%<90.0%) was found for responsible serving practices such as: barstaff slowing down or stopping service; barstaff offering alternatives such as low or non-alcoholic drinks; barstaff not to serve drunk customers; and the provision of free or cheap non-alcoholic drinks for drivers of drinking groups. Non-drinkers were found to be more likely to support these strategies, and persons with experience in pubs least likely to show support.

Except for providing free breath tests and free non-alcoholic drinks to drivers of drinking groups, significant differences were found in responses given by the main categories of respondents.

Table 39: "To what extent do you support the following responsible serving strategies?"

	Total Sample (n=1160)	Drinkers (n=871)	Non-drinkers (n=289) %	Alcohol Trade (n=101)
Barstaff to suggest alternatives to customers, such as non-alcoholic drinks and food				
Support	81.0	79.9	86.4	75.5
Oppose	9.2	9.9	4.9	14.9
Undecided	9.8	10.2	8.7	9.5
Barstaff not to prompt people to have another drink			$(X^2=13.8, df=4,$	p<0.01)
Support	78.9	79.1	85.5	58.5
Oppose	11.7	11.6	6.4	26.4
Undecided	9.4	9.2	8.1	15.0
Barstaff to make sure customers do not continue drinking when obviously drunk			(X ² =43.3, df=4,	p<0.001)
Support	83.9	83.3	89.0	74.1
Oppose	7.2	7.2	3.5	17.3
Undecided	8.9	9.5	7.4	8.6
Licensees to provide a free breath test if requested			(X ² =26.7, df=4,	p<0.001)
Support	91.4	91.7	92.0	88.1
Oppose	3.4	3.8	2.5	2.4
Undecided	5.2	4.5	5.6	9.5
Provide very cheap or free non- alcoholic drinks to drivers of a drinking group			(not signific	aiit)
Support	80.1	80.9	76.8	82.6
Oppose	8.2	7.5	10.1	8.0
Undecided	11.7	11.5	13.1 (not signific	9.4 ant)

9.3 Support for Legislative Policies

Legislative policies which enjoyed overall majority support were raising the drinking age to 21 (55.5%); reducing the legal blood alcohol level to 0.05 (58.5%); and identity cards for persons under 21 years (77.0%), with most support coming from non-drinkers and least support from persons with experience in pubs (Table 40).

Little overall support was found for banning the sale of beer in jugs and for giving local government more powers in the area of liquor licensing. The differences between the main categories of respondents answers were found to be highly significant.

Table 40: "To what extent do you support the following legislative policies?"

	•			_
	Total Sample (n=1160) %	Drinkers (n=871) %	Non-drinkers (n=289) %	Alcoho Trade (n=101)
Banning the sale of beer in				
Support	22.2	17.3	40.3	10.2
Oppose	55.9	62.7	28.7	77.9
Undecided	21.9	20.0	31.0	11.9
Raising the drinking age to	21		$(X^2=149.2, df=4,$	p<0.001)
Support	55.5	51.5	72.2	40.5
Oppose	31.6	34.5	19.0	42.7
Undecided	12.9	13.9	8.8 (X ² =54.5, df=4,	15.7 p<0.001)
Identity cards as proof of a for persons aged 18-21	ge		· · · · · · · · · · · · · · · · · · ·	•
Support	77.0	75.9	85.7	62.0
Oppose	15.6	17.0	7.4	27.3
Undecided	11.7	7.1	6.9	10.6
Reducing the legal blood at level from 0.08 to 0.05	lcohol		(X ² =35.0, df=4,	p<0.001)
Support	58.5	53.7	77.5	43.8
Oppose	27.7	32.2	12.8	34.6
Undecided	13.7	14.2	9.6	21.5
Giving local government the power to control licensed premises instead of a centrol office			(X ² =73.3, df=4,	p<0.001)
Support	33.9	29.5	49.9	24.0
Oppose	33.1	36.5	20.7	40.8
Undecided	33.0	34.0	29.4 (X ² =56.5, df=4,	35.1

9.4 Support for Reducing Availability of Alcohol

There was little overall support for policies which would reduce the availability of alcohol (Table 41). Only the creation of new type of licence where only low alcoholic beverages can be sold came near to achieving greater than 50.0% support overall (47.9%). Most support for the policy initiatives came from non-drinkers, while least support was recorded by persons with experience in pubs. The differences between the main categories of respondents answers were found to be highly significant.

Table 41: "To what extent do you support the following policies to reduce the availability of alcohol?"

	Total Sample (n=1160) %	Drinkers (n=871) %	Non-drinkers (n=289) %	Alcohol Trade (n=101)
Reduced trading hours for all pubs and clubs				
Support	29.9	24.5	50.2	15.8
Oppose	51.8	57.7	30.1	66.2
Undecided	18.3	17.8	19.7 (X ² =104.4, df=4,	18.0 p<0.001)
Providing entertainment such as rock bands only in areas where no alcohol is allowed			(33 33 37 37	,
Support	41.9	37.5	59.4	27.9
Oppose	40.6	44.5	23.7	57.4
Undecided	17.5	18.0	16.9 (X ² =70.0, df=4,	14.7 n<0.001)
Limiting the size of pubs and clubs			(11 70.0, 01 1,	p (0.001)
Support	31.2	28.4	44.7	16.2
Oppose	41.4	42.8	28.4	66.5
Undecided	27.4	28.8	26.9 (X ² =68.1, df=4,	17.3 p<0.001)
The creation of a new type of licence where only low alcohol drinks can be sold (e.g, 3.8% max)			(22 00.1, 01 1)	F 10.001)
Support	47.9	43.4	66.1	32.7
Oppose	29.7	32.4	15.3	47.1
Undecided	22.4	24.1	18.5 (X ² =74.0, df=4,	20.2 p<0.001)

9.5 Support for Police Strategies

Strong support overall was found for the police to enforce existing legislation against underage drinking (92.2%) and serving intoxicated persons (78.2%) (Table 42). Strong support was also recorded for allowing police to breath test pub customers before they enter their cars (74.3%) and for more police presence in and around licensed premises (77.9%). Once again strongest report came from non-drinkers, and least support from persons with experience in pubs.

The differences between the main categories of respondents answers were found to be significant.

Table 42: "To what extent do you support the following police strategies?"

	Total Sample (n=1160)	Drinkers (n=871)	Non-drinkers (n=289) %	Alcohol Trade (n=101)
Allow police to breath test customers of licensed premises before they enter their cars	70	. 76		70
Support	74.3	72.2	84.1	64.1
Oppose	14.7	16.1	7.4	23.8
Undecided Strict enforcement of the law	11.0	11.7	8.5 (X ² =29.0, df=4,	12.1 p<0.001)
against serving customers who are drunk				
Support	78.2	77.1	87.2	61.2
Oppose	10.6	10.7	5.1	25.3
Undecided	11.2	12.2	7.6 (X ² =46.8, df=4,	13.4 p<0.001)
More visible police presence in and around pubs and clubs			•	•
Support	77.9	76.0	88.2	64.5
Oppose	14.2	15.6	6.3	25.6
Undecided	7.9	8.4	5.5 (X ² =38.1, df=4,	9.9 p<0.001)
Strict enforcement of the law against serving customers who are underage				
Support	92.2	92.2	93.4	88.8
Oppose	4.1	3.3	4.5	9.0
Undecided	3.7	4.4	2.1	2.1
			(X ² =13.3, df=4	, p<0.01)

9.6 Support for Transport Initiatives

A very high (>90.0%) level of support was found for making more public transport available at night and on weekends, and moderate levels of support (>50.0%<60.0%) were found for providing transport for intoxicated customers and for free public transport at night. Little support, however, was found for limiting the availability of parking at licensed premises or in nearby streets (Table 43).

Of note is the fact that the strongest support for two of these items (Making more public transport available and for public transport to be free at night) came from persons with experience in pubs.

The differences between the main categories of respondents answers were found to be highly significant.

Table 43: "To what extent do you support the following transport initiatives?"

	Total Sample (n=1160)	Drinkers (n=871)	Non-drinkers (n=289)	Alcoho Trade (n=101)
	%	%	%	%
Licensees to provide transport or a place to sober up for persons who become drunk on licensed premises				
Support	60.4	56.5	73.8	54.5
Oppose	22.1	24.6	12.4	28.7
Undecided	17.5	18.9	13.8	16.8
Maka wana muhila mawan ant			$(X^2=35.8, df=4,$	p<0.001)
Make more public transport available at night and on weekends				
Support	90.0	91.4	84.2	95.1
Oppose	3.2	2.5	5.8	1.8
Undecided	6.7	6.1	9.9	3.1
Free public transport			$(X^2=18.9, df=4,$	p<0.01)
after 8.00 p.m.				
Support	51.2	48.2	55.8	62.5
Oppose	28.9	30.6	27.8	18.5
Undecided	19.9	21.2	16.4	19.0
			$(X^2=14.6, df=4,$	p<0.01)
Limiting carparking at pubs and clubs, and in nearby streets				
Support	34.1	31.0	46.4	24.3
Oppose	41.8	46.0	25.0	55.2
Undecided	24.1	23.0	28.6	20.5
			$(X^2=55.9, df=4,$	p<0.001)

9.7 Support for Health and Safety Measures in Licensed Premises

The extent of support for a number of measures aimed at creating a healthier and safer environment in licensed premises was sought by means of two questions. The first question sought to find out the level of support for the various measures, the second sought to find out if people would visit licensed premises more often if the various measures were introduced. The results presented below compare the responses of persons with experience in pubs, with those given by persons identified as drinking in hotels and taverns (pub drinkers) on the occasion of heaviest consumption.

9.7.1 Level of passive support

Table 44 shows that a substantial majority of all respondents support pubs and clubs offering the range of services listed. A similarly high level of support came from persons with experience in pubs and from pub drinkers.

The most overall support achieved (96.1%) was for pubs and clubs to a wide range of reasonably priced low and non-alcoholic drinks, and the least overall support (60.7%) was for pubs and clubs to offer transport to and from the premises. However, it is worth noting that 71.5% of persons with experience in pubs favoured the latter item.

Table 44: "In general, do you believe it would be a good idea for pubs and clubs to offer....?"

Pubs and clubs (n=1160) (n=101) (n=158)		Total	Alcohol	Pub
to offer % % % Non smoking areas Yes 88.7 83.2 79.2 No 6.4 10.2 12.3 Unsure 4.9 6.6 8.5 A range of healthy food (e.g., low fat, salads etc) Yes 84.4 87.0 79.6 No 6.7 8.2 10.4 10.0 Unsure 8.9 4.8 10.0 A wide range of reasonably priced low and non-alcoholic drinks Yes 96.1 97.5 96.9 No 1.8 2.5 2.3 10.0 0.7 Free or cheap soft drinks for drivers of drinking groups Yes 82.3 79.4 85.1 No 11.3 13.2 10.3 Unsure 6.4 7.4 4.7 Transport to and from the pub or club Yes 60.7 71.5 66.7 No 23.0 15.8 20.5		Sample	Trade	Drinkers
Yes 88.7 83.2 79.2 No 6.4 10.2 12.3 Unsure 4.9 6.6 8.5 A range of healthy food (e.g., low fat, salads etc) Yes 84.4 87.0 79.6 No 6.7 8.2 10.4 Unsure 8.9 4.8 10.0 A wide range of reasonably priced low and non-alcoholic drinks Yes 96.1 97.5 96.9 No 1.8 2.5 2.3 Unsure 2.1 0.0 0.7 Free or cheap soft drinks for drivers of drinking groups Yes 82.3 79.4 85.1 No 11.3 13.2 10.3 Unsure 6.4 7.4 4.7 Transport to and from the pub or club Yes 60.7 71.5 66.7 No 23.0 15.8 20.5	Pubs and clubs	(n=1160)	(n=101)	(n=158)
Yes 88.7 83.2 79.2 No 6.4 10.2 12.3 Unsure 4.9 6.6 8.5 A range of healthy food (e.g., low fat, salads etc) Yes 84.4 87.0 79.6 No 6.7 8.2 10.4 Unsure 8.9 4.8 10.0 4.8 10.0 No 1.8 2.5 2.3 Unsure 2.1 0.0 0.7 Free or cheap soft drinks for drivers of drinking groups Yes 82.3 79.4 85.1 No 11.3 13.2 10.3 Unsure 6.4 7.4 4.7 Transport to and from the pub or club Yes 60.7 71.5 66.7 No 23.0 15.8 20.5	to offer	%	<u> </u>	%
No	Non smoking areas			
Unsure 4.9 6.6 8.5 A range of healthy food (e.g., low fat, salads etc) Yes 84.4 87.0 79.6 No 6.7 8.2 10.4 Unsure 8.9 4.8 10.0 A wide range of reasonably priced low and non-alcoholic drinks Yes 96.1 97.5 96.9 No 1.8 2.5 2.3 Unsure 2.1 0.0 0.7 Free or cheap soft drinks for drivers of drinking groups Yes 82.3 79.4 85.1 No 11.3 13.2 10.3 Unsure 6.4 7.4 4.7 Transport to and from the pub or club Yes 60.7 71.5 66.7 No 23.0 15.8 20.5	Yes	88.7	83.2	79.2
A range of healthy food (e.g., low fat, salads etc) Yes 84.4 87.0 79.6 No 6.7 8.2 10.4 Unsure 8.9 4.8 10.0 A wide range of reasonably priced low and non-alcoholic drinks Yes 96.1 97.5 96.9 No 1.8 2.5 2.3 Unsure 2.1 0.0 0.7 Free or cheap soft drinks for drivers of drinking groups Yes 82.3 79.4 85.1 No 11.3 13.2 10.3 Unsure 6.4 7.4 4.7 Transport to and from the pub or club Yes 60.7 71.5 66.7 No 23.0 15.8 20.5	No	6.4	10.2	12.3
Yes	Unsure	4.9	6.6	8.5
No 6.7 8.2 10.4 Unsure 8.9 4.8 10.0 A wide range of reasonably priced low and non-alcoholic drinks Yes 96.1 97.5 96.9 No 1.8 2.5 2.3 Unsure 2.1 0.0 0.7 Free or cheap soft drinks for drivers of drinking groups Yes 82.3 79.4 85.1 No 11.3 13.2 10.3 Unsure 6.4 7.4 4.7 Transport to and from the pub or club Yes 60.7 71.5 66.7 No 23.0 15.8 20.5				
Unsure 8.9 4.8 10.0 A wide range of reasonably priced low and non-alcoholic drinks Yes 96.1 97.5 96.9 No 1.8 2.5 2.3 Unsure 2.1 0.0 0.7 Free or cheap soft drinks for drivers of drinking groups Yes 82.3 79.4 85.1 No 11.3 13.2 10.3 Unsure 6.4 7.4 4.7 Transport to and from the pub or club Yes 60.7 71.5 66.7 No 23.0 15.8 20.5	Yes	84.4	87.0	79.6
A wide range of reasonably priced low and non-alcoholic drinks Yes 96.1 97.5 96.9 No 1.8 2.5 2.3 Unsure 2.1 0.0 0.7 Free or cheap soft drinks for drivers of drinking groups Yes 82.3 79.4 85.1 No 11.3 13.2 10.3 Unsure 6.4 7.4 4.7 Transport to and from the pub or club Yes 60.7 71.5 66.7 No 23.0 15.8 20.5	No	6.7	8.2	10.4
reasonably priced low and non-alcoholic drinks Yes 96.1 97.5 96.9 No 1.8 2.5 2.3 Unsure 2.1 0.0 0.7 Free or cheap soft drinks for drivers of drinking groups Yes 82.3 79.4 85.1 No 11.3 13.2 10.3 Unsure 6.4 7.4 4.7 Transport to and from the pub or club Yes 60.7 71.5 66.7 No 23.0 15.8 20.5	Unsure	8.9	4.8	10.0
No 1.8 2.5 2.3 Unsure 2.1 0.0 0.7 Free or cheap soft drinks for drivers of drinking groups Yes 82.3 79.4 85.1 No 11.3 13.2 10.3 Unsure 6.4 7.4 4.7 Transport to and from the pub or club Yes 60.7 71.5 66.7 No 23.0 15.8 20.5	reasonably priced low and			
Unsure 2.1 0.0 0.7 Free or cheap soft drinks for drivers of drinking groups Yes 82.3 79.4 85.1 No 11.3 13.2 10.3 Unsure 6.4 7.4 4.7 Transport to and from the pub or club Yes 60.7 71.5 66.7 No 23.0 15.8 20.5	Yes	96.1	97.5	96.9
Free or cheap soft drinks for drivers of drinking groups Yes 82.3 79.4 85.1 No 11.3 13.2 10.3 Unsure 6.4 7.4 4.7 Transport to and from the pub or club Yes 60.7 71.5 66.7 No 23.0 15.8 20.5	No	1.8	2.5	2.3
for drivers of drinking groups Yes 82.3 79.4 85.1 No 11.3 13.2 10.3 Unsure 6.4 7.4 4.7 Transport to and from the pub or club Yes 60.7 71.5 66.7 No 23.0 15.8 20.5	Unsure	2.1	0.0	0.7
No 11.3 13.2 10.3 Unsure 6.4 7.4 4.7 Transport to and from the pub or club Yes 60.7 71.5 66.7 No 23.0 15.8 20.5	for drivers of drinking			
Unsure 6.4 7.4 4.7 Transport to and from the pub or club Yes 60.7 71.5 66.7 No 23.0 15.8 20.5	Yes	82.3	79.4	85.1
Transport to and from the pub or club Yes 60.7 71.5 66.7 No 23.0 15.8 20.5	No	11.3	13.2	10.3
the pub or club Yes 60.7 71.5 66.7 No 23.0 15.8 20.5	Unsure	6.4	7.4	4.7
No 23.0 15.8 20.5	Transport to and from the pub or club			
	Yes	60.7	71.5	66.7
Unsure 16.2 11.7 12.6	No	23.0	15.8	20.5
	Unsure	16.2	11.7	12.6

9.7.2 Level of active support

Fewer people indicated they would visit pubs or clubs more often if the various health and safety measures were offered than said they supported the measures (Table 45). A small majority (52.9%) said that they would visit pubs and clubs more often if they offered free or cheap soft drinks for drivers of drinking groups. While only 36.0% of respondents said they would visit pubs and clubs more often if they had no smoking areas, this might imply the possibility of a marked increase in patrons should a substantial number of these persons who rarely frequent licensed premises at present choose to do so were such a measure adopted.

Table 45: "Would you visit pubs or clubs more frequently if they had...?"

	Total	Alcohol	Pub
	Sample	Trade	Drinkers
Pubs and clubs	(n=1160)	(n=101)	(n=158)
to have:	%	%	<u>%</u>
No smoking areas			
Yes	36.0	40.1	36.8
No	51.4	49.2	46.6
Unsure	12.6	10.8	16.6
Healthy food (e.g., low fat, salads etc.)			
Yes	40.8	41.7	35.3
No	50.9	39.5	55.9
Unsure	8.3	18.8	8.8
A wide range of reasonably priced low and non-alcoholic drinks			
Yes	49.0	67.7	57.8
No	42.3	25.2	32.6
Unsure	8.7	7.1	9.7
Free or cheap soft drinks for drivers of drinking groups			
Yes	52.9	61.9	62.4
No	40.0	29.5	32.4
Unsure	7.1	8.6	5.2
Transport to and from the pub or club			
Yes	43.0	62.0	59.1
No	44.8	28.4	30.7
Unsure	11.7	9.6	10.2

9.8 Support for Standard Drink Labelling

Respondents were asked to nominate which of three labels (alcohol by volume, standard drinks, or grams of alcohol) they preferred for alcohol containers. To assist them they were shown a series of three diagrams each depicting the three types of labels for beer, wine and spirits containers (Appendix 4).

9.8.1 Beer containers

Women were more likely to prefer standard drink labels (65.8%) on beer containers than the present system of labelling showing percentage of alcohol by volume (30.4%). Men were proportionately more likely to prefer the existing method of labelling showing percentage of alcohol by volume (49.3%) than standard drink labels (46.5%) (Fig. 29).

There was virtually no support from both men and women for labels showing the amount of alcohol in grams.

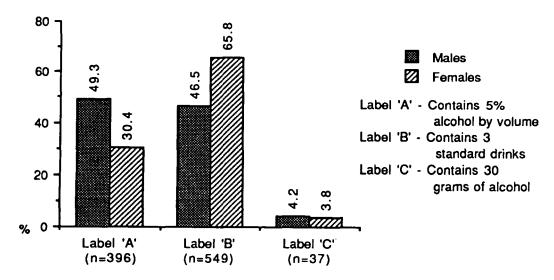


Figure 29: Preferred label for beer containers

9.8.2 Wine containers

Women were much more likely to prefer standard drink labels (63.7%) on wine containers than the present system of labelling showing percentage of alcohol by volume (31.5%), and men were slightly more likely to prefer standard drink labelling (49.4%) to the existing method of labelling (47.8%) (Fig. 30).

There was virtually no support from both men and women for labels showing the amount of alcohol in grams.

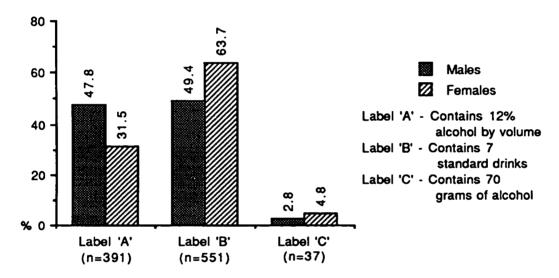


Figure 30: Preferred label for wine containers

9.8.3 Spirit containers

Women were much more likely to prefer standard drink labels (62.1%) on spirits containers than the present system of labelling showing percentage of alcohol by volume (34.3%). Men were proportionately more likely to prefer the present system of labelling (50.8%) than labels showing the number of standard drinks (Fig. 30)

There was virtually no support from both men and women for labels showing the amount of alcohol in grams.

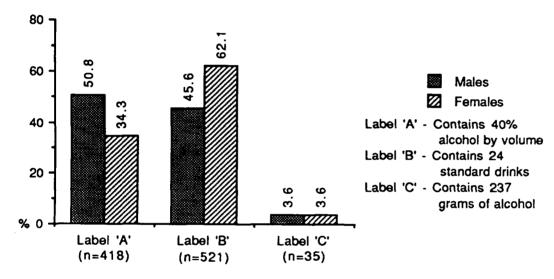


Figure 31: Preferred label for spirits containers

9.9 Summary

The strong support for training in, and the application of, responsible serving practices might be used to convince the hospitality industry and liquor licensing authorities to adopt training programs for persons employed in the hospitality industry. Furthermore, such training should be complemented by a more vigorous enforcement by police of the existing licensing laws, something which also has strong community support.

That a majority of people support raising the drinking age to 21 should be noted by policy makers, particularly in light of research in America where raising the drinking age resulted in a decrease of alcohol related problems among young males in particular.

The little public support for measures to reduce the availability of alcohol by reducing hours etc., points to the need for educating people about the very real benefits to society as a whole were alcohol to be less freely available. Such education might well result in increased support for such measures which will greatly enhance the prospect of such policies being officially sanctioned.

Majority support for various health and safety measures on licensed premises, combined with a large minority of people indicating they would visit licensed premises more often were such measures to be adopted, might imply the possibility of a marked increase in patrons. This information might be useful when attempting to convince the hospitality industry that adopting responsible serving practices will not necessarily result in declining profits.

The fact that a majority of women and close to a majority of men indicated a preference for labels showing the number of standard drinks in alcohol containers would suggest that present moves by government and industry to adopt such labelling will have widespread support. However, the underlying reason for this - that of providing information to assist people monitor their alcohol consumption - will need to be supported by an on-going media campaign to maximise the effectiveness of such a move.

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APPENDIX 1

COPY OF LETTER USED TO SOLICIT INTERVIEW AFTER THREE UNSUCCESSFUL CALLS



GPO (s. + to 10%) Pertropici Western Australia

OFFICE 14 Stone Street South Porth 61c3 Fax (60 3c7 814)

Telephonie Right Seas Albert

NATIONAL CAMPAIGN AGAINST DRUG ABUSE SURVEY OF PEOPLES PATTERNS AND PLACES OF DRINKING

Dear Householder,

We are sorry you were not in when we called. Your home is one of 1250 in Perth which has been randomly selected to take part in this survey of peoples opinions on various questions about the use of alcohol.

The aim of the study is to understand peoples attitudes to a range of issues relating to alcohol, which will assist us in developing strategies to prevent problems resulting from its use.

Your opinions are very important to us and we would appreciate it if you will agree to take part. We wish to interview the person whose birthday is closest to todays date, and who is aged sixteen or over. The interview will take approximately 35-40 minutes.

If you wish to take part in this survey please contact either Christine Gamble or Ernie Lang on 474 1990 or 368 2055 and arrange a time convenient to you for one of our interviewers to call.

If you have any questions about this please don't hesitate to contact us. We look forward to your participation in this important survey.

Kind regards,

e.a. ganble.

Christine Gamble Research Assistant Ernie Lang Research Associate

APPENDIX 2

SURVEY QUESTIONNAIRE

DRINKING SETTINGS, ALCOHOL RELATED HARM, AND SUPPORT FOR PREVENTION POLICIES

SECTION 1

TO BE ADMINISTERED BY INTERVIEWER

THE RESPONSES TO THE FOLLOWING QUESTIONS ARE TO BE KEPT STRICTLY CONFIDENTIAL.

	Record No.	01	(1-2)
	Interviewer		(3)
	Questionnaire No		(4-7)
	CI		(8-13)
1. Location	Number & Street		
	Suburb		(14-19)
1(a). How many persons between is asked will depend	persons aged 16 or over 16 and 29 live in the hor d on quota type	r <u>OR</u> , how many use? (How this question	on
	16 or over		(20)
	Between 16 - 29		(21)
2. Is respondent	.? (Please place a tick in the	ne appropriate box)	
Male		□ 1	(22)
Female		□ ₂	
3. Could you pl you are?	ease tell me how old	years.	(23-24)
4. What is your	marital status? (Show CA	ARD A)	
Married			(25)
Living with	a partner		
Single			
Separated		□ 4	
Divorced		□ ₅	
Widowed		П	

5.	What is the highest level of education (Show CARD B)	you ha	ve comp	leted?	
	Primary School		1		(26)
	Secondary to year 10		2		
	Secondary to year 11		3		
	Secondary to year 12		4		
	Apprenticeship/trade certificate		5		
	Certificate (non trade) / diploma		6		
	Bachelor degree		7		
	Post graduate degree		8		
	Other (please specify)		9		
6.	Which of the following best describes (Show CARD C)	your wo	ork situa	ation?	
	Work Full time		1		(27)
	Work part time		27		
	Home duties Student Looking for Work Sickness Benefits Retired	0000	3 4 5 6 7	□ (Go to () 8)
7.	What job do you do? (Specify)	••••••		 7	
		(Code	:) []	(28-29)
8.	How long have you lived here?	•••••	•••••		(30-31)
	If less than 1 year, how long have you	u lived i	n Perth	?mths	(32-33)
				yrs	(34-35)

I WOULD LIKE TO ASK YOU A NUMBER OF QUESTIONS ABOUT YOUR MOST RECENT DRINKING.

- 1. Have you had any drinks containing alcohol in the past three months?
 - YES Fill in Drinking Diary using questions below

 TERMINATE INTERVIEW and thank respondent (Ensure respondent has filled in Section 2)
- 2. When did you last drink alcohol before today? (N.B. BEFORE today, NOT on the day of the interview).
- 3. Where were you drinking?

 Record if at a licensed premises, private residence, or public place.

 N.B. Probe at this point to ascertain if more than one drinking location on this day. Record each location. There may be some repondents who will give the actual name of the licensed premises which means you need not ask the following question.
- 4. Which licensed premises was this? (Ask for each location if more than one). If name refused ask respondent to specify type of premises e.g. hotel, tavern, restaurant, night club etc.
- 5. Which suburb is that in? (Suburbs if more than one location)
- 6. What type of alcohol were you drinking? (i.e beer/ wine/spirits)
 Record this for each location if more than one. You will need to probe if, for example, they were drinking cocktails in order to find out the type of cocktail.and what it contained.

The next question requires you to understand what I mean when I ask about standard drinks. (show standard drinks chart, briefly explain it and leave where it can be seen). You might want to refer to this to help you answer the next question.

- 7. How many standard drinks do you think you had?

 (For those drinking cocktails get them to estimate the number of serves of spirits they contained.)
- 8. When was the time before this that you last drank alcohol?

REPEAT THE SEQUENCE UNTIL YOU HAVE RECORDED 4 OR MORE DRINKING DAYS IN ANY ONE WEEK (up to 7 consecutive days), OR UNTIL DETAILS OF LAST FOUR DRINKING DAYS WITHIN PAST 3 MONTHS HAVE BEEN RECORDED.

IF LESS THAN FOUR DAYS IN PAST 3 MONTHS RECORD ONLY THOSE WHICH OCCURRED WITHIN THIS TIME. GO TO Q9. (NEXT PAGE) WHEN THE SEQUENCE IS COMPLETED.

9.	Which of the following labels would best help you keep track of how much you drink? (Show label diagram to all respondents, even if they don't drink that particular beverage and tick appropriate box)		
	BEER	□ 1 □ 2 □ 3	(36)
	WINE	1 2 3	(37)
	SPIRITS	1 2 3	(38)
10.	On the most rece can you remembe	nt occasion you have just talked about, r:	
		(ASK ONE AT A TIME)	
		lar brand of alcohol you were drinking l name of that brand?	
		only brand of that type of alcohol on that occasion?	
	C. The exact or parts of	number of (bottles/cans/glasses) you drank these (e.g., 1/2 bottle of wine)?	
	IF <u>NO</u> ANSWERED	TO ANY OF QUESTION 10, ASK:-	
11.		recent occasion you have just talked about, (Repeat sequence up to seven times if necessary).	
	IF THEY CANNOT	REMEMBER GO TO Q 17.	
	IF <u>YES</u> ANSWERE	D TO ALL OF QUESTION 10. RECORD THE FOLLOW	NG
	Which occasion?	(from diary).Day/date etc)	
	(N.B. record the Resee Coding Instruction	c. No. applicable to the drinking occasion - ons for diary section)	(39-40)
	Number of standard	drinks for that beverage type? (from diary)	(41-42)

12.	2. Which brand was it? (record the full brand name)				
				% Alcohol Content	
		•••••			(43-46)
13.	What type of control (N.B. Cans and both)	container were cottles to take pres			
	Can	□ 1	© (go to (Q13a)	(47)
	Bottle	□ 2	© (go to (Q13a)	(48)
	Glass	□ 3	-	Q14 if beer/wine/liqueur rits go to Q16a)	(49)
13a	Do you know	what size this	was (or estimat	te)?	
				(mls) (go to Q15)	(50-52)
14.	photographs? (S	Show photos and	record which type	the glasses in these e indicated. If more than for each beverage type)	
Beer.	01	□ 02	□ 03	□ 04 □ 05	
	□ 06	07	□ 08	□ 09 □ 10	
	11	□ 12	□ 13	(None of these) 14	(53-54)
Wine.	. 🗆 01	□ 02	□ 03	□ 04 □ 05	
	□ 06	1 07	□ 08	□ 09 □ 10	
	11	□ 12	(None of these)	□ 13	(55-56)
Lique	eur. 🗆 1	□ 2	(None of these)	□ 3	(57)
15.	How many (odid you have?	cans/bottles/gla	sses) of	•••••	
	ara goa mares				(58-59)

10.	cans/bottles/glasses) that you drank? (N. hotel assume "full").		ı
	All of it (Full)	□ 1	(60)
	3/4	□ 2	(61)
	Half	□ 3	(62)
	1/4	4	(63)
		OF (go	to Q17)
16a	Which of these "nips" were you drinking	ig? (Show photo).	
	1/2	1	(64)
	Full	□ 2	(65)
	Double	□ 3	(66)
16b	How many glasses did you have?		(67-68)

SETTING DETAILS FOR DAY OF HIGHEST CONSUMPTION OF LAST 4 DRINKING DAYS WITHIN LAST MONTH.

If there are 2 or more days with the same level of consumption, the most recent day should be used.

N.B. If NO alcohol consumption in the PAST MONTH: check page 1. of Section.3 when it has been completed by the respondent.

If NO answered to all questions: TERMINATE INTERVIEW and thank respondent. If YES answered to any question use Section 4 to ask consumption questions about that time. (If more than one Yes answer, ask about the most recent event.)

I NOW WISH TO ASK YOU A NUMBER OF QUESTIONS ABOUT WHERE YOU WERE DRINKING ON THIS OCCASION (Indicate to respondent the occasion in question as you noted it in Diary section)

N.B. If the respondent drank at their own home on this occasion start from Q 21

If drinking at licensed premises or at home of friend/relative ask ALL questions.

		Record No.	02		(1-2)
		Interviewer			(3)
		Questionnaire No.			(4-7)
17.	How did you get to(Don't prompt just record appropriate				
	Drove car / motor bike	:		1	(8)
	Other driver			2	(9)
	Taxi			3	(10)
	Public Transport			4	(11)
	Walked			5	(12)
	Other (Specify)			6	(13)
18.	What time of day did you arriv	/e at? (Use 2	4 hr clock)		
					(14-17)
19.	What time of day did you leave	:?			(17-17)
					(18-21)
					(10-21)

20.	How did you get home from the ? (last place of drinking) (Don't prompt just record appropriate category)				
	Drove car / motor bike		1	(22)	
	Other driver		2	(23)	
	Taxi		3	(24)	
	Public Transport		4	(25)	
	Walked		5	(26)	
	Other (Specify)		6	(27)	
21.	What were the most important reasons for your drinking that occasion? (Show CARD D)	g on			
	To celebrate a special occasion.		1	(28)	
	To help me meet people.		2	(29)	
	To help me relax.		3	(30)	
	To join in with other people.		4	(31)	
	It was expected of me		5	(32)	
	To enjoy the taste of a drink, or enjoy drinking with food.		6	(33)	
	To make it easier to do something I probably shouldn't do.		7	(34)	
	To pass time.		8	(35)	
	Can't say.		9	(36)	
	Any other reason (specify)		0	(37)	
	(N.B. If possible, please try and code "other" into the appropriate c	ategory	y)		
22.	What was the most important reason? (record number from above list)			(38)	
	The next most important reason?			(39)	

23.	How satisfying for you was that occasion?			10
	(Show CARD E)	П	1	(40)
	Very satisfying	П	2	(40)
	Moderately satisfying		3	
	Slightly satisfying		4	
	Slightly unsatisfying		•	
	Moderately unsatisfying	_	5	
	Very unsatsifying		6	
24.	When you decided to go to that particular drinking pla which of the following were important to you? (Show C)	
	Convenience of being at home		01	(41-42)
	Closeness to home.		02	(43-44)
	People I know will be there.		03	(45-46)
	I could drink alcohol there.		04	(47-48)
	The activities there (e.g. darts,pool)		05	(49-50)
	The atmosphere.		06	(51-52)
	Because I work there		07	(53-54)
	The music.		08	(55-56)
	Other entertainment there		09	(57-58)
	A special event being held there.		10	(59-60)
	Getting drunk if I wanted to.		11	(61-62)
	The cost or type of food.		12	(63-64)
	The cost of alcoholic drinks.		13	(65-66)
	The friendliness of people who serve food or drink		14	(67-68)
	Can't say.		15	(69-70)
	Another important feature of that place.		16	(71-72)
	(Specify) (N.B. If possible, please try to code "other" to the appropriate care	tegory)		
25.	What was the most important thing? (record number from above list)			(73-74)
	The next most important thing?		\neg	(75-76)

		Record No.	03	(1-2)
		Interviewer		(3)
		Questionnaire No.		(4-7)
26.	How many people were you w	vere drinking with ?	•	
	Alone 1 other 2 - 3 others 3 - 4 others 4 - 5 others 6 - 10 others 11 - 15	□ 1 □ 2 □ 3 □ 4 □ 5 □ 6 □ 7 □ 8	(Go to Q31) (Go to Q27) (Go to Q29)	(8)
27.	Was this person? male female	□ 1 □ 2		(9)
28.	Was she/he your?			
	Spouse Partner Friend Workmate Business Associate Stranger	□ 1 □ 2 □ 3 □ 4 □ 5	_ (Go to Q31)	(10)
29.	What was the composition of in terms of men and women?		drinking with	
	All males Mostly males Roughly equal Mostly female All females	□ 1 □ 2 □ 3 □ 4 □ 5		(11)

30.	Which of the following best describes these people?	(SHC	W CARD	H)
	Work mates		1	(12)
	Business associates		2	
	Friends of both sexes		3	
	Friends of opposite sex		4	
	Acquaintances		5	
	Friends of same sex		6	
	Family and/or relatives		7	
	Strangers		8	
31.	What types of activities were there? (SHOW CARD	I)		
	Dancing		01	(13-14)
	Bar games (eg pool / darts)		02	(15-16
	Outdoor sports		03	(17-18
	Gambling		04	(19-20
	Playing other games		05	(21-22
	Watching TV		06	(23-24
	Eating		07	(25-26
	Sexual		08	(27-28
	Listening to music		09	(29-30
	Reading		10	(31-32
	Talking		11	(33-34
31(a)	Were you involved in any of these activities?			
	Yes		1	(35)
	No		2 (Go to Q	³²⁾ (36)

31(b)	Which ones? (SHOW CARD Tagain).			
	Dancing		01	(37-38)
	Bar games (e.g., pool / darts)		02	(39-40)
	Outdoor sports		03	(41-42)
	Gambling		04	(43-44)
	Playing other games		05	(45-46)
	Watching TV		06	(47-48)
	Eating		07	(49-50)
	Sexual		08	(51-52)
	Listening to music		09	(53-54)
	Reading		10	(55-56)
	Talking		11	(57-58)
32.	If you ate while drinking what best describes to (SHOW CARD J) (If more than one category only code lowest number).			
	A sit down meal		1	(59)
	Barbecue / picnic		2	
	Hot fast food (Pies etc)		3	
	Nibbles		4	
	Nothing		5	
	(GO TO O38 IF RESPONDENT HAD BEEN D THEIR OWN HOME.	RINKIN	<u>G AT</u>	
33.	Was there any kind of entertainment provided? (SHOW CARD K).	If so, spe	cify	
	Records / tapes		1	(60)
	Rock band		2	(61)
	Other live music		3	(62)
	DJ		4	(63)
	Strippers/Lingerie/"Skimpies"		5	(64)
	Skychannel		6	(65)
	TV		7	(66)
	None		8	(67)

34.	How crowded was the (name of pub etc) on this occasion?			
	About a quarter full or less		1	(68)
	Half full		2	
	Three quarters full		3	
	Full		4	
	Over crowded		5	
	Dont know		6	
35.	Were there the same number of males as fen	nales there?		
	Mostly males		1	(69)
	75 % males		2	()
	50 / 50		3	
	25 % male		4	
	Mostly females		5	
	Dont know		6	
36.	Were drinks discounted at any time while yo	ou were the	re?	
	Yes		1	(70)
	No		2	, ,
	Don't know		3	
37.	Were people who were obviously drunk (e. staggering, spilling drinks, unco-ordinated			lrinks?
	Yes		1	(71)
	No		2	, ,
	Don't know		3	
38.	Who was paying for the drinks on this occa	sion?		
	Someone else		1	(72)
	Self		2	
	Buying in rounds (i.e shouting)		3	
	Cost was shared		4	

		Record No.	04		(1-2)
		Interviewer			(3)
		Questionnaire No.			(4-7)
39.	Did you use any prescribed	or other drugs on the	at occa	sion?	
	No			1	(8)
	Yes			2	
40.	Which one?(SHOW CARD (tick appropriate boxes)	L). Any others?			
	Tranquilisers (e.g	y Valium)		01	(9-10)
	Analgesics (Pain	killers)		02	(11-12)
	Antihistamines			03	(13-14)
	Inhalents such as	glue, aerosols or petrol		04	(15-16)
	Marijuana, pot or	hash		05	(17-18)
	Speed or uppers	(amphetamines)		06	(19-20)
	Ecstacy			07	(21-22)
	LSD or acid			08	(23-24)
	Cocaine or crack			09	(25-26)
	Heroin or smack			10	(27-28)
	Other (specify)		11	(29-30)
INTE	ERVIEWER INSTRUCTION	S.			
	Check page 1. of Section 3.who	en it is completed by the r	esponde	ent.	
	If NO answered to all questions respondent.	: TERMINATE INTER	RVIEW	and thank	
	If YES answered to any questio previously covered in first diary diary section				
•	Section 4 and the supplementary this purpose. (If more than one recent event.)				
	If the occasion on which "le covered in first diary section the relevant coding sheet in	on enter the Record N		1	
					(31-32)

DRINKING SETTINGS, ALCOHOL RELATED HARM, AND SUPPORT FOR PREVENTION POLICIES

SECTION 2

Attitudes and Knowledge (To be completed by all respondents)

THE RESPONSES TO THE FOLLOWING QUESTIONS WILL BE KEPT STRICTLY CONFIDENTIAL.

YOUR ANSWERS WILL NOT BE ANALYSED INDIVIDUALLY, BUT WILL BE COMBINED WITH ANSWERS FROM 1,250 OTHER AUSTRALIANS.

	(Computer Use)	1.
Record No.	05	(1-2)
Interviewer		(3)
Questionaire No.		(4-7)

The following questions are about the extent to which you think alcohol is involved in different problems; what you know about laws relating to alcohol; and what you think about a number of ideas for reducing problems related to the use of alcohol.

It is important that you answer all the questions, so please read the questions and the instructions carefully.

Remember, your answers will be kept strictly confidential and used only with those of 1250 other Australians who are taking part in this survey.

1. Please estimate what percentage of the following you think were committed by people after drinking alcohol?

Please write your answer in the space provided, or place a tick in the appropriate box if you don't know.

	%	Don't Know			
For example, drink driving would be	100	11110W			
Motor vehicle traffic accidents	•••••		1	(8-10)	(11)
Assaults in public	•••••		2	(12-14)	(15)
Assaults on licensed premises	•••••		3	(16-18)	(19)
Domestic violence	•••••		4	(20-22)	(23)
Vandalism (property damage)	•••••		5	(24-26)	(27)

2. Do you think it is alright for a person to drink alcohol in the following places if they stay <u>UNDER</u> the legal limit of 0.08? Please answer by placing a tick in the appropriate box.

	YES	NO	NOT SURE	
On licenced premises (eg pubs, restaurants)	□ 1	□ ²	□ 3	(28)
In their own home	□ 1	□ ²	□ 3	(29)
In a friend's home	□ ¹	□ ²	□ 3	(30)
In the street	□ 1	□ ²	□ 3	(31)
At sporting events	□ ¹	□ ²	□ 3	(32)
In public parks/reserves	□ 1	□ ²	□ 3	(33)
At the beach or riverside	□ 1	□ ²	□ 3	(34)
In motor vehicles if intending to drive	□ 1	□ ²	□ 3	(35)
If operating power or sailboats		□ ²	□ 3	(36)
While operating machinery	□ 1	□ ²	□ 3	(37)
During their working hours (including their lunch time)	□ 1	□ ²	□ 3	(38)

3.	In the past TWO YEARS, have you held a job that involved the sale of alcohol for consumption on licensed premises?						
	Yes	1 Go to Q4)			Q4)	(39)	
	No		213	(Go to (Q 5)		
4.	Which best describes the job you	were inv	olved i	n?			
	Licensee			1		(40)	
	Bar Manager			2			
	Barman/Barmaid			3			
	Bouncer/security staff			4			
	Waiter/Waitress			5			
	Other (Specify)			6			
5.	When someone who is under 18 on licensed premises, which, if a commits an offence? Please answe the appropriate box.	iny, of th	e follov	ving pe	eople		
			YES	NO	DON'T KNOW		
	The member of staff who served the underage drinker?		□ ¹	□ ²	□ 3	(41)	
	The underage drinker themselves?		□ ¹	□ ²	□ 3	(42)	
	Any adult who buys the alcohol for the underage drinker?		□ ¹	□ ²	□ 3	(43)	
	The manager			□ ²	□ ³	(44)	

0.	premises which, if any, of the following people commits an offence? Please answer for each one by placing a tick in the appropriate box.						
		YES	NO	DON'T KNOW			
	The member of staff who served the drunk customer?				(45)		
	The drunk customer themselves?		□ 2	□ 3	(46)		
	Any person who buys alcohol on behalf of a drunk customer?	1	□ 2	□ 3	(47)		
	The manager	1	□ 2	□ 3	(48)		
7.	In Western Australia can the licensee of a charged for:- Please answer for each one by placing a tick in the				be		
		YES	NO	DONT			
	Selling alcohol to persons under 18 years of age?	<u> </u>	□ ²	KNOW 3	(49)		
	Selling alcohol to persons who are drunk?	□ ¹	□ ²	□ 3	(50)		
	Trading outside of permitted hours?	□ ¹	□ ²	3	(51)		
	Permitting disorderly conduct?		□ ²	□ ³	(52)		
	Allowing someone who appears drunk to enter the premises?	□ ¹	□ ²	□ ³	(53)		
	Selling alcohol to a person buying it for someone under 18?	□ ¹	□ ²	□ ³	(54)		
	Serving a person to the point of drunkenness?		□ ²	□ ³	(55)		
8.	In Western Australia is it an offence:-						
		YES	NO	DON'T KNOW			
	To be drunk in a public place? To drink alcohol in a public place?				(56) (57)		

			(Comp	uter Use)	5.
	Record No.		06	uter Ose)	(1-2)
	Interviewer				(3)
	Questionaire	No.			(4-7)
9.	In the past 12 months, while in your own experienced any of the following from near (Please answer by placing a tick in the appropriate by	rby put	have yo	ou personally lubs	,
		YES	NO	DON'T KNOW	
	Litter?		□ 2	□ 3	(8)
	Excessive traffic noise?		□ ²	□ 3	(9)
	Loud music?		□ ²	□ 3	(10)
	Other noise coming from the premises?	□ 1	□ ²	□ 3	(11)
	Offensive behaviour?		□ ²	□ 3	(12)
	Damage to your property?	□ 1	□ ²	□ 3	(13)
	Fear for your personal safety?	□ ¹	□ ²	□ 3	(14)
	The peace and quiet of your neighbourhood being disturbed by any activity occurring on the premises?	, D 1	□ ²	□ ³	(15)
	The peace and quiet of your neighbourhood being disturbed by disorderly conduct occurring near to the premises?	□ ¹	□ ²	□ 3	(16)
10.	If you answered YES to any of Question 9, name of the premises that were involved?	what			
			(Comp	outer Use)	
		•••••			(17-20)
					(21-24)
	DONT KNOW	✓ >>			(25)
11.	If you answered YES to any of Question 9 with whom would you lodge a complaint? (If you don't know please tick box)), wher		·	
			(C	Computer Use)	
•••••		• • • • • • • •	•		(26-27)
• • • • • • •		•••••	•		(28-29)
	DONT	KNOW	✓ ≥→		(30)

12.	If you answered NO or DON"T Keet where or to whom do you think you information for lodging a complain	ou would go to f	ind o	ut).
					(31-32)
		• • • • • • • • • • • • • • • • • • • •			(33-34)
		DONT KNOW	✓ ≥ →		(35)
questi	following section there are no "right" or ions is all that matters. The section is in two three friends. Please read these carefully ly.	o parts and each one	begin	s with part of	a story
When John clear John hour,	decides to have a drink with a count he arrives at the pub his friends doesn't want to drink much so decaway the empties promptly and al realises it he has lost track of the but still decides to drive home. On the breath test and is found to be come.	Anne and Steve a cides to buy his contains the ways ask if they number of beers in the way home I	re bu own d want he has	ying beer in rinks. The l more drinks had in the	i jugs. barstaff s. Before last
	answer the following by placing a tick in t	he appropriate box.	Remen	nber, there is	no "right" or
13.	Do you think that the barstaff of texceeding the legal limit?	he pub are <u>partl</u> y	<u>_</u> resp	onsible for	John
	Yes, Definitely			1	(36)
	Yes, Probably			2	
	Not sure			3	
•	Probably not			4	-
	Definitely not			5	
14.	Do you think that the licensee of exceeding the legal limit?	he pub is partly	respo	nsible for J	John
	Yes, Definitely			1	(37)
	Yes, Probably			2	
	Not sure			3	
	Probably not			4	
	Definitely not			5	

Back at the pub, Anne and Steve are still drinking and it is now clear that they are obviously drunk. The barstaff continue to serve them alcoholic drinks for the next hour. Anne decides to leave and risks driving the short distance home. On the way home she reacts too slowly to avoid hitting a pedestrian on a crossing. Her blood alcohol level was found to be 0.12. The resulting court case awards 1 million dollars in compensation to the victim who is now permanently crippled.

drunk may increase the risk of th	serve someone who is em having an accident		
Yes. Definitely	П	1	(38)
•		2	(20)
Not sure	_	3	
Probably not		4	
Definitely not		5	
		de to pay s	some
Yes, Definitely		1	(39)
Yes, Probably		2	
Not sure		3	
Probably not		4	
Definitely not		5	
made to pay?	· ·	the licensee	e be (40-42)
	Probably not Definitely not Do you think that the licensee of compensation to the injured viction Yes, Definitely Yes, Probably Not sure Probably not Definitely not What percentage of the \$ 1 million made to pay?	Yes, Probably Not sure Probably not Definitely not Do you think that the licensee of the pub should be maccompensation to the injured victim? Yes, Definitely Yes, Probably Not sure Probably not Definitely not What percentage of the \$ 1 million in damages should to	Yes, Probably Not sure Probably not Definitely not Do you think that the licensee of the pub should be made to pay secompensation to the injured victim? Yes, Definitely Yes, Probably Not sure Probably not Definitely not What percentage of the \$ 1 million in damages should the licensee made to pay?

18.	Do you think that the barstaff of the p compensation to the injured victim?	ub should be mad	le to pay son	ne
	Yes, Definitely		1	(43)
	Yes, Probably		2	(12)
	Not Sure		3	
	Probably not		4	
	Definitely not		5	
19.	What percentage of the \$ 1 million in made to pay? Percent	damages should ti	ne barstaff b	e (44-46)
20.	Do you think that Steve was partly reddrunk?	ponsible for Anne	getting	
	Yes, Definitely		1	(47)
	Yes, Probably		2	(- /
	Not Sure		3	
	Probably not		4	
	Definitely not		5	

The following are some ideas for decreasing the risk of alcohol related accidents, injury, trouble and crime. Please indicate your level of support for, or opposition to, any of these ideas by placing a tick in the appropriate box. YOUR VIEWS ON THIS ARE VERY IMPORTANT SO PLEASE ANSWER ALL ITEMS.

21. To what extent do you support the following?:-

Training all licensees about licensing	Strongly support	Moderately support	Undecided	Moderately oppose	Strongly oppose	
laws and responsible management practices as a condition of holding a liquor licence.			□ ₃	□₄	□ 5	(48)
Barstaff to suggest alternatives to customers, such as non-alcoholic drinks and food.	such as drin and		□ 3	□ 4	□ 5	(49)
Barstaff not to prompt people to have another drink.	□ 1		□ ₃	□ 4		(50)
Reduced trading hours for all pubs and clubs.				□ 4		(51)
Providing entertainment such as rock bands only in areas where no alcohol is allowed.	□ ₁		□ ₃	□ 4	□ 5	(52)
Licensees to provide a free breath test if requested.			\square_3	□ 4		(53)
Training of all barstaff to serve alcohoresponsibly.				п		(54)
Licensees to provide transport or a			□ ₃	□ 4		(54)
place to sober up for persons who become drunk on the premises.			□ 3	□ 4		(55)
Bouncers to be trained in ways to cut down violence.			□ ₃	□ 4	□ 5	(56)
Barstaff to make sure customers do not continue drinking when obviously drunk.			□ ₃	□ 4		(57)
Banning the sale of beer in jugs.			\square_3	□ 4	□ 5	(58)

Continued on next page......

	Strongly support	Moderately support	Undecided	Moderately oppose	Strongly oppose	
Limiting the size of pubs and clubs.			\square_3	□ 4	□ 5	(59)
Allow police to breath test customers of licensed premises before they enter their cars.	□ ₁		□ ₃	□ 4	□ 5	(60)
Make more public transport available at night and on weekends.			\square_3	□ 4		(61)
Raising the drinking age to 21.	\square 1	\square_2	□ 3	□ 4		(62)
Strict enforcement of the law against serving customers who are drunk.			□ ₃	□ 4	□ ₅	(63)
The creation of a new type of licence where only low alcoholic drinks can be sold (e.g., 3.8% maximum).			□ 3	□₄		(64)
Identity cards as proof of age for persons aged 18 to 21.	□ ₁		□ ₃	□ 4	□ 5	(65)
Provide very cheap or free non-alcoholic drinks to drivers of a drinking group.		□ ₂	□ 3	□ 4	□ 5	(66)
More visible police presence in and around pubs and clubs.			□ 3	□ 4		(67)
Reducing the legal blood alcohol level from 0.08 to 0.05		□ ₂	\square_3	□ 4		(68)
Free public transport after 8.00 P.M. at night.			\square_3	□ 4		(69)
Strict enforcement of the law against serving customers who are underage.		\square_2	\square_3	□ 4		(70)
Limiting carparking at pubs and clubs, and in nearby streets.		□ ₂	□ ₃	4	□ ₅	(71)
Giving local government the power to control licensed premises instead of a central office.	□ ₁			□₄		(72)

		Record No Interviewe Questiona	r	(Computer Use) 07	(1-2) (3) (4-7)
22. Do you think it is following places if Please answer by pla	f they are	OVER the l	egal limit		
	YES	NO	NOT SURE		
In motor vehicles if intending to drive	□ ¹	□ ²	□ 3		(8)
On licenced premises (eg pubs, restaurants)	□ ¹	□ ²	□ ³		(9)
During their working hours (including their lunch time)	□ ¹	□ ²	□ ³		(10)
In public parks/reserves	□ ¹	□ ²	□ ³		(11)
At the beach or riverside	□ 1	□ ²	□ ³		(12)
In the street	□ ¹	□ ²	□ 3		(13)
In their own home	□ ¹	□ ²	□ 3		(14)
If operating power or sailboats	□ 1	□ ²	□ 3		(15)
At sporting events	□ ¹	□ ²	□ 3		(16)
While operating machinery	□ ¹	□ ²	□ 3		(17)
In a friend's home	□ 1	□ ²	□ ³		(18)

11.

(1-2)

The following questions relate to the	MAXIMUM level of fines:	for offenses commi	tted on licensed
premises.			

23.	Do you think the following maximum fines are too low, about right,
	or too high, when an underage person drinks alcohol on licensed
	premises? (Please answer by ticking the appropriate box).

	TOO LOW	ABOUT RIGHT	TOO HIGH	
\$2,000 for the bar staff	□ 1	□ ²	□ 3	(19)
\$2,000 for the underage drinker	□ 1	□ ²	□ 3	(20)
\$2,000 for any adult who buys alcohol for the underage drinker	□ 1	□ ²	□ 3	(21)
\$5,000 for the manager	□ ¹	□ ²	□ 3	(22)
\$5,000 for the licensee	□ 1	□ ²	□ 3	(23)

24. Do you think the following maximum fines are too low, about right, or too high when a customer, who is obviously drunk, drinks alcohol on licensed premises? (Please answer by ticking the appropriate box).

	TOO LOW	ABOUT RIGHT	TOO HIGH	
\$2,000 for the bar staff	□ 1	□ ²	□ 3	(24)
Nil for the intoxicated customer	□ ¹	□ ²	□ 3	(25)
\$1,000 for any person who buys alcohol for the intoxicated customer	n 🗆 1	□ ²	□ 3	(26)
\$5,000 for the manager	□ ¹	□ ²	□ ³	(27)
\$5,000 for the licensee	□ 1	□ ²	□ 3	(28)

The following questions relate to your personal preferences when making a choice in regard to your health on licensed premises.

Please indicate your answer by placing a tick in the appropriate box.

25. In general, do you believe it would be a good idea for pubs and clubs to offer ?

26.

pub or club laid on

•				
Non smoking areas	Yes □ 1	No D 2	Unsure 3	(29)
A range of healthy food (eg low fat, salads, fruit etc)	□ ¹	□ ²	□ ³	(30)
A wide range of reasonably priced low alcoholic and non alcoholic drinks	□ 1	□ ²	□ 3	(31)
Free or cheap soft drinks for drivers of drinking groups	□ 1	□ ²	□ 3	(32)
Transport to and from the pub or club	□ ¹	□ ²	□ 3	(33)
Would you visit pubs or club	os more freq	quently if the	ney?	
Offered healthy food (eg, low fat; salads; fruit etc)	Yes □ 1	No 2	Unsure 3	(34)
Had a no smoking area	□ 1	□ ²	□ 3	(35)
Offered free or cheap soft drinks for drivers of drinking groups	□ ¹	□ ²	□ 3	(36)
Had a wide range of reasonably priced low alcohol and alcohol free drinks	□ 1	□ ²	□ ³	(37)
Had transport to and from the	П 1	□ 2	П 3	(38)

That is all of the questions relating to alcohol in this section, but before you check to make sure that you have answered ALL questions, please answer the following questions about your income and place of birth. Remember, your answers will be treated with the strictest of confidence, and are required for research purposes only.

27.	What is your annual income?			
27.	\$0 \$10,000 \$11,000 \$20,000 \$21,000 \$30,000 \$31,000 \$40,000 \$41,000 \$50,000 \$51,000 \$60,000 Above \$60,000		1 2 3 4 5 6 7	(39)
28.	Were you born in Australia ?	-	. POP 10	
	Yes No		1 (Go to Q29) 2 (Go to Q30)	(40)
29.	Are you of? Aboriginal descent Torres Strait Islander descent Other descent		1 2 3 3	(41)
30.	In which country were you born	?(Computer U	(se)	(42-43)

COULD YOU NOW TAKE THE TIME TO CHECK THAT YOU HAVE ANSWERED ALL OF THE QUESTIONS.

THANK YOU FOR YOUR PARTICIPATION

SECTION 3

DRINKING SETTINGS, ALCOHOL RELATED HARM, AND SUPPORT FOR PREVENTION POLICIES

SELF COMPLETION SECTION
(Only to be given to persons who drink alcohol)

ALL OF YOUR RESPONSES TO THE FOLLOWING QUESTIONS WILL BE KEPT STRICTLY CONFIDENTIAL.

YOUR ANSWERS WILL NOT BE ANALYSED INDIVIDUALLY, BUT WILL BE COMBINED WITH ANSWERS FROM 1,250 OTHER AUSTRALIANS.

ENCO	OLLOWING QUESTIONS RELATE UNTERED AS A RESULT OF DRIN answer Yes or No to the following qu	NKING.		U MA] Y HAV	
1 icase	answer Tes of No to the following qu	estions by placing a ac	ok iii uic	upprop	mate t	~x.
1.	In the past three months have y was partly due to drinking alco		nat	YES	NO :	2 (8)
2.	In the past three months have y drink-driving?	you been charged w	vith	□ 1		2 (9)
3.	In the past three months have y violent argument or fight while alcohol?			□ ¹		2 (10)
4.	In the past three months have y while under the influence of al damage costing more than \$100	cohol resulting in	:	□ ¹		2 (11)
5.	In the past three months have ya place, such as a party, pub, o had had too much to drink?			□ ¹		2 (12)
6.	In the past three months have y an offence other than drink-dri alcohol?			□ ¹		2 (13)
7.	In the past three months have y work to recover from the effec		hol?	□ ¹		2 (14)
8.	In the past three months have you violent argument or fight with was clearly under the influence	another person wh		□ ¹		2 (15)

1.

THE FOLLOWING	QUESTIONS A	RE ABOUT D	RINKING A	ND DRIVING.

У.	Do you note a current uriving neense:					
	Yes		1 15 (Go to Q10.)	(16)	
	No		213 (Go to Q16)		
	entioned earlier, your answers will remain completely curate information, please answer all the questions by					
10.	Within the past year, about how many times car when you were slightly intoxicated?	s hav	e you t	een driving	a	
	Never			1	(17)	
	1 - 2 Times			2		
	3 - 4 Times			3		
	5 or more Times			4		
	Unsure			5		
11.	When you are in a drinking situation where you have to drive, how often do you drink less than you would if you weren't driving?					
	I always drink less than I would if I weren't driving			1	(18)	
	I usually drink less than I would if I weren't driving			2		
	I sometimes drink less than I would if I weren't drive	ing		3		
	I never drink less than I would if I weren't driving			4		
	I never drink and drive			5		
	Unsure			6		
12.	When you are going somewhere where you how often do you arrange for someone else you're drinking?					
	I always arrange for someone else to drive			1	(19)	
	I usually arrange for someone else to drive			2		
	I sometimes arange for someone else to drive			3		
	I never get someone else to drive			4		
	I never drink and drive			5		
	Unsure			6		

13.	Do you definitely feel that it is alright or that it is wrong for you to drive after having four or more drinks in one hour?					
	I definitely feel that it is alright		1	(20)		
	I definitely feel that it is wrong		2			
	Not sure how I feel about it		3			
14.	How often do you use police breath te limit your drinking when you are with					
	Always		1	(21)		
	Usually		2			
	Sometimes		3			
	Never		4			
	Unsure		5			
15.	Think about <u>your</u> chances of being sto breath test in the <u>next month</u> . How w of being pulled over by the police for a time in the <u>next month</u> ?	ould you rate you	r chances			
	Extremely likely		1	(22)		
	Quite likely		2			
	Even chance		3			
	Quite unlikely		4			
	Extremely unlikely		5			
	Unsure		6			

Please answer all of the following questions about your drinking by placing a tick in the appropriate box.

DURING THE PAST THREE MONTHS:

16.	The day after drinking alcohol, I woke up feeling sweaty.				
	Never or Almost Never Sometimes Often Nearly Always	□ 1 □ 2 □ 3 □ 4	(23)		
17.	The day after drinking alcohol, my hands the morning.	s shook first thing in			
	Never or Almost Never Sometimes Often Nearly Always	□ 1 2 □ 3 □ 4	(24)		
18.	The day after drinking alcohol, my whole first thing in the morning if I didn't have	body shook violently a drink.			
	Never or Almost Never Sometimes Often Nearly Always	□ 1 2 □ 3 □ 4	(25)		
19.	The day after drinking alcohol, I woke up in sweat.	absolutely drenched			
	Never or Almost Never Sometimes Often Nearly Always	□ 1 □ 2 □ 3 □ 4	(26)		
20.	The day after drinking alcohol, I dreaded the morning.	waking up in			
	Never or Almost Never Sometimes Often Nearly Always	□ 1 □ 2 □ 3 □ 4	(27)		

DURING THE PAST THREE MONTHS:

21.	The day after drinking alcohol, I was frightened of meeting people first thing in the morning.				
	Ŋ	lever or Almost Never		1	(28)
	S	ometimes		2	
	C	Often		3	
	ľ	learly Always		4	
22.	The day after drinking alcohol, I felt at the edge of despair when I awoke.				
	N	Never or Almost Never		1	(29)
	S	ometimes		2	
	(Often		3	
		learly Always		4	
23.	The day after drinking alcohol, I felt very frightened when I awoke.				
	1	Never or Almost Never		1	(30)
	S	ometimes		2	
	(Often		3	
	1	Nearly Always		4	
24.	The day after drinking alcohol, I liked to have an alcoholic drink in the morning				
	1	Never or Almost Never		1	(31)
	S	ometimes		2	
	(Often		3	
	1	Nearly Always		4	
25.	The day after drinking alcohol, in the morning I always gulped my first few alcoholic drinks down as quickly as possible.				
	1	Never or Almost Never		1	(32)
	S	Sometimes		2	
	(Often		3	
	1	Nearly Always		4	
		-			

26.	The day after drinking alcohol, I drank more alcohol in the morning to get rid of the shakes.			
	Never or Almost Never		1	(33)
	Sometimes		2	
	Often		3	
	Nearly Always		4	
27.	The day after drinking alcohol, I had a very alcoholic drink when I awoke.	strong crav	ing for a	n
	Never or Almost Never		1	(34)
	Sometimes		2	
	Often		3	
	Nearly Always		4	
DURI	NG THE PAST THREE MONTHS:			
28.	I drank more than a quarter of a bottle of sp of wine OR 7 middies of beer)	oirits in a da	y (OR 1	bottle
	Never or Almost Never		1	(35)
	Sometimes		2	
	Often		3	
	Nearly Always		4	
29.	I drank more than half a bottle of spirits in wine OR 15 middies of beer)	a day (OR 2	bottles	of
	Never or Almost Never		1	(36)
	Sometimes		2	
	Often		3	
	Nearly Always		4	
30.	I drank more than one bottle of spirits in a wine OR 30 middies of beer)	day (Or 4 b	ottles of	
	Never or Almost Never		1	(37)
	Sometimes		2	
	Often		3	
	Nearly Always		4	

31. I drank mo wine OR 6	ore than two bottles of spirits in a day of middies of beer)	(OR 8	bottles of	
	Never or Almost Never		1	(38)
	Sometimes		2	
	Often		3	
	Nearly Always		4	
IMAGINE THE I	FOLLOWING SITUATION:			
	HARDLY DRUNK ANY ALCOHOL FOR A drink VERY HEAVILY for TWO DAYS	FEW	WEEKS	
HOW WOULD YOU HEAVY DRINKING	J FEEL THE <u>MORNING AFTER</u> THOSE TW G ?	/O DA	YS OF	
32. I would sta	art to sweat.			
	Not at All		1	(39)
	Slightly		2	
	Moderately		3	
	Quite a Lot		4	
33. My hands	would shake.			
	Not at All		1	(40)
	Slightly		2	
	Moderately		3	
	Quite a Lot		4	
34. My body v	vould shake.			
	Not at All		1	(41)
	Slightly		2	
	Moderately		3	
	Quite a Lot		4	
35. I would be	craving for a drink.			
	Not at All		1	(42)
	Slightly		2	
	Moderately		3	
	Quite a Lot		4	

DURING THE PAST THREE MONTHS:

36.	After having just two or three drinks I felt like having a few more.				
	Never or Almost Never		(43)		
	Sometimes				
	Often	_ ,			
	Nearly Always	□ 4			
37.	After having two or three drinks I could sto had other things to do.	p drinking if I			
	Never or Almost Never	□ 1	(44)		
	Sometimes				
	Often	□ 3			
	Nearly Always	□ 4			
38.	When I started drinking alcohol I found it hard to stop until I was fairly drunk.				
	Never or Almost Never		(45)		
	Sometimes				
	Often	□ ₃			
	Nearly Always	□ 4			
39.	When I went drinking I planned to have at least six drinks.				
	Never or Almost Never		(46)		
	Sometimes				
	Often	□ 3			
	Nearly Always	□ 4			
40.	When I went drinking I planned to have no drinks.	more than two or three			
	Never or Almost Never		(47)		
	Sometimes				
	Often	□ ₃			
	Nearly Always	□ 4			

COULD YOU NOW TAKE THE TIME TO CHECK THAT YOU HAVE ANSWERED ALL OF THE QUESTIONS.

THANK YOU FOR YOUR PARTICIPATION

DRINKING SETTINGS, ALCOHOL RELATED HARM, AND SUPPORT FOR PREVENTION POLICIES

SECTION 4

SUPPLEMENTARY SECTION

TO BE ADMINISTERED BY INTERVIEWER ONLY IF

(1) Respondent answered YES to any of the "harm" questions on page 1 of Section 3.

AND

(2) The drinking location has not been covered by other questions

This section to be asked ONLY if respondents answered YES to any of the "harm" questions on page 1 of Section 3

I notice you answered YES to one (some) of the questions relating to harm, and that was .. (repeat the question(s) which they answered YES to).

I would like you tell me what you can remember of that particular day.

- 1. Where were you drinking?
 Record if at a licensed premises, private residence, or public place. Some respondents may give name of licensed premise at this point so you need not ask next question.
- 2. Which licensed premises was this? (Ask for each location if more than one). If name refused ask respondent to specify type of premises e.g. hotel, tavern, restaurant, night club etc.
- 3. Which suburb is that in? (ask for each location)
- 4. What type of alcohol were you drinking? (i.e beer/ wine/spirits)
 Record this for each location if more than one. You will need to probe if, for example, they were drinking cocktails in order to find out the type of cocktail and what it contained.

A little while ago I asked you some questions about standard drinks when I showed you this chart (show standard drinks chart, briefly explain it and leave where it can be seen) You might want to refer to this again.

7. How many standard drinks do you think you had?

(For those drinking cocktails get them to estimate the number of serves of spirits they contained.)

REPEAT THE ABOVE SEQUENCE FOR ALL LOCATIONS UP TO AND INCLUDING THE ONE AT WHICH "HARM" OCCURRED THEN ASK THE FOLLOWING QUESTIONS ABOUT THAT SPECIFIC LOCATION

NOTE

At this point interviewers repeated Questions 17 - 40 from Section 1 of the Questionnaire.

APPENDIX 3

DIAGRAM USED TO EXPLAIN WHAT CONSTITUTES A 'STANDARD DRINK'

EACH OF THE FOLLOWING CONTAINS ROUGHLY THE SAME AMOUNT OF ALCOHOL. WE CALL THEM "STANDARD DRINKS"



A MIDDY OF REGULAR BEER



A SMALL GLASS OF WINE



A PORT OR SHERRY



A NIP OF SPIRITS

APPENDIX 4

DIAGRAMS USED FOR DETERMINING PREFERRED LABEL FOR DRINK CONTAINERS

WHICH OF THE FOLLOWING LABELS WOULD BEST HELP YOU TO KEEP TRACK OF HOW MUCH ALCOHOL YOU DRINK: (tick appropriate label)

BEER



LABEL 1
Contains 5% Alcohol by Volume



LABEL 2 Contains 3 Standard Drinks



LABEL 3
Centains 30 Grams of Alcohol

WHICH OF THE FOLLOWING LABELS WOULD BEST HELP YOU TO KEEP TRACK OF HOW MUCH ALCOHOL YOU DRINK: (tick appropriate label)

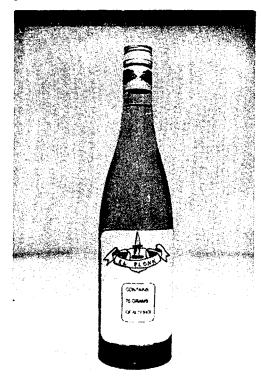
WINE



LABEL 1 Contains 12% Alcohol by Volume



LABEL 2 Contains 7 Standard Drinks



LABEL 3
Contains 70 Grams of Alcohol

WHICH OF THE FOLLOWING LABELS WOULD BEST HELP YOU TO KEEP TRACK OF HOW MUCH ALCOHOL YOU DRINK: (tick appropriate label)

SPIRITS



LABEL 1
Contains 40% Alcohol by Volume



LABEL 2
Contains 24 Standard Drinks



LABEL 3
Contains 237 Grams of Alcohol