



Foundation for Alcohol
Research & Education



centre for alcohol
policy research

Centre for Alcohol Policy Research



Turning Point

TREATMENT • RESEARCH • EDUCATION

CAPR Annual Report, July 2014 – June 2015

CAPR Team

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About the Centre for Alcohol Policy Research

The Centre for Alcohol Policy Research (CAPR) is the only Australian research centre with a primary focus on research related to alcohol policy. There are four main areas of research in the Centre's work: research on alcohol policy impacts; on alcohol policy formation and regulatory processes implementing alcohol policies; on patterns and trends in drinking and alcohol problems in the population, as needed bases for policymaking; and on the influence of drinking norms, cultural practices and social contexts, particularly in interaction with alcohol policies.

The CAPR research program thus aims to improve the understanding of alcohol-related harms and evidence-based strategies to address them. Besides conducting and publishing research, CAPR also serves as a resource concerning the evidence base on alcohol policies for the public health community, social and government agencies, the media, and larger society. As described in more detail below, CAPR pursues this objective in a number of ways:

- by publication of its original research findings and scholarly reviews and commentaries;
- by pursuing and producing reports on agreed-on alcohol policy-relevant research topics for the Foundation for Alcohol Research and Education (FARE) and other funders;
- by disseminating its research, in the context of the relevant knowledge base, through presentations at community, governmental and professional meetings, and through participation in public seminars and events;
- by responding to requests concerning evidence from governmental, public health and other bodies, and from the media;
- by advising public health-oriented alcohol policy agencies and coalitions on the relevant research on emergent alcohol policy issues;
- by contributing to the development of the workforce of scholars competent in policy-relevant alcohol research in Australia and internationally through such means as postgraduate training, postdoctoral placements, internships and scholarly visits and exchanges;
- by working with the World Health Organization and other public health agencies, and other research groups in Australia and internationally, to develop the international base of knowledge concerning drinking patterns, alcohol-related harms, and effective alcohol policies.

The Centre's auspices and funding

The Centre for Alcohol Policy Research (CAPR) has been a collaboration between four institutions. Since its inception in 2006, CAPR has been located as a research program within Turning Point, a multifunction alcohol, other drug and gambling centre which is now part of Eastern Health, a multisite metropolitan health service. It is the primary research activity of the Foundation for Alcohol Research and Education (FARE), an independent charitable organisation working to stop the harm caused by alcohol, which provides CAPR's core funding. In pursuing these objectives, CAPR is responsive to the three objectives specified in the contract between FARE and Turning Point which has provided core Centre support to CAPR; to:

- Undertake policy relevant research into alcohol-related harms and interventions to reduce these harms;
- Promote the research in a range of forums with a range of audiences to contribute to discussions on alcohol policy; and
- Work collaboratively with the Foundation to provide the evidence-base to inform changes in alcohol policies with the aim to reduce harms.

CAPR's director, Robin Room, has been a professor in the Melbourne School of Population and Global Health of the University of Melbourne (and three of the Centre staff were predoctoral or postdoctoral fellows in the School during the year). Until 30 June, 2015, Room's professorship was largely supported by the Department of Health and Human Services of the State of Victoria. As of July 1, 2015, Room holds a professorship at La Trobe University.

CAPR's core funding has been supplemented with funding for specific projects and activities from a number of sources, including competitive grants from the National Health and Medical Research Council (NHMRC), the Australian Research Council (ARC), the Australian National Preventive Health Agency (ANPHA), the National Drug Law Enforcement Research Fund (NDLERF), Healthway and the Victorian Health Promotion Foundation (VicHealth). Through a service agreement distinct from the core Centre funding, FARE has also supported a line of work on "The range and magnitude of alcohol's harm to others", major reports from which were published during the year. FARE and other agencies also provided some support to an international conference on alcohol policy research which CAPR hosted in Fitzroy, Victoria, in September 2014. Some funding for specific projects, mainly concerning international studies of harms from others' drinking, has also been received from the World Health Organization. Centre staff have held fellowships from the NHMRC, ARC, the Sidney Myer Foundation and the Australian Rechabite Foundation and an Australian Postgraduate Award; NDARC at the University of New South Wales,

NDRI at Curtin University and the Melbourne School of Population and Global Health at the University of Melbourne have each provided support funding for one of these fellowships. Some of the funding, particularly for fellowships and Room's appointment, has come through universities and does not appear on the Turning Point budget for CAPR.

CAPR staff are actively engaged in proposal-writing for additional research funding, in order to support a research program involving a wide range of research training and expertise. Considerations in deciding to make applications for funding include the intellectual and policy significance of the proposed study, the relation of the proposed work to CAPR's topical focus and areas of research and to particular staff interests and capabilities, and the likelihood of the application being funded. Appendix D shows the grants and contracts which were current or received during the year starting 1 July, 2014. Also shown are the grants and contracts applied for during that year for which members of the CAPR staff were among the Chief Investigators or on the staff, divided according to their current status (successful, pending, unsuccessful, finished). Highlights of the year included Anne-Marie Laslett's successful application for a four-year NHMRC postdoctoral fellowship with NDRI at Curtin University to study harms to children from adults' drinking and alcohol issues in child protection cases and services; an ARC grant to Michael Livingston and colleagues to analyse recent Australian trends in alcohol consumption and harm; a grant from Healthway to continue the Alcohol Purchasing and Consumption studies by Sarah Callinan and colleagues with new data collection and analysis in Western Australia, to be compared to the rest of Australia; and a small grant from VicHealth initiating a line of work on exploring the norms on drinking – whether encouraging or controlling it -- in heavy drinking subcultures and social worlds.

Each of these grants and contracts contributes to meeting CAPR's objectives and strategic goals. The Healthway grant contributes to lines of work on economic issues in drinking of crucial relevance to policy discussions of alcohol taxes and minimum prices. Laslett's Early Career Fellowship strengthens one aspect of CAPR's continuing work on Alcohol's harm to others, other aspects of which are also supported by a current NHMRC grant and highly likely to be supported next year by a US grant. The VicHealth grant, which involved making sense of the general social literature on subcultures, social worlds, and such cultural entities, as well as of relevant alcohol studies, put CAPR staff in a good position for further work on norms and other cultural factors in drinking practices and problems, and how these interact with alcohol policies and their implementation. And the ARC grant to study recent trends in alcohol consumption and problems and their interaction enables a continuing

line of work on this area central to determining alcohol policy needs and directions.

The Centre's staff

As of June 2015, CAPR had ten staff members. During the year, Elizabeth Manton left the staff, after making a number of contributions to the field, including her primary role in putting together and editing *Stemming the Tide of Alcohol: Liquor Licensing and the Public Interest*, a landmark handbook and compendium concerning alcohol control in Australia. A profile of each current staff member can be found in Appendix C. The staff has a good mix of research expertise, including backgrounds in both quantitative and qualitative research, and degrees in diverse subjects, including criminology, statistics, psychology, public health, sociology, economics, literature and dentistry. Seven of the staff have PhDs, Claire Wilkinson is close to finishing one, and Janette Mugavin has now started on one. Orratai Waleewong, a PhD student from Thailand at the University of Melbourne, is also attached to CAPR.

While all members of the staff have been located at Turning Point, and most have been Turning Point employees, several have another main employer. In the year this report covers, Room, Pennay and MacLean held University of Melbourne appointments, Livingston had a postdoctoral fellowship through the University of New South Wales, and for part of the year Laslett held a postdoctoral fellowship through Curtin University, and Wilkinson and Mugavin had doctoral fellowships at the University of Melbourne. Several CAPR staff also have adjunct appointments, at Monash University (Pennay, Callinan, Jiang, Laslett) and Stockholm University (Room).

Awards to the Centre staff and projects

In October 2014, Laslett was awarded a prestigious NHMRC early career fellowship, which covers the majority of her salary for the next four years (2015-2018). MacLean was awarded the 2014 Melbourne School of Population and Global Health's Early Career Research Award for Excellence in Knowledge Transfer Achievements, and the ARC Linkage grant on which she was the prime mover and Room was also a chief investigator was a finalist in the Victorian Health Promotion Foundation's 2014 "Research into Action" award.

In connection with an international research conference on alcohol policy research hosted by CAPR in Fitzroy in September 2014 (discussed below under Research Dissemination and Capacity Building), a one-day symposium (*festschrift*) was held in honour of Robin Room's contributions to the field, organised by Professors Alison Ritter and Margaret Hamilton and jointly sponsored by the Drug Policy Modelling Program at NDARC, the University of

Melbourne, FARE, the Nordic Centre for Welfare and Social Issues, and the Centre for Social Research on Alcohol and Drugs at Stockholm University. The symposium included scholarly presentations by Michael Livingston and Wayne Hall, as well as international scholars Norman Giesbrecht, Pia Rosenqvist, Laura Schmidt, Petra Meier and Jessica Storbjörk, revised versions of which have been published, with an introduction by Alison Ritter and Kerstin Stenius, in a thematic section of *Drug and Alcohol Review* (33(6):575-624, 2014). A Book of Letters from colleagues was also presented to Room (<https://dpmp.unsw.edu.au/resource/room>).

The Centre's outcomes concerning Objectives 1-3 in the core centre grant

1. To undertake policy relevant research into alcohol-related harms and interventions to reduce these harms.

In the year from July 2014 to June 2015 CAPR undertook and published policy-relevant research in four main streams of work relevant to the centre's research mandate. Altogether, 70 articles or book chapters were published in final form, 12 were published on the web in "early view", prior to publication in final form, and 7 were accepted for publication. Four reports were published, and four more were submitted to funding agencies but as yet have not been published.

Each of the streams of work is briefly discussed here, and under each stream specific research projects have been included as dot points to illustrate the relation to the objective. A full listing of the Centre's publications for the year can be found in Appendix A. Appendix B gives a short summary of the focus and some findings of most of the publications, with the publications tied together conceptually in a narrative.

(1) Alcohol policy impacts: What are the effects, intended and otherwise, of specific policies? Such effects are most clearly measurable in terms of what changes as policy changes, whether the change occurs at a given moment or more gradually as the policy is implemented over time. Methods used include "natural experiment" before/after studies and time series analyses. Also relevant here are studies which allow modelling of what the effects of policies would be, for instance, in the context of tax or minimum price policies, studies of price responsiveness in different subpopulations.

- The book, *Stemming the Tide of Alcohol: Liquor Licensing and the Public Interest*, published in 2014 by FARE, provided the first detailed scholarly overview and analysis of Australian liquor

licensing regimes, viewed primarily in terms of their potential to improve public health and safety. The book included material on regulatory processes and well as policy impacts. Eleven of its chapters were authored or co-authored by FARE staff.

- A pioneer paper analysed the dynamic effects of changes in price and in affordability on Australian alcohol consumption, using a time-series approach. The paper found that the cumulative effect on consumption of a unit change in price had about three times the effect of a change in affordability.
- Another time-series analysis found a substantial reduction in the relation between per-capita alcohol consumption and traffic deaths after the implementation of random breath testing (RBT) to deter drink-driving. However, that there was also a fall in the relation for non-traffic fatal injuries suggested that broader changes may also have played a part.
- A separate time-series analysis of data on traffic mortality from four states found that the primary effect of introducing RBT was on younger drivers.
- An analysis of the effects of local government prohibitions on public drinking found that the laws primarily moved public drinking around, with no evidence that alcohol-related crime or harm was reduced. The laws did make residents feel safer, but had negative effects on marginalised heavy drinkers.
- A study which appeared in final form used multilevel modelling to show that alcohol sales outlet density, particularly of off-sale outlets, was associated with increased risk of alcohol consumption for 12-14 year olds.

(2) Policy formation and regulatory processes: Included here are studies of patterns and trends in public opinion and discourse about alcohol problems and policies, and of the positions and interactions of actors in the alcohol “policy community”. Also in this stream are studies concerning the crucial area of the implementation and enforcement of policies and regulations.

- A commentary discussed the challenge of linking findings that alcohol outlet density was linked to rates of problems from drinking. Apart from the influence of vested interests, there are limits on the research from the lack of detailed data. And findings

of a smooth curve of increased risk do not lead easily to decisions about setting any particular limit.

- A chapter on governance of addictive commodities at the international level pointed out the lack of international governance for alcohol, compared with controlled drugs or tobacco, and noted the related lack of resources devoted to alcohol problems at the international level.
- A commentary on alcohol policies in China co-authored by CAPR staff noted the dramatic increase in alcohol consumption there, with very few market controls after the market was privatised three decades ago. The commentary called for establishment of an agency to develop public health-oriented market controls and a national monitoring system.

(3) Population patterns and trends: To be effective, policymaking must be informed about and responsive to the empirical patterns of behaviour and problems in the population and its subgroups. CAPR thus engages in “social epidemiological” studies on issues and dimensions of relevance to alcohol policies. CAPR has had several areas of emphasis in this work.

Determinants of alcohol consumption and expenditure patterns:

- Using data from CAPR’s Alcohol Consumption and Purchasing (ACAP) study, the Australian arm of the International Alcohol Control study, a paper compared location and drinking choice for the most recent heavy-drinking occasion with the drinker’s usual lower-risk occasions. The heavier drinking occasion was more likely to be at a pub or nightclub or someone else’s home, and less likely to be in a restaurant.
- A study of who drinks low-priced alcohol found that a minimum price policy will affect heavy drinkers, who were more likely to purchase low-price alcohol, regardless of their income level.
- A report combining survey and qualitative data found that those intending to get drunk tended to choose drinks which offered high alcohol content for relatively low cost, and were likely to drink cheaper alcohol at home before heading out to a pub or nightclub.
- Households which spent a higher percentage of their income on alcohol were more likely to experience financial difficulties, it was found in an analysis of the Australian Household Expenditure Survey.

Trends in drinking patterns and abstinence:

- Comparing survey data from 2001 and 2010, the rate of abstinence among teenagers aged 14-17 had risen from under one-third to one-half. The trend towards less teenage drinking held across different population subgroups, and had been seen also in the US and UK and much of Europe.
- CAPR staff have worked on age-period-cohort (APC) analyses of alcohol consumption in Sweden and in Australia – the latter not yet published – which separate out cohort effects from historical and age effects, finding cohort effects in both societies.
- An editorial pointed to a number of hypotheses about why there was a trend toward less youth drinking, but concluded that research needs to be undertaken to understand the trend, with a view to what might be done to enhance and entrench it.

Studies of heavy drinking events:

- An analysis of the association between alcohol intoxication and use of energy drinks or stimulants on a night out found that those using energy drinks or stimulants had a higher blood-alcohol level (BAL) early but not later in the evening; the BAL difference was probably due to factors other than the stimulant use.
- An analysis of the last big night out of young risky drinkers found that a majority of the occasions started in a private home, with 80% of the night's consumption overall evenly split between private homes and pubs or nightclubs.
- In a qualitative study of young adults' big night out drinking in the central city, those from outer suburbs had heightened fears for safety; getting home was more difficult and risky. The authors discuss remedies to reduce the risks.
- Another qualitative study of drinking by young adults found many had difficulty with intoxicated self-control, and sought to arrange to be in settings where external restraints on drinking would operate.

Population-level studies of alcohol consumption and harms:

- A study analysing the relation of risk-taking behaviours while drinking with socioeconomic status found slightly higher rates among the more advantaged. It was noted that this contrasted sharply with the negative social gradient for alcohol-related

mortality, suggesting other factors must play a strong role in drinking-related health inequalities.

- In a systematic review of studies of whether adding energy drinks (ED) to alcohol consumption affect risk-taking and outcomes, a majority of studies, but not all, found that adding EDs went with more hazardous drinking and risk-taking.

Harm from others' drinking

- A report published by FARE, *The Hidden Harm*, drew on survey reanalyses, register data and qualitative studies to address the harms from drinking to children and other family members. 17% of adults had been harmed, 6% of them “a lot”, by a family member in the past year. Some form of harm to their children from someone’s drinking was reported by 22% of those with children. A qualitative follow-up study found that indeed serious incidents were reported by those reporting a child had been harmed “a lot”. But attention and response in social and health service systems to problems of family members due to another’s drinking was very spotty.
- A second report, *Beyond the Drinker*, reported on a longitudinal study which found that half of those reporting such harm in 2008 reported it again in 2011. The presence of heavy drinkers in a respondent’s life was an important predictor of harm from others’ drinking, suggesting that policies which reduce heavy drinking in general are likely to reduce such harms.
- Who is more likely to take the role of care-giver, among those harmed by a family member’s drinking? A paper on this found that caregivers were more likely to be female and younger, and to be a household member or partner or ex-partner – and more likely to score lower on wellbeing.

(4) Norms and culture in interaction with policies: Drinking is primarily a social behaviour, enacted in many settings and subcultures. The drinker is affected by the expectations and responses of others in the drinking group and setting, as well as of others in the wider society. Drinking groups and subcultures are influenced by and interact with alcohol policies; they may change to conform to a new policy, or they may seek

ways to subvert or get around it. Studying such interactions and influences is an important part of alcohol policy research.

- A report on young people's drinking in inner- and outer-urban municipalities put a focus on the potential for local government policy responses which would reduce alcohol-related problems, in terms of licensing and planning and their enforcement, information provision, and public transport improvements.
- Who gets pressured to drink more and to drink less was analysed in terms of the sources and prevalence of the pressures. Risky drinkers in a social world of heavy drinkers receive more pressures both to drink less and to drink more from all sources. Attention to these informal norms and pressures is argued to be an important part of any effort to change drinking cultures.
- A review of the impacts of tourism on drinking and alcohol policy in developing societies found that tourists often drink more than at home, and their heavy drinking impacts on host societies, notably on young people working in the tourist sector. The paper draws some conclusions on international policy agendas.
- A paper arising out of studies of the risks of drinking asked why societies like Australia accept a higher risk for alcohol than for other risks – about ten times the usual upper limit for voluntary risks, and 10,000 times the usual limit for involuntary (which drinking also involves, in terms of risks for others). Historical, cultural and interest group factors are mentioned, but the paper concludes it remains a mystery why alcohol is treated so exceptionally.

2. To promote the research in a range of forums with a range of audiences to contribute to discussions on alcohol policy.

Throughout the year CAPR staff have presented their research and contributed to alcohol and broader policy processes by developing relationships with and communicating findings to a range of academics, government and non-government representatives, and the general public. In addition staff sit on a range of committees and work across and with a broad range of agencies that influence policy and research development, implementation and evaluation.

Appendix B lists the 9 presentations made internationally during the year, and the 34 presentations made by CAPR staff in Australia. The

international presentations were made primarily at scientific meetings, where there is an opportunity to influence the field internationally, but also to gain advice and suggestions from peers for improving the work. Presentations at the Kettil Bruun Society meetings, for instance, are based on written and precirculated papers, which form the basis after revision for a scholarly publication. One presentation, at a World Health Organization meeting, was given in the course of advisory work on the revision of alcohol and drug codes in the International Classification of Diseases.

Appendix B also lists the 34 presentations made by CAPR staff in Australia during the year. Five of these were also at a Kettil Bruun Society meeting – the thematic meeting on alcohol policy research hosted by CAPR in Fitzroy, Victoria, where again there was a written paper, a prepared commentary, and much opportunity for scholarly interchange. Audiences for other presentations included researchers and clinicians in the AOD field (at conferences such as the Australasian Professional Society on Alcohol and Drugs, APSAD), as well as specialist medical societies, a community forum on liquor licensing issues, a criminology conference, an international seminar on substance misuse and domestic violence, and the annual meeting of the Public Health Association of Australia.

Apart from these formal presentations, CAPR staff also often serve in the informal role of scientific advisers on policy-oriented committees and groups, such as the Victorian Department of Justice's Liquor Control Advisory Council, the Alcohol Policy Coalition of Victoria, and the National Alliance for Action on Alcohol. CAPR staff also contribute from a research base to public discourse about alcohol issues and policies, including contributing 5 news articles and web communications during the year ending June 30, 2015.

3. To work collaboratively with the Foundation to provide the evidence-base to inform changes in alcohol policies with the aim to reduce harms.

In consultation with FARE, CAPR has established priorities for joint research undertakings and produced reports, reference and summary materials, and journal articles on defined FARE projects, as well as responding to ad hoc requests. For instance, Livingston prepared a report, published by FARE in July 2015, on *Understanding Trends in Australian Alcohol Consumption* which analysed data from five National Drug Strategy Household Surveys conducted since 2001. Several chapters in the book *Stemming the Tide of Alcohol: Liquor Licensing and the Public Interest*,

published by FARE in August 2014, were revised from reports to FARE on particular strategies for regulating how alcohol is sold so as to reduce alcohol-related harm.

The two comprehensive research reports published and launched in early 2015 on harms from others' drinking in the year reported on here, also reflected substantial collaborative interaction with FARE staff, and served as key research underpinnings for the development of FARE's *National Framework for Action to Prevent Alcohol-Related Family Violence*. CAPR staff also provided substantial feedback on drafts of the Framework prior to its publication.

Networks, collaborations, research translation

Research collaborations

CAPR staff are part of an informal network of Australian researchers working in alcohol policy and related research areas. Researchers with whom CAPR staff have had tangible links during the year include Michael Savic, Dan Lubman, Belinda Lloyd and other staff in other units at Turning Point; Paul Dietze and Margaret Hellard at the Burnet Institute; Vicki White, Melinda Wakefield, Denise Azar, Elizabeth Holzer, Sondra Davoren and Brian Vandenberg at Cancer Council Victoria; Peter Miller, John Toumbourou, Bosco Rowland and Grazyna Zajdow at Deakin University; Kate Seear and Kerry O'Brien at Monash University; Richard Chenhall, Marcia Langton, Kristen Smith and Paula O'Brien at the University of Melbourne; Darryl Higgins at the Australian Institute of Family Studies; Steve Allsop, Tanya Chikritzhs, Simon Lenton and David Moore at NDRI/Curtin University; Jaklin Elliott at the University of Adelaide; Alison Ritter and Jenny Chalmers at NDARC/UNSW; Kyp Kypri at the University of Newcastle; John Saunders and Kate Conigrave at the University of Sydney; Wayne Hall and Jason Ferris at the University of Queensland; Sharon Dawe at Griffith University; Melissa O'Donnell and Fiona Stanley at the Telethon Kids Institute; and Peter d'Abbs at the Menzies Institute.

CAPR staff work on joint projects or otherwise collaborate with a wide variety of overseas researchers. Links which have been active in the last year include with Bill Kerr, Tom Greenfield and Cheryl Cherpitel at the Alcohol Research Group, Emeryville, California; Sharon and Richard Wilsnack at the University of North Dakota; Peter Reuter at the University of Maryland; Beau Kilmer at RAND, Santa Monica, California; Maria-Elena Medina Mora at the Mexican Institute of Psychiatry in Mexico City; Kate Graham, Jürgen Rehm and

Norman Giesbrecht at the Centre for Addiction and Mental Health, Toronto, Canada; Johan Edman, Jessica Storbjörk, Börje Olsson and Kerstin Stenius at SoRAD, Stockholm University; Jonas Raninen, Mats Ramstedt and Erica Sundin at CAN, Stockholm; Pekka Sulkunen and Matilda Hellman, Sociology Department, University of Helsinki; Pia Mäkelä and Christoffer Tigerstedt at the National Institute for Health and Welfare, Helsinki; Ingeborg Rossow at the Norwegian National Alcohol and Drug Research Institute; Kim Bloomfield and Vibeke Asmussen at the Centre for Drug & Alcohol Research, Aarhus University, Denmark; Gerhard Gmel and Sandra Kuntsche at the research department of Addiction Suisse, Lausanne, Switzerland; Ann Hope at Trinity College, Dublin; Petra Meier and John Holmes at School of Health and Related Research, Sheffield University, Sheffield, UK; Michael Cameron and William Cochrane at Waikato University, New Zealand; Sally Casswell and Taisia Huckle at the Social and Health Research (SHORE) and Whariki Research Centre at Massey University, New Zealand; Thaksaphon Thamarangsi and Orratai Waleewong, from the Centre for Alcohol Studies, International Health Policy Program (IHPP), Bangkok, Thailand; Ramon Florenzano from University of Desarrollo, Chile; Isidore Obot from University of Uyo, Nigeria; Hoang My Hanh from Health Strategy and Policy Institute (HSPI), Vietnam Ministry of Health; Vivek Benegal and Girish Rao, at NIMHANS, Bangalore, India; Siri Hettige, at the Department of Sociology, University of Colombo, Sri Lanka; and Latsamy Siengsounthone, at the National Institute of Public Health, Ministry of Health, Laos.

Teaching and mentoring

Room gave lectures at the Danish National Centre for Social Research, Copenhagen, and at a WHO Planning Meeting on field testing of International Classification of Disease codes and instructions for alcohol and drug disorders in Abu Dhabi, and in two graduate courses at the Melbourne School of Population and Global Health, University of Melbourne. He also co-taught a course on “Addiction policies, prevention and public health” (ASC5003), part of the Master of Addictive Behaviours course at Monash University. Livingston gave lectures on alcohol policy and epidemiology in two Masters Units in the Master of Addictive Behaviours course at Monash University and at the National Drug Research Institute’s Winter School. He co-supervises Kate Cantwell, a PhD student based at the Burnet Institute working on patterns of ambulance demand. Laslett gave a lecture and tutorials in the Master of Addictive Behaviours course at Monash University and provided continuing education to Oral Health Professionals in 2014/15. She commenced co-

supervision of Orratai Waleewong and supervised undergraduate sociology students from the University of Melbourne and Deakin University.

Room supervised or co-supervised 6 PhD students during the year, including four at various departments of the University of Melbourne (Wilkinson, Clark, Jayasekara, O'Brien) and one each at Monash (Vandenberg) and the University of Adelaide (Bowden). Wilkinson's is on the handling of alcohol issues in Victoria local governments; Clark's on alcohol treatment institutions in Victoria 1870-1940; Jayasekara's on what lifetime drinking history adds to conventional epidemiological studies of the relation of baseline alcohol consumption to morbidity and mortality; O'Brien's on legal aspects of Australian liquor licensing regulation; Vandenberg's on alcohol price elasticity differences in population subgroups; and Bowden's on general population attitudes and adherence to low-risk drinking guidelines. Clark and Jayasekara completed and were granted their PhDs during the year.

Membership and research advice to public health coalitions

CAPR staff (Livingston, Wilkinson, Room) are the representatives for Turning Point on the Alcohol Policy Coalition (APC), a coalition of Victoria-based public health-oriented agencies on alcohol policy matters. The APC has regularly made submissions to inquiries and hearings and issued press releases on alcohol policy matters, including liquor licensing and regulatory enforcement, and alcohol availability and community amenity. While CAPR staff have occasionally been spokesperson for the APC, CAPR's primary role has been in providing research evidence for positions and press releases, and ensuring that statements are evidence-based.

The National Alliance for Action on Alcohol (NAAA) is a national counterpart of the APC, but with a broader base (over 50 organisations as members). Representing Turning Point, Room serves on the Executive Committee and Livingston as a member. Again, CAPR's role is primarily to provide evidence and advice on NAAA position statements and to edit NAAA press releases and submissions to reflect the evidence base.

Livingston is a member of the Liquor Control Advisory Council, appointed to give advice to the Victorian Minister for Consumer Affairs, Gaming and Liquor Regulation. and chaired the sub-committee advising on the late night licensing freeze in inner Melbourne.

Room, Livingston and Wilkinson represent CAPR and Turning Point on the Alcohol Stakeholder Group of the Victorian Commission for Gambling and Liquor Regulation Stakeholder Group, a quarterly meeting that discusses state government initiatives around alcohol regulation.

During the year, Wilkinson, Livingston and Laslett all served on the co-ordinating committee of the Kettil Bruun Society for Social and Epidemiological Research on Alcohol, the main international scientific society in its field. In June 2015, Livingston finished his 4-year term on the 11-member elected committee. Wilkinson continues as a member, and Laslett was elected as a new CoCom member to a term which started June 2015.

Submissions and testimony to inquiries, hearings, workshops, official bodies

CAPR staff made submissions and gave consultations to a number of official bodies in the course of the year. Livingston gave evidence at one liquor licensing hearing in Victoria, outlining the research evidence relevant to the proposed new outlet and has acted as an advisor to a major project involving 12 councils in South-East Melbourne who are trying to develop more robust evidence for licensing decisions in their jurisdictions. Livingston, Laslett and Room made a submission to the Victorian Royal Commission into Family Violence and contributed to submissions (on behalf of the National Drug and Alcohol Research Centre) into the Victorian Crime Statistics Agency, the Competition Policy Review and the NSW Law and Safety Parliamentary Committee's inquiry into alcohol-related violence. Wilkinson co-ordinated the Alcohol Policy Coalitions submissions into the collection of wholesale alcohol sales data and to the Victorian Royal Commission into Family Violence. Room made a submission to the Competition Policy review suggesting that alcohol controls and availability should be exempted from competition policies on public health and safety grounds.

At the conclusion of the ARC Linkage grant led by MacLean, studying youth drinking culture in the Yarra and Hume LGAs, reports were submitted to the two municipalities on findings from the study. During the 2014/2015 year, a further report, with MacLean as lead author, on the policy implications for local governments of the study's findings, published by VicHealth .

Articles in professional and public media

In the course of the year, Livingston, Pennay and Room made invited contributions to *The Conversation*, an independent news and commentary site which uses content sourced from the academic and research community. MacLean and Livingston contributed a piece to the e-bulletin of *Of Substance*, the national professional magazine of the alcohol and other drug field. Room contributed to *Drink Tank*, FARE's web journal, and MacLean to *CiVic*, the magazine of the Municipal Association of Victoria.

APPENDICES

Appendix A. CAPR Publications and Presentations, July 2014-June2015 -- p. 17

Appendix B. Main points of CAPR research publications during the year -- p. 31

Appendix C. Profiles of current staff of CAPR -- p. 59

Appendix A

CAPR publications and presentations – July 2014 – June 2015

These papers, book chapters and books were published in final form:

Anderson, P., Rehm, J. & **Room, R.** (2015) Introduction to addictive behaviours. In: Anderson, P., Rehm, J. & Room, R., eds. *Impact of Addictive Substances and Behaviours on Individual and Societal Well-Being*, pp. 1-11. Oxford, etc.: Oxford University Press.

Anderson, P., Rehm, J. & **Room, R.**, eds. (2015) *The Impact of Addictive Substances and Behaviours on Individual and Societal Well-Being*. Oxford, etc.: Oxford University Press.

Callinan, S. (2014). Alcohol's harm to others: Quantifying a little or a lot of harm. *International Journal of Alcohol and Drug Research* 3(2):127-133.

<http://www.ijadr.org/index.php/ijadr/issue/view/16>

Callinan, S. (2015) How big is a self poured glass of wine for Australian drinkers? *Drug and Alcohol Review*, 34, 207-210.

Callinan, S., Livingston, M., Dietze, P. & Room, R. (2014) Heavy drinking occasions in Australia: Do context and beverage choice differ from low-risk drinking occasions? *Drug and Alcohol Review* 33(4):354-357.

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Livingston, M., Socio-economic differences in alcohol-related risk-taking behaviours. Presented at Robin Room's Festschrift, September 6, 2014

Callinan, S., Room, R., Livingston, M., & Jiang, H. (2014). *Who purchases low cost alcohol in Australia?* Paper presented at the Kettil Bruun Society Thematic Meeting on Alcohol Policy Research, Melbourne.

Jiang, H. & Livingston, M. (2014) The dynamic effects of changes in prices and affordability on alcohol consumption: an impulse response analysis. Presentation at the *Thematic Meeting of the Kettil Bruun Society - Alcohol Policy: Putting together a global evidence base*. Melbourne, Australia, September 2014.

Laslett, A.-M. (2014) Different perspectives on risks to children from parental heavy drinking and the relation of these risks to Australian policy responses. Presentation at the Thematic Meeting of the Kettil Bruun Society - *Alcohol Policy Research: Putting together a global evidence base*. Melbourne, Australia, September 2014.

Pennay, A., McNair, R. (2014) A model for lesbian, bisexual and queer specific influences on alcohol consumption disparities and implications for policy. Presentation at the *Thematic Meeting of the Kettil Bruun Society - Alcohol Policy: Putting together a global evidence base*. Melbourne, Australia, September 2014.

Riazi S & **MacLean S** 'Young adults' attitudes towards buying rounds of alcoholic drinks for friends; implications for harm reduction'. Kettil Bruun Society thematic meeting on alcohol policy, Melbourne, 8-11 September 2014.

Room, R. & Callinan, S. (2014) How alcohol policies and drinking cultures interact: concepts and evidence. Presentation at the Thematic Meeting of the Kettil Bruun Society - *Alcohol Policy Research: Putting together a global evidence base*. Melbourne, Australia, September 2014.

Browne, G. **Wilkinson, C.** & Boak, R. (2014) Presentation at the Public Health Association of Australia Annual Conference, Perth, 15-17 September. *Public Health at the local level: Comparative qualitative content analysis of alcohol and healthy eating initiatives among Victorian Councils*.

Wilkinson, C. (2014). *Prevention of alcohol problems at the local level: A survey of Municipal Public Health policies in Victorian*. Presentation at the Public Health Association of Australia Annual Conference, Perth, 15-17 September 2014.

MacLean, S. 'Young Melbournians talk about drinking and getting drunk' VicHealth Innovation Challenge: Alcohol - Discovery and Insights Forum, VicHealth, Parkville, 10 October 2014 - presentation

Jiang, H. Exploring alcohol expenditure and experience of financial difficulties in Australia, *Presenting at Turning Point Research Seminar, Melbourne*, 15-October 2014

Room, R., A new book on alcohol licensing: *Stemming the Tide of Alcohol: Liquor Licensing and the Public Interest*, Presentation at the Victorian Commission for Gambling and Liquor Regulation, Community Forum (Liquor), North Richmond, 22 October, 2014

Pennay, A. (2014) An examination of the prevalence, consumer profiles and patterns of use of energy drinks with and without alcohol in Australia. Presentation at the *1st International Energy Drinks Conference*. Geelong, Australia, November 2014.

Jiang, H. (2014) Exploring alcohol purchasing from off-license premises in Australia. Presentation at the APSAD Scientific Conference, 9-12 November, 2014, Adelaide.

Laslett, A.-M. (2014) Problems experienced by children of drinkers in Ireland, Australia, Vietnam and Thailand: Similar experiences or worlds apart. Presentation at the APSAD Scientific Conference, 9-12 November, 2014, Adelaide.

Livingston, M. (2014) Socio-economic status and alcohol consumption in Australia. Presentation at the APSAD Scientific Conference, 9-12 November, 2014, Adelaide.

Rankin, G. (2014) Experience of alcohol-related harms and attitudes towards alcohol policies: findings from the 2010 national drug strategy household survey. Presentation at the APSAD Scientific Conference, 9-12 November, 2014, Adelaide.

Room, R. (2014) A blind eye to the telescope: policy responses to public health analyses of alcohol availability issues in Australia since the 1970s. Presentation at the APSAD Scientific Conference, 9-12 November, 2014, Adelaide.

Wilkinson, C. (2014). *Planning Policies To Prevent Problems Related To Alcohol Outlets: Experience In Victorian Municipalities*. Presentation at the APSAD Scientific Conference, 9-12 November, 2014.

Laslett, A.-M. Alcohol & child maltreatment in Australia through the windows of child protection and a national survey. Presentation at the Victorian Substance Use Forum, Friday 21st November, 2014, Fitzroy.

Room, R., Alcohol: the most dangerous drug of all, Presented at the annual meeting of the Australasian College for Emergency Medicine, Melbourne, 8 December, 2014

Livingston, M. The longitudinal relationship between alcohol availability and family violence in Victoria. Presented at The Applied Research in Crime and Justice Conference, February 19, 2015: Sydney, Australia.

Room, R. & Laslett, A.-M. The hidden harm: Alcohol's impact on children and families. Presentation and Launch, NSW Parliament House, 24 February 2015.

Room, R. Alcohol policy: Where does Australia stand in the international community? Presented at the International Medicine in Addiction Conference, Melbourne, 20 March 2015.

Room, R. Changing global drug policies: what do we know about their effects -- and what about mothers and children? Invited presentation at the 2015 Conference on Perinatal Substance Use (SIG), Melbourne, 23 April 2015

Room, R. Defining and changing drinking cultures. Presented at the VicHealth Alcohol Cultural Change Taskforce meeting, Carlton, Vic., 5 May, 2015.

Jiang, H. Alcohol consumption and head and neck cancer in Australia: A time series analysis. Presented at the 12th Behavioural Research in Cancer Control Conference, Sydney, Australia, 12-15 May, 2015

Pennay, A., Petrie, D., Geard, N. & Jorm, A. (2015) 'Thinking of applying for a postdoctoral fellowship from the NHMRC or ARC? – How to plan for success.' Presentation at the *Melbourne School of Population and Global Health How-To Series*, University of Melbourne, Australia, June 2015.

Room, R. (2015) Alcohol and non-communicable diseases in global health. Lecture in University of Melbourne course, MSGPH, 18 June, 2015.

Room, R. & Laslett, A.-M. Adverse effects of drinking on Australian families: perspectives from population surveys and from agency caseloads. Presented at an ESRC Seminar, "Addressing domestic violence among substance misusers: advancing aetiologies and treatment approaches", University of Melbourne, Carlton, 29 June 2015

Appendix B. Main points of CAPR research publications during the year

Appendix A gives the listing of all publications from CAPR staff during the year, along with a listing of presentations during the year. In this Appendix, an indication of the contents and some of the main findings are given for most CAPR publications. The descriptions of the publications are grouped by theme, with some subheadings, within the four main streams of the Centre's work:

- (1) Alcohol policy impacts: What are the effects, intended and otherwise, of specific policies? Such effects are most clearly measurable in terms of what changes as policy changes, whether the change occurs at a given moment or more gradually as the policy is implemented over time.
- (2) Policy formation and regulatory processes: Included here are studies of patterns and trends in public opinion and discourse about alcohol problems and policies, and of the positions and interactions of actors in the alcohol "policy community". Also in this stream are studies concerning the crucial area of the implementation and enforcement of policies and regulations.
- (3) Population patterns and trends: To be effective, policymaking must be informed about and responsive to the empirical patterns of behaviour and problems in the population and its subgroups. CAPR thus engages in "social epidemiological" studies on issues and dimensions of relevance to alcohol policies.
- (4) Norms and culture in interaction with policies: Drinking is primarily a social behaviour, enacted in many settings and subcultures. The drinker is affected by the expectations and responses of others in the drinking group and setting, as well as of others in the wider society. Drinking groups and subcultures are influenced by and interact with alcohol policies; they may change to conform to a new policy, or they may seek ways to subvert or get around it. Studying such interactions and influences is an important part of alcohol policy research.

Alcohol policy impacts

Liquor licensing book. The book, *Stemming the Tide of Alcohol: Liquor Licensing and the Public Interest*,¹ was published by FARE, in association with the Melbourne School of Population and Global Health, in August 2014. The most complete textbook on Australian alcohol regulation, covering both policy

¹ Manton, E., Room, R., Giorgi, C. & Thorn, M., eds. *Stemming the Tide of Alcohol: Liquor Licensing and the Public Interest*. Canberra: FARE & Melbourne School of Population and Global Health, 2014.

impacts and policy formation and regulatory processes, it has found a place as a reference text for regulatory and enforcement bodies and relevant government departments in every Australian state and territory, and also at the local governmental level. It is already being cited in the international scholarly literature^{2,3} and in Australian policy review submissions (e.g., on the federal Competition Policy Review's Final Report⁴ and to the Victorian Royal Commission on Family Violence⁵).

Besides the role of CAPR staff in coediting the book, 11 of its 24 chapters were authored or co-authored by CAPR staff. These chapters are listed in Appendix A. The reader is referred to the CAPR Annual Report for 2013-2014 for a discussion of their contents, which will not be repeated here.

Other work on alcohol policy impacts. In work where Jiang has played the leading role, CAPR staff have continued to work on time-series analyses of the effects of alcohol policy measures in Australia on levels of alcohol consumption and on rates of harms from drinking. The issue of appropriate pricing of alcoholic beverages has been a recurrent policy issue in Australian politics at least since the Henry review of 2008-2009, and is an important policy consideration in public health approaches to reducing rates of harm from drinking. Jiang and Livingston have analysed the dynamic effects of changes in price and in affordability on alcohol consumption in Australia in the period 1974-2012.⁶ While there have been previous analyses of price and

² Wardle, J. Price-based promotions of alcohol: legislative consistencies and inconsistencies across the Australian retail, entertainment and media sectors. *International Journal of Drug Policy* 26(5):522-530, 2015.

³ Nicholls, J., Public health and alcohol licensing in the UK: challenges, opportunities, and implications for policy and practice. *Contemporary Drug Problems* 42(2):87-105, 2015.

⁴ FARE's submission to the Treasury on the Competition Policy Review Final Report. Canberra: FARE, May 2015.

<http://www.treasury.gov.au/~media/Treasury/Consultations%20and%20Reviews/Consultations/2015/Competition%20Policy%20Review%20Final%20Report/Submissions/PDF/FARE.ashx>

⁵ National Alliance for Action on Alcohol, Submission to the Royal Commission into Family Violence. Deakin, ACT: Public Health Association of Australia, 9 June, 2015.

http://www.actiononalcohol.org.au/downloads/submissions/2015/NAAA_submission_Domestic_Violence_Royal_Commission_June_2015.pdf

⁶ Jiang, H. and Livingston, M. The dynamic effects of changes in prices and affordability on alcohol consumption: an impulse response analysis, *Alcohol and Alcoholism* (Early view, 2015, DOI: <http://dx.doi.org/10.1093/alcalc/agg064>).

income elasticities for alcoholic beverages in Australia, with varying results, this is the first analysis which separates immediate from lagged effects, also taking into account cross-elasticity between alcoholic beverages. Using complex econometric estimating techniques on differenced time-series data, the analysis found that a 10% increase in alcohol price was associated with a 2% immediate drop in alcohol consumption, and an accumulated 6% drop over an 8-year period. The 6% cumulative change is slightly above the average of results from other studies in high-income countries. An increase in alcohol affordability of 10% had a smaller and mostly immediate effect –an overall 3% increase in consumption. Raising prices or taxes on alcoholic beverages will thus affect the level of consumption, while at the same time a tax increase will also increase government revenue, helping to offset social and health costs of drinking.

A second time-series analysis led by Jiang, with Livingston and Room as co-authors, considered the relation of alcohol to fatal traffic injuries as well as other fatal injuries, distinguishing between the period before and after the introduction of random breath-testing (RBT) and compulsory seat-belt use as policy interventions to reduce traffic injury rates in Australian states.⁷ Comparing the two periods, the analysis found a substantial reduction in the relation between per-capita alcohol consumption and traffic deaths in the later period. However, there was also a substantial reduction in the relationship for nontraffic fatal injuries in the later period, suggesting that the reduction in relationship for traffic fatalities may also have reflected “broader shifts in how alcohol is consumed in Australia, as well perhaps as in emergency responses to injuries”. Comparing results for the combined period in Australia with results in European and North American countries, the Australian results for the relation with traffic fatalities are broadly similar to those in North America, particularly among males, but for males is higher than the three geographic divisions of western Europe. The extent of relation of drinking with nontraffic fatalities in Australia is higher than in north America, and indeed than in western Europe, except for the Nordic countries in northern Europe.

A third differenced time-series analysis, where Jiang was joined by Michael Livingston and Elizabeth Manton as coauthors, looked in greater detail at effects of the introduction of random breath-testing (RBT) and also of lowering the minimum legal drinking age (MLDA) on rates of traffic fatalities in four

⁷ Jiang, H., Livingston, M. & Room, R. Alcohol consumption and fatal injuries in Australia before and after major traffic safety initiatives: A time series analysis, *Alcoholism: Clinical and Experimental Research* 39(1):175-183, 2015.

Australian states.⁸ RBT substantially reduced traffic fatalities in all four states, particularly among those aged 17-20 and 21-30 and particularly in New South Wales. In contrast, there was only a modest effect among those in their 30s. Lowering the MLDA produced increases in traffic fatalities that were significant among 17-39 year olds only in Queensland and Western Australia. Controlling for an overall downward trends in traffic fatalities and for the counter-influence of lowering the MLDA, the implementation of RBT had a huge effect in the four states.

Continuing his line of analysis of density of alcohol outlets with police reports of violence, Livingston was a co-author on an analysis of geographically-differentiated data from New Zealand.⁹ The study found a uniformly strong relationship between number of bars and nightclubs in a district, implying that each extra bar or nightclub would result in 5.28 extra violent events per year, and each extra licensed club in 0.84 extra events. However, results varied by geographic district for the off-licence and restaurant/café categories, perhaps reflecting that the location of the violent event is more likely to be spatially separated from an off-licence location than for an event linked to a bar or club. The authors point out that the differences in results by location are particularly pertinent now that local authorities in New Zealand have more control over licensing policies.

CAPR staff, led by Amy Pennay and joined by other Turning Point researchers, analysed the effects of prohibiting public drinking in three Melbourne-area local government areas.¹⁰ The multimethod study found that there was variation between municipalities on whether public drinking bans reduced the presence of drinking groups in public spaces, and no evidence that the laws reduced alcohol-related crime or harm. The laws did make residents feel safer, and from the point of view of residents and local shopkeepers improved the amenity of the area. However, the laws had negative impacts on

⁸ Jiang, H., Livingston, M. & Manton, E. The effects of random breath testing and lowering the minimum legal drinking age on traffic fatalities in Australian states, *Injury Prevention* 21(2): 77-83, 2015.

⁹ Cameron, M., Cochrane, W., **Livingston, M.**, Gordon, C. Alcohol outlet density and violence: A geographically-weighted regression approach. *Drug and Alcohol Review*, early view, 2015; doi: 10.1111/dar.12295.

¹⁰ **Pennay, A., Manton, E.,** Savic, M., **Livingston, M.**, Matthews, S., Lloyd, B. . *Prohibiting public drinking in an urban area: Determining the impacts on police, the community and marginalised groups*. Monograph No. 49. Canberra: National Drug Law Enforcement Fund, 2014.

<http://www.ndlerf.gov.au/sites/default/files/publication-documents/monographs/monograph49.pdf>

marginalised drinkers, who reported loss of social and cultural connections and losing contact with community health workers, who no longer knew where to find them. There was also evidence of displacement, where the drinking groups simply moved on to more covert spaces.

Sarah Callinan and Robin Room, with Paul Dietze from Burnet, edited a thematic section of *Alcohol and Alcoholism* with six articles dealing with price of and taxes on alcohol consumption from various perspectives – changes in prices following privatisation of a state store system, effects of price and taxes on consumption, and differential effects taxes by socioeconomic status. Five of the articles were revised from papers presented at the September 2014 international conference hosted by CAPR on alcohol policy research. The introductory editorial by the co-editors points to the finding in several of the papers that changes in alcohol taxes differentially affect amounts consumed by poorer drinkers more than the consumption of richer drinkers, but that this means that a increased tax produces more health benefits for poorer than for richer drinkers.¹¹

Room also published an invited introduction to a collection of five papers on alcohol control policies in low- and middle-income countries.¹² In addition to commenting on the papers, which included a Russian study which found that regional restrictions there on hours of alcohol sales, particularly in the late evening, had an effect in lowering alcohol consumption, Room noted the evidence from the papers of strong alcohol industry influence on policies in many developing countries, and the weakness of efforts at the international level to promote public health interests in reducing alcohol-related harm.

Two articles discussed in last year's annual report as in "early view" appeared in final form this year. One was a review article co-authored by Room which assembled the scattered information available on the impacts of tourism on drinking and alcohol policy in developing countries.¹³ The other, an article co-authored by Livingston, used multilevel modelling to study the

¹¹ **Callinan, S., Room, R. & Dietze, P.** Alcohol price policies as an instrument of health equity: differential effects of tax and minimum price measures. *Alcohol and Alcoholism*, early view, 2015, doi:10.2093/alcalc/agv061

¹² Room, R. Alcohol control policies in low- and middle-income countries: testing impacts and improving policymaking practice. *International Journal of Alcohol and Drug Research* 3(3):184-186, 2014.
<http://ijadr.org/index.php/ijadr/article/view/181/279>

¹³ Cisneros Örnberg, J. & **Room, R.** Impacts of tourism on drinking and alcohol policy in low- and middle-income countries: a selective thematic review. *Contemporary Drug Problems* 41(2):145-169, 2014.

relationship between density and alcohol use in the previous month among teenage Victorians, finding that outlet density, particularly of off-sale outlets, was associated with increased risk of alcohol consumption for 12-14 year olds, but not for 15-17 year olds.¹⁴

Policy formation and regulatory processes

As noted above, the August 2014 book on liquor licensing in Australia, *Stemming the Tide of Alcohol: Liquor Licensing and the Public Interest* (footnote 3), included substantial contributions by CAPR staff on policy formation and regulatory processes.

Livingston discussed the challenge of linking research to policy concerning limiting alcohol outlet density, in a paper which drew on the growing record of research, to which he has substantially contributed, on the effects of licensing density on rates of problems from drinking.¹⁵ In the face of “powerful vested interests and political inertia”, Livingston notes that policy changes in this area will be difficult to accomplish. He points out that application of the research has been limited by a general lack of available data on key variables, such as on the level of alcohol sales by outlet, rather than simply the number of licenses, and by the paucity of research differentiating effects across different neighbourhood types. When the results show a smooth curve of increased risk with greater density, it also becomes difficult to decide on what particular limit to set. Livingston suggests that New Zealand’s shift towards local control of alcohol policies may be a fruitful way forward.

In a book on “policies, processes and pressures” concerning addictions, a chapter by Room and Cisneros Örnberg discusses the governance of addictive commodities at the international level, both globally and in the European Union.¹⁶ The paper points out that, in contrast to strong drug regulation internationally, and moves towards greater international regulation of tobacco and of pharmaceuticals, international control of alcohol remains a “blank

¹⁴ Rowland, B., Toumbourou, J., Satyen, L., **Livingston, M.**, Williams, J. The relationship between the density of alcohol sales outlets and parental supply of alcohol to adolescents. *Addictive Behaviors* 39(12):1898-1903, 2014.

¹⁵ Livingston, M. Alcohol outlet density: the challenge of linking research findings to policy. *Australasian Epidemiologist* 21(2): 22-24, 2014.

¹⁶ **Room, R.** & Cisneros Örnberg, J. (2014) The governance of addictions at the international level. In: Anderson, P., Bühringer, G. & Colom, J., eds. *Reframing Addictions: Policies, Processes and Pressures*, pp. 46-58. Barcelona: The ALICE RAP project. http://www.alicerap.eu/resources/documents/doc_download/216-alice-rap-e-book-reframing-addictions-policies-processes-and-pressures.html

slate”. The paper discusses current plans and targets within the World Health Organization and the European Union, noting that the resources devoted to public health and welfare aspects of alcohol issues at the international level remain very scanty.

In a review chapter by Room and co-authors on “addictive substances and socioeconomic development” for a volume Room also coedited, on the impact of addictive substances on wellbeing, the complex relations between socioeconomic development and substance use and problems are considered, with alcohol often used as a case in point.¹⁷ Very poor societies have many more abstainers, and conversely per capita alcohol consumption tends to rise as societies become less poor. From the perspective of global public health, the authors argue, we are at a crossroads. The strength of market forces in pushing for ever more open markets is redolent of the past. But a substantial global movement is building momentum round restriction of tobacco cigarette marketing and promotion, and alcohol and tobacco are included as main risk factors in the new United Nations effort to counter noncommunicable diseases.

A commentary on alcohol policy issues in China was published in one of the *Lancet* journals with Jason Jiang as the lead author, and with Room and an eminent scholar in China as co-authors.¹⁸ The article points to the dramatic increase in alcohol consumption in China, almost tripling in a 33-year period, but with problems from drinking still largely confined to males. Government monopolisation of the alcohol market ended in the 1980s, but very few controls on the market have been established. A current anti-corruption campaign has reduced sales of cognac and other luxury products, but does not seem to have affected overall drinking. The paper suggests the establishment of an agency charged with developing public health-oriented market controls, and of a national monitoring and surveillance system.

¹⁷ **Room, R.**, Sankaran, S., Schmidt, L.A., Mäkelä, P. & Rehm, J. Addictive substances and socioeconomic development. In: Anderson, P., Rehm, J. & **Room, R.**, eds. *Impact of Addictive Substances and Behaviours on Individual and Societal Well-Being*, pp. 189-213. Oxford, etc.: Oxford University Press, 2015.

¹⁸ **Jiang, H., Room, R.** and Hao, W. Alcohol and related health issues in China: Action needed, *Lancet: Global Health* 3(4):e190-e191, 2015.
[http://www.thelancet.com/pdfs/journals/langlo/PIIS2214-109X\(15\)70017-3.pdf](http://www.thelancet.com/pdfs/journals/langlo/PIIS2214-109X(15)70017-3.pdf)

A revision of Room's substantial article on "alcohol" was published in the 6th edition of the *Oxford Textbook of Global Health*.¹⁹ The article includes a discussion of the history of alcohol as an issue in public health, focusing on the elements in rise since the 1970s of the "new public health" approach to alcohol issues, reviews the evidence on strategies of prevention and control and their effectiveness, and discusses factors in building integrated alcohol policies at community, societal and global levels.

Five articles with historical, conceptual and qualitative emphases concerning the characterisation of and societal responses to alcohol problems were published in an issue of *Contemporary Drug Problems* in 2015, with an introductory essay by Pennay and Room.²⁰ The papers were revised from papers presented at the alcohol policy research meeting hosted by CAPR in September 2014. Pennay and Room note that two of the papers, from the UK and Ireland, are critical of the policy-making processes there. A paper by d'Abbs raises the issue of drinkers' resistance to public health-oriented alcohol policies, while Bacchi's paper is critical of the way that alcohol problems are defined and understood. Hart's paper emphasises the complexity of factors beyond alcohol that are involved in the higher rates of health harm experienced by poorer and more marginalised drinkers. Pennay and Room comment that all the papers in one way or another focus on the "new public health" paradigm of alcohol policy making, each in its own way complicating a simple one-directional paradigm with market controls affecting patterns of consumption which in turn affect the rates of adverse consequences.

Population patterns and trends.

Harm from others' drinking. The year saw the publication of two reports which reflected the major work on the second phase commissioned by FARE of work on alcohol's harm to others in Australia. The first report published, *The Hidden Harm: Alcohol's Impact on Children and Families*, was launched for FARE in Sydney by Rosie Batty, the 2015 Australian of the Year.²¹ The report drew on a variety of data sources and analytical strategies for analyses of

¹⁹ Room, R. Alcohol. In: Detels, R. et al., eds., *Oxford Textbook of Global Public Health*, 6th ed., vol. 3, pp. 35-47. Oxford, etc.: Oxford University Press, 2015.

²⁰ Pennay, A. & Room, R. Critiquing the alcohol policy process. *Contemporary Drug Problems* 42(2): 83-86, 2015.

²¹ Laslett, A.-M., Mugavin, J., Jiang, H., Manton, E., Callinan, S., MacLean, S. & Room, R. *The Hidden Harm: Alcohol's Impact on Children and Families*. Canberra: Foundation for Alcohol Research & Education, February 2015.

adverse impacts of drinking on others in the family, adults and children. Reanalysing CAPR's 2008 national survey on alcohol's harm to others, *Hidden Harm* finds that 17% of the adult respondents had been adversely affected by the drinking of a family member or intimate partner in the last year, with 6% reporting that they had been harmed "a lot". Women were more likely to report such harm (21%) than men (12%). Among those with responsibility for children, 17% reported that a child of theirs had been harmed at least a little by an adult's drinking in the last year, and this rose to 22% if positive responses to any of five questions on specific harmful or risky drinking-related situations were included. Where a respondent with responsibility for a child had been adversely affected, a child was more likely also to be adversely affected, and vice-versa; in these families, altogether in 29% someone, adult or child, had been adversely affected in the last year.

Concerning harms to children, the report also included longitudinal data on whether the harm recurred during 2011, when respondents were reinterviewed. Among those with children harmed by another's drinking in 2008, 35% reported recurrence of harm to a child in 2011, while harm to a child in 2011 had occurred in 11% of families reporting no such harm in 2008. In a logistic regression, harm in 2008 was thus predictive of harm in 2011, as were the presence of heavy drinkers in the household or among relatives in 2008, and an increase in such heavy drinkers in 2011. These results suggest strongly that the presence of heavy drinkers in a household or family is a risk factor for harm to children connected to their drinking.

In a qualitative follow-up study, 10 respondents who had reported "a lot" of harm to a child and 10 who had reported "a little" harm were interviewed qualitatively about the nature and impact of the harms, the social and cultural context, and what supports the family may have received in dealing with the harm. Where "a lot" of harm had been indicated, the harm was indeed quite severe, and often the relationship between the respondent and the drinker was put in question; most support in the situation came from other family members, rather than health or social services.

The Hidden Harm also reported on alcohol-related cases involving families or children dealt with by social, health and police services. A major finding was that data from these official "register" sources on harms from others' drinking is very spotty. In any year, police apparently deal with more domestic violence cases involving drinking than any other service for which there are numbers seen concerning harm from another's drinking: family

<http://www.fare.org.au/wp-content/uploads/2015/02/01-ALCOHOLS-IMPACT-ON-CHILDREN-AND-FAMILIES-web.pdf>

members coming about another's drinking to specialised AOD treatment; Child Protection services concerning a child endangered by a carer's drinking; or telephone or online help lines concerning problems with another's drinking. A substudy involving interviews with key informants concerning service systems for children and families affected by another's drinking underlined the general failure of service systems to coordinate and to deal adequately with the problems. The informants made suggestions for further research and for cross-sector collaboration. The report concluded with a public health-oriented framework for planning prevention and interventions, and suggestions for further research.

The Hidden Harm served as an empirical underpinning for FARE's National Framework for Action to prevent Alcohol-Related Family Violence,²² a substantial and continuing effort by FARE to put the issue of alcohol-related family violence on the policy agenda for effective governmental and community preventive and remedial actions.

A second CAPR report, *Beyond the Drinker*, concerning the longitudinal patterns in alcohol's harm to others revealed by a follow-up interview in 2011 of 1108 of the 2646 respondents in the first study in 2008, was published by FARE in March, 2015.²³ A new element in the longitudinal analysis was the substantial attention paid to the influence of the presence of heavy drinkers in the respondent's life – in the household, in the family, among friends – as a factor in predicting harm, and continuing harm, from others' drinking. There was a strong inverse relation between the number of such heavy drinkers and the respondent's age, and that the respondents were a little older in 2011 than in 2008 is seen as part of the explanation of a decline between 2008 and 2011 in the proportion of respondents reporting harm from others' drinking. There was both substantial continuity and substantial turnover in experiencing harm in 2008 and in 2011: about half of the 29% reporting harm from drinkers among their housemates, family or friends in 2008 also reported in it in 2011.

²² FARE, *National Framework for Action to Prevent Alcohol-Related Family Violence*. Canberra: Foundation for Alcohol Research and Education, June 2015. <http://www.fare.org.au/wp-content/uploads/research/FARE-National-framework-to-prevent-alcohol-related-family-violence-web.pdf>

²³ Laslett, A.-M., Callinan, S., Mugavin, J., Jiang, H., Livingston, M., Room, R. (2015) *Beyond the Drinker: Longitudinal Patterns in Alcohol's Harm to Others*. Canberra: Foundation for Alcohol Research & Education. <http://www.fare.org.au/wp-content/uploads/2015/03/02-BEYOND-THE-DRINKER-FULL-REPORT-web.pdf>

Just under 10% of the sample reported being harmed in 2011, when they had not been harmed in 2008. For harms from strangers' drinking, there was slightly more continuity between 2008 and 2011 (20.7% at both times, 16.1% only in 2008, 11.9% only in 2011).

Beyond the Drinker examines the prediction of change and stasis in experiencing harm from others' drinking where the drinker is a housemate, family member or friend (known drinker) and for strangers' drinking, and looks at predictors of change in several different frames, for instance looking separately at incidence and remission. In terms of overall models predicting harm in 2011, in the case both of known drinkers and of strangers harm in 2008 is a strong predictor of harm in 2011. The respondent's own heavy drinking predicts harm in 2011 from strangers' drinking, as do increases from 2008 to 2011 in heavy drinkers among relatives and friends. Harm from a known drinker in 2008 is predicted both by having heavy drinkers among household members and relatives in 2008, and an increase between 2008 and 2011 in such heavy drinkers. Heavy drinking among co-workers in 2008 also predicts harm from a known drinker in 2011. All in all, moving in heavy-drinking circles predicts experiencing harms from another's drinking, suggesting that policies which reduce rates of heavy drinking are very likely to reduce rates of harms from others' drinking.

Other papers based on the Australian studies appeared during the year. A pair of papers gave an overview of the Australian work and results,²⁴ and discussed the study's methodology and measurement challenges.²⁵ A couple of methodological papers, by Callinan and Manton et al., are discussed among the Methods papers below. A paper led by Jiang described the characteristics of carers: among those harmed by a family member's or friend's drinking in the previous year, what differentiated those who as a result had cared for the drinker or for others from those who had not?²⁶ Caregivers were more likely

²⁴ **Laslett, A.-M., Wilkinson, C., Room, R., Livingston, M., Ferris, J., Mugavin, J.** (2014) Alcohol's harm to others: an overview of Australian work and results so far. *Australasian Epidemiologist* 21(2):10-11.

²⁵ **Wilkinson, C., Laslett, A.-M., Ferris, J., Livingston, M., Mugavin, J., Room, R. & Callinan, S.** (2014) The range and magnitude of alcohol's harm to others study: study methodology and measurement challenges. *Australasian Epidemiologist* 21(2):12-16.

²⁶ Jiang, H., Callinan, S., Laslett, A.-M., and Room, R. Correlates of caring for the drinkers and others among those harmed by another's drinking, *Drug and Alcohol Review* 34(2): 162-169, 2014.

than non-caregivers to be female and younger, more likely to be a household member or partner or ex-partner of the drinker, and more likely to score lower on an index of wellbeing.

In the meantime, there was intensive work at CAPR during the year on getting the cross-national analyses of alcohol's harm to others supported by a grant from NHMRC and funding from the World Health Organization under way. For this purpose, CAPR has assembled an archive of data from the population surveys carried out with funding from WHO, Thai Health and national sources in seven low- and middle-income countries, using a questionnaire and study protocol based on CAPR's Australian study. Combining the seven survey datasets with the Australian and New Zealand population surveys, a data archive and a codebook for it has been prepared, and cross-national analyses are now under way. An initial WHO publication will include a chapter on a specific topic from each participating country, along with a first descriptive cross-national analysis. Further such analyses will be carried out collaboratively and published as journal articles. CAPR is also a party to a grant proposal to the US National Institutes of Health for a continuation of the international GENACIS study with a new emphasis on harm from other's drinking. It is anticipated that this may pick up the support for further cross-national analysis when the NHMRC grant is finished.

Determinants of alcohol consumption and expenditure patterns. CAPR publications have begun to appear from the Australian Consumption and Purchasing study, the Australian arm of the International Alcohol Control study. This study, with funding initially from the Australian national preventive Health Agency and presently from Healthway, has collected survey data on purchasing and consumption of alcohol by type of location, type of beverage, quantities, and price – the first Australian population survey to include both purchasing and consumption data, and with specification by location of purchase and of consumption. Also included in the Australian survey is information on the most recent heavy-drinking occasion.

A paper led by Sarah Callinan, the ACAP study director, and three co-authors compares location and drink choice for the most recent heavy drinking occasion, among those with such occasions, with their usual, lower-risk occasions (where they were usually drinking less than 5 drinks).²⁷ On a risky heavy-drinking occasion, respondents were more likely to drink spirits and less

²⁷ **Callinan, S., Livingston, M., Dietze, P. & Room, R.** (2014) Heavy drinking occasions in Australia: Do context and beverage choice differ from low-risk drinking occasions? *Drug and Alcohol Review* 33(4):354-357.

likely to drink bottled wine, and more likely to drink at someone else's home or at a pub or nightclub, and less likely to be drinking in a restaurant, than on a usual lower-risk occasion.

Another paper led by Callinan, with three other CAPR authors, investigated who drinks low-priced alcohol in Australia – a question with policy significance, given the policy debates about minimum pricing and tax reform for alcoholic beverages.²⁸ The analysis focused on off-premise alcohol purchases and consumption, since low-price alcohol is primarily sold for off-premise consumption. Harmful drinkers (6+ drinks daily for men, 5+ for women) are more likely than those drinking less to purchase low-price alcohol, whereas there is less variation by the drinker's income in purchasing low-price alcohol. There was some variation in relationships by where the low-price cutoff was set, a cutoff at \$1 per standard drink seemed to target most effectively the harmful drinkers. For younger males (16-44), those who purchased more than 20% of their alcohol at low cost averaged 6.9 drinks per day, while those who did not averaged 3.4. When the abstention rate of the lower-income groups is taken into account, a minimum price of \$1 per drink would not be very income-regressive, while a minimum price policy is likely to be at least moderately effective in targeting heavy drinkers with the aim of reducing their consumption.

Other insights into drink choices and the influence of price on high-risk drinking were offered in a CAPR report published by FARE on young Victorian adults' alcohol product choices.²⁹ The study, by Sarah Callinan and Sarah MacLean, combined analysis of survey data with material from qualitative interviews. Analysis of data from the 2009 Victorian Youth Alcohol and Drug Survey found that while the average participant selected 3.18 drink types that they "usually" consumed, high-risk drinkers selected an average of 3.51. Spirits and RTDs were more popular than other drink types for drinkers at all levels, while cask wine and home brew beer were popular only among those who intended to get drunk. Qualitative interviews showed that those who intend to get drunk make their drink choices based on drinks which offer high alcohol content for a relatively low cost. Given the difference in price between on- and

²⁸ Callinan, S., Room, R., Livingston, M. & Jiang, H. Who purchases low cost alcohol in Australia? *Alcohol and Alcoholism*, early view, 2015. DOI: <http://dx.doi.org/10.1093/alcalc/agv066>

²⁹ **Callinan, S. and MacLean, S.** *'Just because it's really, really cheap': An examination of Victorian young adults' alcohol product choices.* Canberra: Foundation for Alcohol Research and Education, 2014. <http://www.fare.org.au/wp-content/uploads/research/Callinan-and-MacLean-2014-Just-because-its-really-really-cheap-FINAL.pdf>

off-premise drinks, many participants choose to drink cheaper alcohol at home before heading out to pubs or clubs. Spirits, and particularly shots, were the drink of choice when intending to get drunk at a pub or club.

An analysis led by Jiang, with Livingston and Room as co-authors, used data from the Australian Household Expenditure Survey to examine the relationship between alcohol expenditure levels and the experience of financial difficulties.³⁰ Households which spent a higher percentage of total expenditure on alcohol were over 1.3 times more likely to report experiencing financial difficulties than households spending a much lower percentage, although households spending nothing on alcohol were also more likely to report financial difficulties. Expenditure on alcohol makes up a significant proportion of household expenditure, particularly for younger adults and lower income alcohol consumers, and is strongly associated with financial problems for the household.

Looking at influences on drinking from the other end, a paper by Vicki White and others, including Livingston and Room, charted trends in alcohol advertising expenditure in Australia between 1997 and 2011.³¹ Data were available for only some advertising channels: free-to-air television, newspapers, magazines, radio, outdoors, cinema, direct mail and online display banners. Expenditure on different channels showed different trends, with spending in newspapers rising until 2007 and on television generally dropping. Overall, the monitored spending peaked in 2007. Spending by alcohol retailers increased over time, and by the mid-2000s exceeded spending by producers for any beverage type. The shifts in spending between traditional media channels, and the fact that “below-the-line” advertising spending in non-traditional media is not monitored, argue for increased auditing and monitoring across different media, and the need for adequate controls on alcohol advertising in all media channels.

Pennay led a multi-authored analysis of a telephone survey of Australian adults on energy drink (ED) use, including whether or not the EDs were

³⁰ Jiang, H., Livingston, M., & Room, R. How financial difficulties interplay with expenditures on alcohol: Australian experience. *Journal of Public Health*, early view, 2015. DOI: 10.1007/s10389-015-0679-2.

³¹ White, V., Faulkner, A., Coomber, K., Azar, D., **Room, R., Livingston, M.** & Chikritzhs, T. How has alcohol advertising in traditional media in Australia changed? Trends in advertising expenditure 1997 to 2011, *Drug and Alcohol Review*, early view, 2015. DOI: 10.1111/dar.12286.

combined with alcohol.³² ED use in the last 3 months was reported by only a minority (13.4%) of respondents, and a minority of them (4.6%) reported combining ED and alcohol use. Those combining ED and alcohol use were considerably more likely to be male and young, and to live in an urban area. They were also more likely to smoke cigarettes, to binge drink, and to take substantial risks as a gambler.

Trends in drinking patterns and abstinence. Comparing survey data on respondents aged 14 -17 in the National Drug Strategy Household Surveys for 2001 and 2010, Livingston found that the overall rate of abstention from drinking had risen from 32.9% to 50.2%.³³ Further analysis showed that, although rates of abstention varied between subgroups, the increase in abstention did not vary significantly between subgroups. Noting that teenage drinking had declined sharply also in the U.S., the U.K., and Nordic countries in the past decade, Livingston speculated that the change might reflect increasing social concern about alcohol, as part of the “long waves” of consumption which have been noted to occur in countries which, like Australia, have a strong history of temperance movements.

An editorial by Pennay, Livingston and MacLean, “Young people are drinking less: it is time to find out why”, documented the reductions in teenage drinking which can be seen in Australian surveys from about 2005 onward, with some suggestion also that the reductions are now persisting into young adulthood.³⁴ The editorial suggested several factors which might be involved in the change, including the adoption of secondary supply laws discouraging adult provision of alcohol to teenagers, government investment in prevention programs, the rise of social media and smart phones. However, the authors present these as hypotheses with mixed evidence, and conclude that more research needs to be undertaken on what is driving or shaping reductions in youth drinking so as to enable maintenance of the trends.

³² Pennay, A., Cheetham, A., Droste, N., Miller, P., Lloyd, B., Pennay, D., Dowling, N., Jackson, A. & Lubman, D. An examination of the prevalence, consumer profiles and patterns of energy drink use, with and without alcohol, in Australia. *Alcoholism: Clinical and Experimental Research*, early view, 2015, doi: 10.1111/acer.12764

³³ Livingston, M. Trends in non-drinking among Australian adolescents. *Addiction*, 109(6):922-929, 2014.

³⁴ Pennay, A., Livingston, M. & MacLean, S. Young people are drinking less: it's time to find out why. *Drug and Alcohol Review* 34(2):115-188, 2015.

The idea of the “long waves” of consumption was raised again by Livingston and Room in a commentary on two Nordic papers which tested Skog’s theory of the “collectivity of drinking cultures”, that the drinking of those who drank at different levels tended to change in concert, and proportionately to their initial level.³⁵ The authors point out that shifts between abstinence and drinking needed to be considered in developments of Skog’s theory, and that the shift in adolescent drinking in Australia did not seem to be matched in the adult population.

Livingston participated as a co-author in an analysis of declining trends in alcohol consumption in national samples of Swedish 17-18 year olds from 2004 to 2012.³⁶ Whereas previous analysis of a Stockholm sample had suggested a “polarisation” where consumption fell among light drinkers but rose among heavier drinkers, the patterns in the national data were of a similar fall in consumption across the distribution on amount of drinking. At least within age group sampled, the authors find, Skog’s theory of the collectivity of drinking seems to be applicable.

Room participated as a coauthor in an age-period-cohort (APC) analysis of alcohol consumption in the Swedish adult population.³⁷ A decrease in prevalence and volume of drinking in successive cohorts after them seems to have contributed to the recent downward trend in overall consumption in Sweden. Livingston has undertaken an APC analysis of Australian alcohol consumption, presented at the Kettil Bruun Society meeting in June, 2015, which when published will contribute to the growing international literature of such analyses for alcohol.

Studies of heavy drinking events. CAPR staff have participated in a series of analyses which focus on heavy drinking events – events such as the “big night out” on a weekend evening or the end-of-school fiesta of “Schoolies”. Pennay’s participation in the POINTED study, led by Peter Miller, resulted in her coauthorship of a paper describing levels of intoxication in five Australian

³⁵ Livingston, M. & Room, R. Understanding how population-level alcohol consumption changes. *Addiction* 109(9):1456-1458, 2014.

³⁶ Raninen, J., **Livingston, M.**, Leifman, H. (2014) Declining trends in alcohol consumption among Swedish youth – does the theory of collectivity of drinking cultures apply? *Alcohol and Alcoholism*. 49(6): 681-686.

³⁷ Kraus, L., Eriksson Tinghög, M., Lindell, A., Pabst, A., Piontek, D. & **Room, R.** Age, period and cohort effects on time trends in alcohol consumption in the Swedish adult population 1979-2011. *Alcohol & Alcoholism* 50(3):319-327, 2015.

nightlife districts as the weekday evening wears on.³⁸ Patrons entering or leaving or walking between nightlife venues were approached and asked to agree to an interview and breathalyser reading. In each district, the measured blood alcohol concentration (BAC) rose as it got later in the evening. Male BACs averaged slightly higher than female, and older (25+) patrons higher than younger, though only later in the evening. The increased intoxication late at night illustrated that “current regulatory frameworks permit substantial levels of heavy intoxication”.

Another analysis of the POINTED data, for which Pennay was the lead author, examined the association between alcohol intoxication and stimulant use – energy drinks or illicit stimulants – on a night out in an entertainment district.³⁹ Six percent of the drinkers had consumed an illicit stimulant during the current evening, and 21% had consumed an energy drink. While both groups had higher BAC levels than other drinkers, particularly early in the evening, multivariate analysis suggests that this may result from the stimulant users being demographically and behaviourally different from alcohol-only consumers. However, stimulant users were more likely to engage in prolonged heavy drinking sessions and a range of risk-taking behaviours on a night out, and thus are a suitable target group for public health interventions.

Pennay also participated in a portal study of “Schoolies”, that is, a study where young people attending Schoolies week in two Victorian resort towns were recruited from those queuing or attending licensed venues or at other Schoolies “hotspots”, and interviewed and breathalysed.⁴⁰ Males were considerably higher than females in reported number of drinks and self-rated intoxication, but did not have higher average BACs. Drinking peaked at 8-9pm, and BACs later in the evening, but the average BAC reached only .054% (at 11pm). About one in 6 participants reported that they had experienced an

³⁸ Miller, P., **Pennay, A.**, Droste, N., Butler, E., Jenkinson, R., Hyder, S., Quinn, B., Chikritzhs, T., Tomsen, S., Wadds, P., Jones, S.C., Palmer, D., Barrie, L., Lam, T., Gilmore, W. & Lubman, D.I. A comparative study of breath-alcohol concentrations in Australian night-time entertainment districts. *Drug and Alcohol Review* 33(4): 338-345, 2014.

³⁹ **Pennay, A.**, Miller, P., Busija, L., Jenkinson, R., Droste, N., Quinn, B., Jones, S. & Lubman, D. ‘Wide Awake Drunkenness’? Investigating the association between alcohol intoxication and stimulant use in the night-time economy. *Addiction* 110(2):356-365, 2015.

⁴⁰ Lubman, D., Droste, N., **Pennay, A.**, Hyder, S. & Miller, P. High rates of alcohol consumption and related harm at Schoolies Week: a portal study. *Australian and New Zealand Journal of Public Health* 38(6):536- 541, 2014.

alcohol-related injury or accident during Schoolies week. The authors conclude that their data suggests a need for preventative as well as reactive strategies to reduce harms during Schoolies week.

Three CAPR staff joined Paul Dietze in an analysis of the last heavy drinking occasion reported by a telephone sample of young risky drinkers (10+ drinks for males, 7+ for females in a session within the previous year).⁴¹ The occasion had occurred within the last month for 60% of those interviewed. Most of the occasions (62%) started in a private home, with pubs (about one-third) or nightclubs (also about one-third) as the most common second and third locations. Altogether, 40% of consumption was in private homes, and 42% in pubs or nightclubs. Respondents reported spending an average of \$79 on alcohol on the occasion, over two-thirds on their own drinks. On average, drinks they bought for others (\$23) were outnumbered by drinks others bought for them (\$37). The mean consumption of the respondent on the night was 13 drinks. The authors comment that the study highlights the importance of drinking in private locations as a target for intervention efforts, and the relevance of such measures a minimum pricing.

Sarah MacLean and David Moore conducted a qualitative study of young adults' big night out, interviewing both inner-city and outer-suburb drinkers aged 18-24.⁴² The inner city was viewed by interviewees from both locations as a space of enhanced excitement, and those in the outer suburbs felt that the alternatives in their neighbourhood were unappealing. While those from both locations shared feelings of fear and worry about the inner-city visit, the fears for safety were heightened for those from the outer suburbs. Getting home was more difficult and risky. The authors consider a number of possible remedies which to reduce the riskiness of the big night out.

Joined by Grazyna Zajdow, Sarah MacLean also analysed young adults' accounts of their own drinking and how they manage it.⁴³ The authors conclude that rather than seeking determined drunkenness, many young adults aim for a state of tipsiness where control is not abandoned. However,

⁴¹ Dietze, P., **Livingston, M., Callinan, S. & Room, R.** The big night out: what happens on the most recent heavy drinking occasion amongst young Victorian risky drinkers? *Drug and Alcohol Review* 33(4):346-353, 2014.

⁴² **MacLean, S. & Moore, D.** (2014) 'Hyped up': assemblages of alcohol, excitement and violence for outer-suburban young adults in the inner-city at night. *International Journal of Drug Policy*, 25(3):378-385.

⁴³ Zajdow, G. & **MacLean, S.** 'I just drink for that tipsy stage': Young adults and embodied management of alcohol use. *Contemporary Drug Problems* 41(4):522-535, 2014.

this level of intoxication is very difficult to get right: few participants counted standard drinks, and most spoke of attending to bodily signs that they had had enough and should not drink more. This strategy was ineffective for a small proportion of interviewees, who never felt too drunk. The partial nature of intoxicated self-control led young adults to arrange to be in settings where external restraints to drinking would operate.

Drawing on the results of her dissertation research, Pennay explored the relationship between pleasure and harm experienced by “party drug” users in connection with episodes of drug use.⁴⁴ The pleasures and harms are discussed in terms of four domains: of euphoria and feeling low; of cognitive enhancement and impairment; of fun versus financial loss; and of the enhancement and loss of friendships. She suggests it is unhelpful to discuss the harms of drug use without acknowledging also the pleasure, since they tend to be experienced together. Pennay suggests it is unhelpful to discuss the harms of drug use without acknowledging also the pleasure, since they tend to be experienced together.

Population-level relations of alcohol consumption and harms. Using data from the National Drug Strategy Household Survey, Livingston investigated whether rates of alcohol-related risk-taking behaviours in Australia vary by socioeconomic status.⁴⁵ He found that socially advantaged Australians, whether advantage is measured by neighbourhood status or household income, reported higher rates of hazardous behaviour for a given level of drinking. Pointing out that these findings contrast sharply with the social gradient in alcohol-related mortality, Livingston notes that these findings suggest that factors beyond differences in risk-taking behaviours must also be involved in the mortality differences.

Amy Pennay was a coauthor of a paper analysing survey responses of Deakin University students who had used energy drinks along with alcohol during the previous 3 months.⁴⁶ A factor analysis of reported reasons for using

⁴⁴ Pennay, A. “What goes up must go down”: An exploration of the relationship between drug-related pleasure and harm experienced by a sample of regular ‘party drug’ users. *Drugs: Education, Prevention and Policy*, 2015, early view. doi:10.3109/09687637.2015.1016398

⁴⁵ Livingston, M. Socio-economic differences in alcohol-related risk-taking behaviours. *Drug and Alcohol Review* 33(6):588-595, 2014.

⁴⁶ Droste, N., Tonner, L., Zinkiewicz, L., **Pennay, A.**, Lubman, D. & Miller, P. (2014) Combined alcohol and energy drink use: Motivations as predictors of consumption patterns, risk of alcohol dependence and experience of injury and

energy drinks along with drinking found four factors: hedonistic (e.g., “to increase the pleasure of intoxication”), social, for energy or endurance, and for reduction of intoxication. Hedonistic motivations were significantly associated with heavier drinking and heavier energy drink use during drinking episodes, and with having experienced physical, verbal or sexual aggression in the preceding 3 months. Both hedonistic and intoxication-reduction reasons were associated with experiencing alcohol-related injury or accidents.

Pennay was also a co-author of a systematic review of studies of whether adding energy drinks to alcohol consumption alters immediate physiological, psychological, cognitive and psychomotor outcomes, and whether it affects hazardous drinking practices and risk-taking behaviour.⁴⁷ The 19 studies included in the review found increased odds of outcomes reflecting stimulation and decreased odds of sedation. A majority of studies, but not all, found that those using energy drinks with their alcohol report more hazardous alcohol consumption and risk-taking behaviour.

Room was a co-author of two studies examining the relation of lifetime drinking, retrospectively reported for decades of life in the Melbourne Collaborative Cohort Study, to overall mortality⁴⁸ and to the incidence of head and neck cancers⁴⁹ in a 16-year follow-up period. Those who were consistent heavy drinkers and those who were heavy drinkers, but later quit drinking, had significantly higher total mortality than lifetime abstainers, while those with a consistent light-to-moderate drinking pattern had lower total mortality. Lifetime alcohol intake was a slightly better predictor of contracting head or neck cancer than alcohol intake at the time of enrolment in the study.

aggression. *Alcoholism: Clinical and Experimental Research* 38(7):2087-2095, 2014.

⁴⁷ Peacock, A., **Pennay, A.**, Droste, N., Bruno, R. & Lubman, D. ‘High’ risk? A systematic review of the acute outcomes of mixing alcohol with energy drinks. *Addiction* 109(10):1612-1633, 2014.

⁴⁸ Jayasekara, H., McInnis, R.J., Hodge, A., Hopper, J., Giles, G., **Room, R.** & English, D.R. Alcohol consumption for different periods in life, intake pattern over time and all-cause mortality. *Journal of Public Health*, early view Oct 15, 2014. doi:10.1093/pubmed/fdu082

⁴⁹ Jayasekara, H., MacInnis, R.J., Hodge, A.M., Hopper, J.L., Giles, G.G., **Room, R.** & English, D.R. Lifetime alcohol consumption and upper aero-digestive tract cancer risk in the Melbourne Collaborative Cohort Study. *Cancer Causes & Control* 26:297-301, 2015.

Conceptual and methodological articles. In an early report from the Alcohol Consumption and Purchasing (ACAP) study, the Australian arm of the International Alcohol Control Study, Livingston and Callinan compared reported amounts of drinking from the graduated frequency method of questioning used in the National Drug Strategy Household Survey (NDSHS) with the within-location and beverage-specific method used in ACAP.⁵⁰ The ACAP measurement methods account for 86% of the alcohol recorded as sold in Australia, whereas the NDSHS method account for 55%. Compared with sales statistics, ACAP underreported on-premise wine and off-premise beer, but slightly overreported on-premise beer and off-premise spirits. Using ACAP as the criterion, underestimates in the NDSHS were more marked for young males and middle-aged females, and for those who engaged in little or no heavy episodic drinking. The authors caution that the higher coverage rate of ACAP does not necessarily mean that it is more accurate.

Again using the ACAP study, Callinan explored the question of how big a self-poured glass of wine is for Australian drinkers,⁵¹ since this is likely to vary more widely than on-premise drinks or off-premise beer from cans or bottles. The 639 respondents who stated they purchase and drink bottled wine were asked “How many glasses do you get to a bottle?” as well as as whether they drank from a “small glass” or a “large glass”. The modal number of drinks per bottle for those drinking from a small glass was 6, and for those drinking from a large glass 4. Even the small glass amount is about 1½ times the size of the Australian standard drink.

Room was a co-author on a paper concerning measurement issues which had arisen in estimating alcohol’s part in the burden of disease in Australia.⁵² For purposes of assigning alcohol-attributable fractions for various categories of disease, the distributions of the population on amount and pattern of drinking need to be established from population surveys, and there are problems of under- and misreporting in these. The paper also discusses the issue of “capping” of consumption levels that are considered to be unrealistic, but which may in fact be what is being consumed.

⁵⁰ Livingston, M. & Callinan, S. Underreporting in alcohol surveys: whose drinking is underestimated? *Journal Studies on Alcohol and Drugs*. 76(1), 158-167, 2015.

⁵¹ Callinan, S. How big is a self poured glass of wine for Australian drinkers? *Drug and Alcohol Review* 34(2): 207-210, 2015.

⁵² Ogeil, R.P., **Room, R.**, Matthews, S. & Lloyd, B. Alcohol and burden of disease in Australia: The challenge in assessing consumption. *Australian and New Zealand Journal of Public Health* 39(2):121-123, 2015.

Room was also a co-author on a commentary concerning better methods to collect self-reported alcohol and other drug use from Indigenous Australians. The paper sets out an agenda for an NHMRC-funded project on such measurements led by Kate Conigrave.⁵³ The paper identifies problems in previous surveys of this population with sampling, survey administration, and questionnaire content, and puts forward suggestions for improvement and for validation.

Two quite different methodological papers considered issues in the studying and measuring alcohol's harm to others. The 2008 Australian population survey had asked about degrees of harm in terms of "a little" or "a lot", while psychometric approaches prefer to ask in terms of scale, for instance ranging from 1 to 10. In the 2011 follow-up study, the question was asked both ways, concerning harm from the drinker known to the respondent whose drinking had been most harmful, and concerning harm from strangers' drinking. Callinan's methodological paper compares results with the two approaches.⁵⁴ For the respondents, being harmed by a known drinker "a little" was equivalent to a mean score of 3.8, and for "a lot" was 8.2. For being harmed by strangers' drinking, "a little" was equivalent to 3.0, "a lot" to 8.3. Callinan concludes that there does seem to be rough parity between the measures, but suggests that using the 1-to-10 score is advisable where possible.

Manton led a team of four CAPR co-authors in a paper discussing the use of qualitative research to complement survey findings on alcohol's harm to others.⁵⁵ Among other topics, this paper also addressed the issue of the meaningfulness of the distinction between "a little" and "a lot" of harm, reinterviewing 10 respondents who had reported that their child had been harmed "a lot" by an adult's drinking, and 10 who had said "a little". There was a clear difference, as respondents told their stories, in the degree of harm involved. The paper also argues that qualitative data can suggest questions for

⁵³ Lee, K.S.K., Chikritzhs, T., Wilkes, E., Gray, D., **Room, R.** & Conigrave, K.M. Better methods to collect self-reported alcohol and other drug use data from Aboriginal and Torres Strait Islander Australians, *Drug & Alcohol Review* 33(5):466-472, 2014.

⁵⁴ Callinan, S. How big is a self poured glass of wine for Australian drinkers? *Drug and Alcohol Review* 34(3): 207-210, 2015.

⁵⁵ Manton, E., MacLean, S., Laslett, A.-M. and Room, R. Alcohol's harm to others: using qualitative research to complement survey findings. *International Journal of Alcohol and Drug Research* 3(2):143-148, 2014.

<http://www.ijadr.org/index.php/ijadr/article/viewFile/178/264>

inclusion in future surveys, and contextualises the survey findings. More than can easily be captured in survey questions, the material from qualitative interviews embeds problematic alcohol use in families, relationships and social contexts.

Room also published four conceptual analyses concerning the addiction concept – their history and their application in different cultures.⁵⁶ He was the lead author in a historical paper which distinguishes the terms used concerning addiction from the concept. Drawing on historical entries in the Oxford English Dictionary, the paper argues that, although the word “addiction” was used and available in English in the 18th century, it was not used when the concept of addiction became established, initially for alcohol, in English-speaking cultures in the early 19th century, because the point of the concept was a distinction and separation from a habit, which is what “addiction” then meant. Only towards the end of the 19th century did the modern meaning of the word, where it is not just a description but an explanation of behaviour, come into force. The extension of the concept and term to gambling and other habitual behaviours in recent decades has carried the word as well as the concept into several European languages, some of which previously lacked a common term for the concept.

A paper on portrayals of the alcoholic in American alcoholism movies between the 1930s and the early 1960s discussed the difficulties that the film-makers had in portraying what was then a novel framing of “alcoholism” -- a mysterious disorder which took over the drinker’s life and actions.⁵⁷ The alcoholic had to be distinguished from two existing screen stereotypes: the comic drunk, as in Laurel and Hardy, Charlie Chaplin, or W.C. Fields, and the doomed drunkard in the temperance melodrama. Movie critics of the time often had difficulty comprehending or accepting the new framing, and most of the films were not commercial successes. It is suggested that some the film-makers’ difficulties were inherent to the addiction concept.

In a third article, Room was a co-author on an empirical content analysis comparing the usage of the addiction concept and terminology in U.S. and in

⁵⁶ **Room, R.**, Hellman, M. & Stenius, K. Addiction: The dance between concept and terms, *International Journal of Alcohol and Drug Research* 4(1):27-35. 2015. <file:///H:/work/Addiction%20-%20the%20dance%20-%20IJADR%202015%20final.pdf>

⁵⁷ Room, R. Portraying the alcoholic: Images of intoxication and addiction in American alcoholism movies, 1931-1962. *Substance Use & Misuse* 50(4):503-507, 2015.

Finnish newspapers.⁵⁸ The paper finds that belief and hope are crucial story elements in the U.S. stories, associated with the U.S. emphasis on mutual-help group formation and local empowerment. The individual is assigned obligations and can be morally condemned. In the Finnish journalistic prose, there seems to be an inherent belief that the agenda-setting in itself will propel the question into the institutionalised welfare state solution machinery. The occurrence of a story resolution was customary in the US stories, whereas the Finnish stories were typically left pending.

Room also contributed an introductory article to a journal issue of articles on the use of an addiction concept and terminology in policy discussions in Nordic countries concerning tobacco and drugs.⁵⁹ He remarks on the growing adoption of addiction conceptualisations in Nordic societies in recent years, but notes that the papers show that the concept and related terms were often used in policy arguments in earlier decades, though they were not naturalised and indeed were sometimes misunderstood in the societies. Distinguishing between symbolic and pragmatic rationality, he concludes that the addiction concept proved useful in arguments for both kinds of rationality.

Norms and culture in interaction with policies.

A VicHealth report from the project led by Sarah MacLean on young people's drinking in inner- and outer-urban municipalities described the study's findings on drinking patterns, going out at night, and drinking-related harms, including problems with late-night transport and getting home.⁶⁰ The report then turned to the potential for local government policy responses, in terms of licensing and planning and their enforcement, information provision and transport improvements. The report is potentially a model for future

⁵⁸Hellman, M. & **Room, R.** What's the story on addiction? Popular myths in the USA and Finland. *Critical Public Health*, 2014, early view. DOI: 10.1080/09581596.2014.926308.

⁵⁹ Room, R. "Hard-to-define abstract concepts": addiction terminology and the social handling of problematic substance use in Nordic societies. *Nordic Studies on Alcohol & Drugs* 31(5-6):435-442, 2014.

<http://www.degruyter.com/view/j/nsad.2014.31.issue-5-6/issue-files/nsad.2014.31.issue-5-6.xml>

⁶⁰ **MacLean, S., Wilkinson, C., Moore, D., Matthews, S., O'Rourke, S., Butterworth, I. & Room, R.** *Young adults and alcohol: developing local government policy responses in inner- and outer-urban settings*. Melbourne: Victorian Health Promotion Foundation, 2014. <https://www.vichealth.vic.gov.au/media-and-resources/publications/young-adults-and-alcohol>

translation work bringing research results on cultural practices to bear in the policy arena.

Drawing on earlier work on bans on public drinking in Victorian municipalities, Amy Pennay and colleagues published a paper on “geographies of exclusion”, considering contests over the use of public urban spaces.⁶¹ Observations in three municipalities in the Melbourne area found that gentrification was a potent source of contests over use of public space, with busy shopping precincts as the most common “hot spots”. The acceptance of public drinking was clearly class-specific, with drinking on the footpath outside licensed venues seen as acceptable drinking, in contrast to street drinking by disadvantaged groups. A variety of regulatory and enforcement strategies are described for displacing and excluding undesirable street drinkers. Council workers were often uncomfortable about the discrimination, and searched, usually unsuccessfully, for acceptable solution. The paper concludes with suggestions for ways in which local governments might encourage more tolerance of diversity.

Other papers considered cultural patterns in drinking at a more intimate level. MacLean’s paper on “alcohol and the constitution of friendship for young adults” considers the role of drinking together in producing and affirming intimacy, and in demonstrating trust.⁶² Friends, particularly women friends, often negotiate agreements on what they will do and not do on a night out together, with friendship seeming to offer some insurance against anticipated irrationality. On the other hand, the paper notes that friendship often provides a strong impetus for alcohol use, and may account for the persistence of heavy episodic alcohol use. Regulations can be used to discourage customs among friends such as buying rounds and behaviours like egging a friend on to become extremely intoxicated. But the interventions should be designed to work with rather than against the imperatives of friendship, or they risk adding to transgressive pleasures.

A paper with Room and Callinan among the coauthors considered the influences on heavy drinkers both to drink more and to drink less, in terms of

⁶¹ Pennay, A., Manton, E. & Savic, M. Geographies of exclusion: Street drinking, gentrification and contests over public space. *International Journal of Drug Policy* 26(6):1084-1093, 2014.

⁶² MacLean, S. Alcohol and the constitution of friendship for young adults. *Sociology*, 2105, early view. doi:10.1177/0038038514557913

the sources and prevalence of the influences.⁶³ Risky drinkers who may be considered to be in a social world of heavy drinking are more likely than other drinkers to have been pressed to drink less by family members and friends and even workmates, but are also much more likely than other drinkers to have been pressed on all three fronts to drink more. The paper argues that official efforts to “change the drinking culture”, as was promoted by the previous Victorian government, need to recognise the influences at the level of individual interactions and of social worlds of heavy drinking, and how such influences may support or oppose any official campaign, as well as taking into account the actions of commercial interests.

The original version of this paper precipitated an invitation from VicHealth to do some conceptual work for them on the various meanings which “changing the drinking culture” could take on, and to review the work which they had commissioned with government support on changing Victoria’s drinking culture. The result of this work so far has been two reports submitted to VicHealth. One is primarily concerned with considering the general social science literature on subcultures, social worlds, and other concepts and terms for cultural entities below the level of the whole culture, and reviewing the literature on typologies of the cultural position of alcohol and studies of drinking norms and practices at cultural and subcultural levels.⁶⁴ The second reviewed the products of the work VicHealth commissioned on changing the drinking culture, and suggested promising directions of future work, which it was suggested be primarily directed at heavy drinking subcultures and social worlds rather than at the culture as a whole.⁶⁵

Several of the year’s papers considered culture and alcohol issues in a more international frame. At the most general level, Room’s chapter on cultural aspects of addiction and responses to addiction,⁶⁶ written for a

⁶³ **Room, R., Callinan, S. & Dietze, P.** Influences on the drinking of heavier drinkers: interactional realities in seeking to “change drinking cultures”, *Drug and Alcohol Review*, 2015, early view, DOI: 10.1111/dar.12283

⁶⁴ Savic, M., **Room, R., Mugavin, J. & Pennay, A.** *Defining and changing ‘drinking cultures’: a review of key concepts and literature*. Report to VicHealth, 13 April, 2015.

⁶⁵ **Room, R., Mugavin, J., Livingston, M., Pennay, A. & Savic, M.** *Measuring drinking cultures and their changes: reflections on VicHealth’s Alcohol Cultural Change Program, and suggestions on research design and measurement*. Report to VicHealth, 24 April, 2015.

⁶⁶ Room, R. Cultural aspects of and responses to addiction. In: El-Guebaly, N., Carrà, G. & Galanter, M., eds., *Textbook of Addiction Treatment: International*

textbook on addiction treatment, laid out for readers four traditional social patternings of psychoactive substance use: medicinal use, customary regular use, and intermittent use, with modern societies commonly recognising a fourth pattern of addicted use. The chapter emphasises that cultural norms govern not only use and behaviour while using but also responses to use and problems from use, and also discusses intercultural influences and diffusion, both across boundaries and within multicultural societies.

A paper on which Room was a co-author considered why societies accept a higher risk for alcohol than for other risks.⁶⁷ The paper grew out of work on the absolute risks of different patterns of drinking, work first initiated as analysis underlying the 2009 Australian low-risk drinking guidelines. Drawing on new calculations for six European societies, it is argued that drinking more than two Australian standard drinks a day over an adult lifetime carries a risk of dying from alcohol-attributable causes of more than one in 100, while general standards for acceptable risk seem to be about 1 in 1000 for voluntary behaviours and 1 in a million for involuntary. Alcohol carries both risks for the drinker, presumably voluntary, and for others, often involuntary. Historical, cultural and interest-group factors are discussed which have resulted in the unusual situation of tolerance for such high risk for a behaviour, but the article concludes that questions still remain about why alcohol is treated so exceptionally.

A paper co-authored by Room on the impacts of tourism on drinking and alcohol policy in low- and middle-income countries drew together what could be found on the subject scattered in the literature.⁶⁸ The review finds that drinking – indeed, drinking more than at home – fits well within the context of tourism, and heavy drinking by tourists has a substantial impact on host societies, and particularly on young people working in the tourist sector. Tourist industry interests have often successfully argued for weakening alcohol control policies, resulting in wider general availability of alcohol, and provision for tourists is often an entry point in a society for the global alcohol industry.

Perspectives, pp. 107-114. Milan, Heidelberg, New York, Dordrecht & London: Springer, 2015.

⁶⁷ Rehm, J., Lachenmeier, D. & **Room, R.** Why does society accept a higher risk for alcohol than for other voluntary or involuntary risks? *BMC Medicine* 12:189, 2014. <http://link.springer.com/article/10.1186%2Fs12916-014-0189-z>

⁶⁸ Cisneros Örnberg, J. & **Room, R.** Impacts of tourism on drinking and alcohol policy in low- and middle-income countries: a selective thematic review. *Contemporary Drug Problems* 41(2):145-169, 2014.

The paper suggests areas for research, as well as policy agendas at the international level.

Another paper in an international frame considered the differences in alcohol research output among western European countries and the U.S., in relation to the overall output of scientific papers in each country⁶⁹. Adapting Harry Levine's concept of "temperance cultures" -- countries with a major history of temperance movements -- the paper finds that the output of alcohol research papers in the early 2000s is strongly related to the degree to which the country has a history as a "temperance culture" stretching back more than a century before.

⁶⁹ Savic, M. & Room, R. Differences in alcohol-related research publication output between countries: a manifestation of societal concern. *European Addiction Research*, 20:319-323, 2014.

Appendix C

Profiles of current staff of the Centre for Alcohol Policy Research

Robin Room

Background

Professor Robin Room was a researcher at the Alcohol Research Group, a US national alcohol research centre in Berkeley, California from 1963 to 1991, and became the Scientific Director from 1977 to 1991. He then became the Vice-President for Research at the Addiction Research Foundation of Ontario, Canada, from 1991 to 1998. In 1999 he was appointed professor and founding director of the Centre for Social Research on Alcohol and Drugs at Stockholm University.

In March 2006, Robin became Professor of Social Alcohol Research at the Melbourne School of Population and Global Health of the University of Melbourne and the Director of the Centre for Alcohol Policy Research (CAPR) at Turning Point Alcohol and Drug Centre. In July 2015, he became a professor at La Trobe University, to which the Centre for Alcohol Policy Research is moving.

Professor Room received the 2012 Prime Minister's Award for Excellence and Outstanding Contribution to Drug and Alcohol Endeavours.

Interests

- Social, cultural & epidemiological studies of alcohol, drugs and gambling behaviour and problems
- Studies of social responses to alcohol and drug problems and effects of policy changes

Anne-Marie Laslett

Background

Dr Anne-Marie Laslett has worked in the area of alcohol and drug epidemiology and in the Centre for Alcohol and Policy Research (CAPR) at Turning Point for the past 19 years. In 2014 she was awarded a prestigious NHMRC Early Career Fellowship and appointed as a senior research fellow at the National Drug Research Institute, Curtin University. She currently directs the Range and Magnitude of Alcohol's Harm to Others (AHTO) project at CAPR and is a co-investigator and technical advisor to the World Health Organization/Thai Health international collaborative research project on Alcohol's Harm to Others. This project is progressing well in Thailand, Laos PDR, Vietnam, Nigeria, Chile, India and Sri Lanka, with data from all countries archived at CAPR. Highlights of the 2014/15 year for Anne-Marie and colleagues include the publication of two major reports "Beyond the Drinker: a longitudinal study of alcohol's harm to others" and "The Hidden harm: Alcohol's impact on children and families".

Interests

- Population alcohol and drug use and alcohol and drug-related harm
- Oral health
- Multicultural health
- Child & family health
- Consumer satisfaction

- Influence of setting, socioeconomic and other risk factors on drug related use and harm
- Policy & program responses to harm

Michael Livingston

Background

Dr Michael Livingston joined the Centre for Alcohol Policy Research (CAPR) in 2006 and since then he has predominantly been involved in research examining the relationship between physical availability of alcohol (particularly the density of alcohol outlets) and alcohol-related harms, using a range of spatial and longitudinal statistical techniques. This work made up the bulk of Michael's PhD, awarded in July 2012, which was funded by a scholarship provided by the Sidney Myer Fund and the Australian Rechabite Foundation. Michael's recent work has focussed on trends in alcohol consumption and related harm and on their drivers, with a particular emphasis on the recent declines in youth drinking.

Dr Livingston has published widely in the field and regularly presents his work to academic, government and community audiences. He has a national media profile on alcohol issues, appearing on television (e.g. The 7:30 Report, Nine News), radio (e.g. Radio National, 774, 3AW) and in the print media (e.g. The Age, The Herald Sun, The Australian etc). His dissertation work was awarded a Commendation in the Victoria Premier's Award for Health and Medical Research.

Interests

- Trends in alcohol consumption and harm
- Liquor licensing
- Individual and environmental determinants of alcohol-related harm
- Quantitative methodologies

Sarah MacLean

Background

Dr. Sarah MacLean's doctoral work focused on inhalant use. She co-authored two reviews of interventions into petrol sniffing in Indigenous communities, including *Volatile Substance Misuse: a Review of Interventions*, published in 2008 as part of the National Drug Strategy Monograph series. Her PhD, completed in 2007, was a study of social meanings of inhalant use in Melbourne, Australia. She then moved to Turning Point Alcohol and Drug Centre and worked on a range of alcohol and other drug research projects, in 2011 co-editing a special edition of *Substance Use & Misuse*, looking at inhalant use internationally.

In 2009 Dr MacLean was awarded an ARC linkage postdoctoral fellowship, through the School of Population and Global Health (SP&GH), University of Melbourne, to explore qualitative and quantitative measures of alcohol consumption and associated harms among young people within an urban and a peri-urban (outer- government area) in Victoria. This project involves partnerships with Yarra and Hume City Councils, the Victorian Department of Health, VicHealth, the National Drug Research Institute and the Municipal Association of Victoria. She is now Senior Research Fellow in Social Health Determinants at Onemda VicHealth Koori Health Unit at the SP&GH, but remains a part-time employee with CAPR.

Interests

- Young people's substance use
- Inhalants and alcohol
- Health services research
- Drug & alcohol policy development
- Qualitative research methods

Amy Pennay

Background

Dr Amy Pennay is a Research Fellow at the Melbourne School of Population and Global Health, University of Melbourne, and Centre for Alcohol Policy Research, Turning Point. Dr Pennay has a background in Criminology and was awarded her PhD in 2012. Her PhD examined the social, cultural and economic contexts of alcohol and stimulant use, with a focus on risk environments. In 2013 she was awarded a four year early career fellowship from the NHMRC to explore risky drinking in the night-time economy.

Dr Pennay has worked in alcohol and drug research for more than ten years. She has a keen interest in research methodology, with her PhD utilising an ethnographic, naturalistic study design. Her work at CAPR has included a study of the diffusion and effects of “liquor bans” – prohibitions on drinking on the street or in parks – in Victoria and more widely, an examination of the interplay between hazardous drinking and mental health among same-sex attracted women, and the patterns of consumption and social contexts of alcohol and stimulant use among young patrons of the night-time economy.

Interests

- Drinking cultures
- Social, cultural and economic contexts of alcohol and drug use
- Public perceptions and understandings of drug use; stigma
- Alcohol and drug policy
- Research methodology

Janette Mugavin

Background

Ms Janette Mugavin has worked at Turning Point since 2006, currently splitting her time between the Treatment and Systems program and the Centre for Alcohol Policy Research. In the Treatment and Systems program, Janette has worked on a range of projects from an examination of client pathways into, through and post engagement with alcohol and other drug (AOD) services to revising the Victorian Prison Opioid Substitution Therapy Program Guidelines.

As part of the CAPR team, Janette has worked on the suite of Alcohol's Harm to Others studies. Janette recently commenced a PhD with the University of Melbourne. Her PhD project will focus on adults who report drinking at low risk levels.

Sarah Callinan

Background

Dr Sarah Callinan is study director of the Australian arm of the International Alcohol Control Study, funded by the Australian Preventive Health Agency. She is also working on an international database compiling research on alcohol's harm to others. She completed her PhD in Educational Psychology, a psychometric investigation into Learning Disabilities, in 2011. Since beginning at Turning Point on completion of her PhD, Sarah has been working on quantitative studies on drinking before and during pregnancy, on the correlates of alcoholic beverage choice, and on attitudes to drinking, as well as working on the study of Alcohol's Harm to Others.

Interests

- Survey methodology
- Australian attitudes towards alcohol
- Alcohol related harm to both the drinker and others
- Pregnancy and drinking

Elizabeth Manton

Background

Dr Elizabeth Manton completed her PhD in Public Health (in the field of medical anthropology) in 2012, using qualitative research methodologies. She was the holder of an NHMRC Public Health scholarship. Her Bachelor of Arts was obtained in history and sociology. She accepted an appointment at the Melbourne office of the National Drug Research Institute, Curtin University, but retained a part-time appointment at CAPR until the end of 2014.

Interests

- Social, cultural and historical context of preventable lifestyle behaviours, such as drinking alcohol, and the social determinants of health approach
- Social, cultural and historical influences on alcohol policy development
- Alcohol's harm to others
- Qualitative methodologies

Heng (Jason) Jiang

Background

Dr Heng (Jason) Jiang joined the Centre for Alcohol Policy Research at Turning Point Alcohol and Drug Centre in 2012. He is mainly involved in research estimating alcohol-related harm to others, alcohol consumption and consequences, and International Alcohol Control Studies. During 2008 - 2011, as a researcher at Deakin University, Jason undertook applied economics in several projects focusing on property and urban economics, examining issues such as the housing price bubble and volatility, investment in construction and economic development and risk allocation in public-private partnership construction projects. Jason was awarded his PhD in Economics from Deakin University in 2013. Now, he has become an alcohol policy and public health researcher with a multidiscipline background.

Interests

- Econometric estimation of alcohol policy and health economics
- Alcohol consumption and household expenditures
- Intervention analysis on alcohol control, consumption and consequences
- Alcohol's harm to others

Claire Wilkinson

Background

Ms Claire Wilkinson joined the team at the Centre for Alcohol Policy Research in 2007. Since then she has completed her Honours degree (psychology) examining the relationship between Personality Disorders and Alcohol Use Disorders. She is currently completing her PhD (population health) at the University of Melbourne on local policies for issuing licences. She completed a Graduate Diploma in Addiction Research in 2013 (Dresden International University, Germany) which included a three month research visit to the Centre for Addiction, Governance and Control at the University of Helsinki, Finland.

Claire's interests include Liquor Laws (current and historical approaches), enforcement of liquor laws and the role of municipal governments and the state regulatory agency in alcohol policy. Claire uses both qualitative and quantitative methodologies.

Interests

- History of the regulatory regime governing alcohol use and licensing premises.
- Enforcement systems and practice.
- Regulatory and licensing systems in low and middle income countries.

Georgia Rankin

Background

Georgia Rankin joined the Centre for Alcohol Policy Research in early 2014. Georgia graduated with a Bachelor of Biomedical Science and went on to complete a Masters of Public Health. She is primarily involved with the World Health Organization/ThaiHealth Collaborative Study of Alcohol's Harm to Others, where she is compiling and analysing the data. She was also involved in a content analysis studying the impact of the online program Hello Sunday Mornings, which encourages people to abstain from alcohol and blog about their experience.

Interests

- Alcohol's harm to others
- The risk factors and social determinants of health that underpin non-communicative diseases.
- Women's health

Orratai Waleewong

Background

Orratai Waleewong is a PhD student at Melbourne School of Population and Global Health, the University of Melbourne under the supervision of Prof Robin Room and Dr. Anne-Marie Laslett

(started the 1st year since December 2014) of CAPR. Her thesis area is Alcohol's Harm to Others particularly in the context of low and middle income countries.

In Thailand, Orratai is a researcher at the Health Promotion Research Center (HPR), International Health Policy Program (IHPP), Ministry of Public Health. She graduated as a pharmacist in 2003, and got her Master of Science in Pharmacy Administration from Mahidol University in 2008. She has been working in alcohol policy arena since 2009 and involved in Thailand-Global Health on Non-communicable Diseases Group since 2012. She is now taking part as the global coordinator of the WHO/ThaiHealth international research project on Alcohol Harm to Others running in 7 countries.

Interests

- Alcohol policy
- Health Promotion Policy
- Social determinants of health

