Smart Start – Preloading and a Safe Night Out

Special Report: Mackay Preloading

By

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This paper aims to report the occurrence of preloading within a Mackay sample; collected in early February of 2015. The report is based on a sub-study of ‘Smart Start - A Preloading Project’ which ran predominantly in the Brisbane CBD between August, 2014 to late February, 2015. Three sub-studies have been completed from the Smart Start project, including Gold Coast, Mackay, and Melbourne Cup. Generally, the aim of the Smart Start project is to assess:

- Who is preloading
- Where they are preloading
- Type of preloading
- How much they are preloading
- What motivates people to preload
- Participants’ experiences of negative physical, psychological, and social consequences when preloading
- Participants’ perception of level of intoxication (i.e., Blood Alcohol Content – BAC reading) after preloading; and
- Levels of intoxication after preloading via recorded BAC readings

An important first step in understanding the phenomenon of preloading is to operationalise it. For the purposes of the Smart Start project, preloading was defined as drinking, taking drugs (illicit), or mixing energy drinks with alcohol (MEDA) before heading out to licensed entertainment venues (i.e., pubs, bars, or clubs) in the CBD of a city. Further to this, it is important to note that eating out at restaurants and frequenting a local bar or similar establishment were included amongst the places where people could have preloaded.

Preloading is suspected to be an activity that is engaged in nation-wide (Foster & Ferguson, 2014). In consideration of this, it was deemed important to expand the scope of our Smart Start project to include other popular night-time entertainment districts that are known for their high levels of alcohol consumption and related negative consequences. Reviewing preloading practices in other cities and towns is also important for the discovery of idiosyncratic location driven findings that may result in improved alcohol-related interventions.
In Queensland, Mackay CBD is recognised as a regional town that caters to mining and agricultural industries. These factors alone have been linked to greater consumption of alcohol and other drugs (AIHW, 2014). In view of this, the town implemented a City Safe initiative in May, 2008 which aims to address alcohol-related violence in the Centre’s nightclub precinct (Working Safe in Rural and Remote Australia Project, 2015). The town identifies that its nightclub precinct, located primarily in Victoria Street, is a common target for shift workers and locals to participate in respite and refreshment (Working Safe in Rural and Remote Australia Project, 2015). In recognition of Mackay’s focus on reducing alcohol related harm in the CBD, particularly its nightclub precinct where approximately 2000 people come on Friday and Saturday nights, it was considered important to investigate preloading practices. Results retrieved from the sub-study can help identify areas for change and improvement to the town’s already active City Safe initiative which aims at reducing alcohol fueled violence and harm.

A LOOK AT THE PRELOADING LITERATURE

Reviews into the occurrence of preloading have only recently come about within the last two decades (Foster & Ferguson, 2014). Its investigation has been incited by the growing recognition that alcohol and other substances are readily consumed before entering licenced entertainment establishments (Forsyth, 2010; Hughes et al., 2011). Further to this, the practice of preloading is now commonly understood to be culturally endemic within the youth of today (Foster & Ferguson, 2014). So far, studies have aimed to understand this phenomenon in order to reduce the harm that this practice can have on society. For instance, Hughes et al., (2008) found that preloaders drank more than non-preloading peers which resulted in higher rates of assault, injury, and arrest. However, the sample in this study used retrospective reports on their preloading. Therefore, critical investigations into the substances consumed, motivations, and occurrence rates of preloading is important for future global and local prevention tasks. A brief snapshot of the current preloading climate will follow.

- Preloading was found to be associated with higher levels of overall drinking during the night (Paschall & Saltz, 2007).
- Bar attendees who had preloaded had higher levels of intoxication compared to non-preloading bar attendees, and the
number of those who had preloaded was 70% (Glindemann et al., 2006).

- In a UK study of four European Cities, BAC increased to a median concentration of 0.13 for females and 0.17 for males drinking greater than 5 hours. Additionally, the majority of their sample (N = 838) had preloaded (Hughes et al., 2011).
- 64% to 74% of college students in the US preload with alcohol and drugs (DeJong, DeRicco, & Schneider, 2010).
- Black-outs are found to be common amongst preloader (LaBrie et al., 2011).
- Typical number of drinks on a preloading occasion $M = 7.43$ (Borsari et al., 2007). There are different reports from other studies e.g., $M = 3.91$ (Pedersen & La Brie, 2008).
- DeJong et al. (2010) found that distilled spirits were the most popular as they masked smell and were easily concealed/mixed.
- Forsyth (2010) revealed motivations for preloading which focused on socialising, inducing courage to dance and approach people, and to save money.

These studies reveal the high prevalence rates of preloading, the common substances consumed, and the motivations behind the practice. To date, however, there has been no systematic study of preloading which has captured accurate rates of intoxication before people have entered licensed entertainment venues. Until now all preloading estimates have been acquired either by retrospective survey completion when not in the entertainment precincts or incidentally as part of a cross sectional survey of people at different times of the night. Without a reliable estimation of the degree, type and effects of preloading it is not possible to plan for public health interventions or emergency services utilisation. The Smart Start study has addressed this problem by investigating preloading as it occurs and in the environment in which it displays itself.

WHERE AND HOW

Data was collected on the 12th (Friday) and 13th (Saturday) December 2014. Location for collection was based primarily from Wood and Victoria Street in the CBD. Two researchers collected data in the presence of 2 police officers each night. A more detailed outline of the methodology for the research is contained in the larger report for the whole Smart Start programme.
WHAT WAS FOUND: MACKAY

The Sample

The sample comprised 151 participants. They ranged from 17 to 55 years old, with a mean age of 28.74 years. The sample included 72 males (48%) and 79 females (52%). Among those who participated in the study, 60 completed long questionnaires and 91 completed short questionnaires. Long questionnaires focused on identifying context relevant preloading data and short questionnaires were delivered for convenience purposes and focused on participants’ prevalence, estimation, and awareness of intoxication.

Who is Preloading?

Where Are They Preloading?

N.B. Long Questionnaire (N = 60)

Male participants reported that the main location where they preloaded was a suburban pub. This was followed jointly by at the participant’s own residence or a hotel/motel/hostel. The third most popular preloading location for males was at a friend’s house.

Female participants reported that they preloaded most commonly at their own residence. The next most popular preloading location was at a friend’s house, followed by a hotel/motel/hostel.
Preloading occurred most often in the same suburb as data collection (Mackay CBD) and represented 31.6% of the sample who had preloaded (i.e., BAC > 0) and provided suburb data ($N = 57$). This was followed by Glenella and South Mackay.

**How Much Are They Preloading?**

Participants who had preloaded were asked to report how many standard drinks they thought they had imbibed before being breathalysed. The mean numbers were 6.1 for women ($N = 70$; $SD = 2.65$; median = 6) and 10.4 for males ($N = 64$; $SD = 5.5$; median = 10). Two participants reported that they were unsure of how many standard drinks they had consumed.

![Graph showing mean standard drinks consumed by males and females](image)

**Participants Perception of Level of Intoxication (i.e., Blood Alcohol Content – BAC reading) After Preloading**

The following graph represents participants’ predictions of what they thought they would blow in the breathalyser. All participants were provided with a prompt indicating the drink driving limit of 0.05 to aid in gauging their level of intoxication. It should be noted, in particular, that many participants in Mackay had greater knowledge of how the blood alcohol concentration measure works and the effects of BAC on cognition and behaviour, compared to participants from Brisbane and
Gold Coast areas. We believe this may be related to the number of people working in the mining industry and regular checks for drink and drugs.

NB: The ‘Do Not Know’ percentage reflects participants who were genuinely unsure of their predictions or those that provided implausible BAC predictions (e.g., .700).

Levels of Intoxication (Of Those Preloading)

Males \((N = 64)\) received a mean blood alcohol content reading of 0.094 and females \((N = 67)\) received a mean blood alcohol content reading of 0.067 for their preloading intoxication levels. See the below table for more details.

<table>
<thead>
<tr>
<th></th>
<th>Minimum</th>
<th>Maximum</th>
<th>Mean BAC</th>
<th>Standard Deviation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Males</td>
<td>0.000</td>
<td>0.198</td>
<td>0.094</td>
<td>0.048</td>
</tr>
<tr>
<td>Females</td>
<td>0.000</td>
<td>0.246</td>
<td>0.072</td>
<td>0.05</td>
</tr>
</tbody>
</table>

*Note.* These readings were obtained using the Alcolizer – Law Enforcement Series No. 5.

What Motivates People To Preload?

Both male \((N = 17)\) and female \((N = 30)\) participants who preloaded and completed the long questionnaire reported that their main reason for preloading was to socialise with friends (47.1% and 70%,
The next most common reason for preloading reported by females was to save money (26.7%), whereas males reported ‘other’ reasons for preloading (17.6%).

**Consequences of Preloading**

The following table shows the number of participants ($N = 59$) who reported suffering negative consequences on nights when they have preloaded in the past. Participants rated the frequency of these occurrences on a scale from Never to Nearly Always.

<table>
<thead>
<tr>
<th>How often have you been punched/slapped/kicked?</th>
<th>Never</th>
<th>Once</th>
<th>A Few Times</th>
<th>Often</th>
<th>Nearly Always</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>49 (83.1%)</td>
<td>5 (8.5%)</td>
<td>5 (8.5%)</td>
<td>0 (0%)</td>
<td>0 (0%)</td>
</tr>
<tr>
<td>How often have you punched/slapped/kicked someone?</td>
<td>52 (88.1%)</td>
<td>4 (6.8%)</td>
<td>3 (5.1%)</td>
<td>0 (0%)</td>
<td>0 (0%)</td>
</tr>
<tr>
<td>How often have you woken up with a stranger?</td>
<td>40 (67.8%)</td>
<td>9 (15.3%)</td>
<td>9 (15.3%)</td>
<td>1 (1.7%)</td>
<td>0 (0%)</td>
</tr>
<tr>
<td>How often have you been scared?</td>
<td>40 (67.8%)</td>
<td>10 (16.9%)</td>
<td>9 (15.3%)</td>
<td>0 (3.7%)</td>
<td>0 (0.74%)</td>
</tr>
<tr>
<td>How often have you woken up and not remembered the night before?</td>
<td>28 (47.5%)</td>
<td>5 (8.5%)</td>
<td>20 (33.9%)</td>
<td>4 (6.8%)</td>
<td>2 (3.4%)</td>
</tr>
<tr>
<td>How often have you used police assistance?</td>
<td>53 (89.8%)</td>
<td>2 (3.4%)</td>
<td>4 (6.8%)</td>
<td>0 (0%)</td>
<td>0 (0%)</td>
</tr>
<tr>
<td>How often have you wanted police assistance when there wasn’t any?</td>
<td>53 (89.8%)</td>
<td>2 (3.4%)</td>
<td>4 (6.8%)</td>
<td>0 (0%)</td>
<td>0 (0%)</td>
</tr>
</tbody>
</table>

Of particular note in the above table is the larger number of people who report to have not remembered the night before after frequenting the entertainment districts.

**Preloading with Energy Drinks**

![Pie charts showing energy drink consumption by males and females](image)
Preloading with Drugs

Upon review of the data, it was found that both males and females reported no preloading with drugs. This may be explained by two factors. Firstly, police officers were with the researchers at all times, potentially influencing the reporting of drug-taking. Secondly, Mackay is recognised as an industrialised mining town in which workers are often required to undertake mandatory drug testing.

CONCLUSIONS

This special report reveals the level of preloading that occurred on a Friday and Saturday night within the nightclub precinct of Mackay’s CBD. The figures unquestionably demonstrate that preloading is highly prevalent in Mackay. They also suggest that the level of preloading as presented by estimated standard drinks and Blood Alcohol Content (BAC) is high. When patrons were asked why they preloaded the most common responses were to socialise with friends, for financial benefit, or for ‘other’ reasons. There were no significant differences in terms of gender, and the common age rage for preloading appeared to be somewhere between 20 and 28 years. Preloading with energy drinks and drugs received low ratings by participants. However, and as already commented upon, a police presence probably explains the low rates for drug intake coupled with Mackay’s employment demographic.

The results suggest that preloading is present within Mackay CBD and interventions targeted at reducing alcohol-related harm and violence need to include preloading within their structure. Mackay patrons were reporting a level of preloading that is two to three times above the government guidelines for a binge drinking episode. Further to this, Mackay patrons were knowledgeable about BAC readings. This suggests that Mackay patrons are aware of the cognitive and behavioural side effects of heavy drinking but continue despite this fact. Therefore, when devising interventions in this region, it may be more beneficial to target the social and financial motivators that elicit their continued use. It may also be helpful to target post-drinking outcomes given that 33.9% of participants reported no recall of their night the following morning. Police may be able to play a greater role in the dissemination of knowledge as participants were positively disposed to communications with the two uniformed police officers. However, it needs to be advised that this data was collected in Mid-December when work Christmas Parties were being held in the neighbouring
suburbs of Mackay. This may affect the generalisability of the data, but also may be informative for event related preloading.

Future directions are continuing later this year with the instalment of ‘Last Drinks’, a continuation of the Smart Start project that will address end-loading (drinking after exiting entertainment venues). It is also of interest to investigate the possibility of introducing the regular provision of breathalysers at entertainment hot spots to inform on alcohol consumption and allow self-directed diversions.

In closing, we hope that this report provides helpful information into the occurrence, motivations, and gaps in knowledge that exist in relation to the expanding preloading culture.

REFERENCES


