Diminished inclusivity in public space:
How alcohol reduces people’s use and enjoyment of public places

Literature review

August 2019
Prepared for the Health Promotion Agency by:
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Citation: Randerson, S., Casswell, S., Rychert, M. (2019). Diminished inclusivity in public space: How alcohol reduces people’s use and enjoyment of public places literature review. Wellington: Health Promotion Agency

Acknowledgements
The authors would like to acknowledge Lisa Edwards for her assistance.

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NZBN 9429041905333
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Executive Summary

Background

Alcohol causes significant harm to people other than the drinker. A less studied aspect of such harm is how the sale and use of alcohol can detract from public spaces and can discourage or exclude people from using parts of their neighbourhood or city. These local impacts now have prominence in law; the Sale and Supply of Alcohol Act 2012 requires ‘amenity and good order’ (how pleasant and agreeable a locality is, including noise, nuisance and vandalism) to be considered in licensing decisions. The Act was intended to encourage community input to licensing decisions, however concerns exist about implementation and whether the community voice is being heard by decision makers.

Aim

This literature review explores what is known about the ways local supply and use of alcohol affects the amenity and inclusivity of public spaces. It also supports a study that is underway (as of 2019) of such impacts in New Zealand neighbourhoods and in the licensing process. This wider study will inform potential changes to alcohol policy and licensing processes that will better protect or improve public space inclusivity and amenity.

Key findings

- A number of surveys record amenity and inclusivity harms, but the extent and consequences of these harms have seldom been assessed. A small number of qualitative studies and local policy evaluations describe how public spaces are affected by others’ drinking, but most focus on night-time entertainment areas or town centres rather than suburban neighbourhoods.

- The impacts on local amenity and inclusivity are the most common harms experienced from other people’s drinking. Compared to amenity and nuisance issues, alcohol-related assaults, injury or threatening by a drunk person are reported much less often. However, these events are regularly witnessed, and contribute to perceptions of safety and disorder.

- Loss of amenity and inclusivity has a disproportionate negative impact on women, younger people and more socially deprived communities.
• People’s sense of belonging and feelings about their neighbourhood can be strongly impacted by alcohol supply and use. For example, some felt alienated from their town centre; others saw the character of their neighbourhood change, and some children wanted playgrounds free from alcohol use and broken glass. There is some evidence suggesting mental health and physical wellbeing may be negatively impacted by perceptions of local disorder and fear of crime, potentially through reduced exercise and social activity.

• Where there are more alcohol outlets in a community, there tends to be more crime, nuisance, disorder, public drinking and property damage. For off-licensed outlets specifically, density and proximity to outlets have both been associated with property damage.

• The scale of these types of harm is very substantial; in one year the cost of property damage (including personal belongings) reported in Australia was estimated to be AU$1.6B. Intangible harms were estimated to cost a further AU$5.3B in terms of lost quality of life.

• Alcohol bans and one-way door policies in specific locations can improve amenity and inclusivity, but there is evidence they sometimes displace drinking and associated problems to nearby locations. Alcohol bans may further marginalise young drinkers or rough sleepers, potentially shifting their drinking to less visible locations.

Implications for future research

• The ways that alcohol supply by off-licensed premises affects suburban spaces and people’s day-to-day lives has not been well explored. The New Zealand study that this literature review informs will therefore make a new contribution to understanding alcohol’s harm to others at a local level and implications for licensing policy.

• Research on alcohol-related amenity and public space issues should consider the differing levels and types of harm that may occur to women, young people and socio-economically disadvantaged neighbourhoods.

• Future studies could better assess the extent and costs of diminished amenity and inclusivity for people’s day-to-day choices and wellbeing. For instance levels of discomfort or distress; what kind of places or activities they avoid, in what circumstances and how often or for how long; and what else they do to manage potential or actual discomfort.

• Potential long term effects of alcohol-related disorder, changes in community ‘feel’ or character, and levels of stress in a community should also be considered. How this impacts people’s activity levels and potentially their physical and mental health could also be explored.
Introduction

A growing body of research has moved beyond a focus on the drinker to examine alcohol’s harm to others (AHTO). The shift is important because of the widespread nature of alcohol’s harm to other people. In a New Zealand survey for example, more respondents reported a harmful personal experience as a result of someone else’s drinking (18%) in the past 12 months than from their own drinking (12%) (Connor & Casswell, 2012). Laslett et al. (2013) highlight the need for such research to counterbalance dominant portrayals of alcohol harm as an individualised problem requiring individualised policy responses. Greater appreciation of the harms experienced by society as a whole may increase political willingness to implement effective regulations on alcohol supply and promotion, as recommended by the World Health Organization (2018).

While much research on alcohol-related harm has focused on acute or tangible harms such as health effects, crime or assaults, this review focuses on the smaller body of work considering impacts on public spaces and amenity (attractiveness, pleasantness), inclusivity (accessibility and usability) and feelings of safety. Although such impacts may be perceived as less serious than acute harms, they are experienced by a greater number of people (Connor & Casswell, 2012; MacLennan et al., 2012). The extent to which people’s day to day activities or positive feelings about their neighbourhood are reduced may significantly affect their longer term wellbeing, for example, through reduced exercise, activities or connection with others.

Diminished amenity and inclusivity due to alcohol are likely to be felt unequally in our society, with greater impact on women and children (Witten & Field, under review) and in relation to the disproportionately high density of alcohol outlets in more deprived areas (Hay et al., 2009). The availability of cheaper alcohol from off-licensed premises, some of which is consumed outside the home, makes loss of amenity a priority for research. To minimise such harm, the Sale and Supply of Alcohol Act (SSAA) 2012 introduced a requirement for amenity and good order to be considered in local decisions about alcohol supply in New Zealand (s 105(1)(h) SSAA). A better understanding of diminished inclusivity and loss of amenity due to alcohol may therefore support better assessment of this criterion and greater consideration in alcohol policy and licensing decisions.

This literature review considers local and international research describing how the supply and use of alcohol by others impacts the inclusivity of public space. The review is part of a New Zealand study, Diminished inclusivity in public space: An important aspect of alcohol’s harm to others, funded by the Health Promotion Agency.
Definitions of amenity and inclusivity in relation to alcohol

In the SSAA, amenity is defined as the pleasantness or attractiveness of a place. The Act requires consideration of any potentially significant impact on amenity and good order in alcohol licensing decisions, and specifies current or potential levels of noise, nuisance and vandalism. It also refers to inclusivity (accessibility or usability), specifically the compatibility of alcohol outlets with nearby community facilities or land use, such as schools. The consideration of public space and community amenity is grounded in the object of the Act (S.4), namely that “harm caused by the excessive or inappropriate consumption of alcohol should be minimised”, including “any harm to society generally or the community” contributed by alcohol-related crime, damage or disorder.

Surveys have assessed various impacts on amenity due to drinking by strangers or acquaintances, as shown in Table 1. These impacts range beyond the nuisance harms considered under New Zealand law to include experiences of aggression or unintentional injury. Aggression and interpersonal harms are relevant to amenity as such experiences (although less prevalent) may contribute to wider perceptions of the comfort, safety or attractiveness of a location.

Table 1: Alcohol’s harm to others survey items

<table>
<thead>
<tr>
<th>Due to a strangers’ drinking, in the last 12 months, how many times have you:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Avoided drunk people/places</td>
</tr>
<tr>
<td>Been kept awake or disturbed at night</td>
</tr>
<tr>
<td>Been annoyed by vomit, urination or littering</td>
</tr>
<tr>
<td>Felt unsafe waiting for public transport</td>
</tr>
<tr>
<td>Felt unsafe in a public place</td>
</tr>
<tr>
<td>Experienced trouble or noise related to a licensed venue</td>
</tr>
<tr>
<td>Been verbally abused</td>
</tr>
<tr>
<td>Been physically hurt</td>
</tr>
<tr>
<td>Been threatened</td>
</tr>
<tr>
<td>Been involved in a serious argument</td>
</tr>
<tr>
<td>Been injured in a car accident</td>
</tr>
<tr>
<td>Had damage done to your house, car or other property</td>
</tr>
<tr>
<td>Been forced or pressured to do something sexual</td>
</tr>
</tbody>
</table>

*Casswell et al., 2011*

Discussions in urban design research regarding inclusivity of public spaces expand on attractiveness to also consider openness, accessibility and conviviality of space, and make links to notions of democracy (Gehl &
Matan, 2009; Johnson & Miles, 2014). These issues highlight both physical and social constraints on the inclusivity of public space, and raise the important issue of how inclusivity will differ for different social groups. For instance, while some people are bothered by street drinking, it may be attractive (or one of few options available) to others, such as teenagers or the homeless.

Although social and environmental aspects of inclusivity are beyond this review’s focus on alcohol in public spaces, the differing experiences of various groups are relevant. We review the effects of alcohol on the inclusivity of public space; specifically, the ways and extent to which the supply and use of alcohol by others impacts people’s decisions to access or use public spaces, or reside in a locality. This links directly to alcohol-related amenity issues as the more or less the amenity of a public space or a neighbourhood is negatively impacted by alcohol, the more or less willing people will be to enter and use that space or remain in the neighbourhood. It is therefore important to consider groups who are more likely to be excluded from public spaces by alcohol-related problems.

The effects of alcohol on inclusivity are described by items in population surveys of AHTO. Typically, items ask whether people have felt unsafe in public places or when waiting for public transport due to others’ drinking, or have avoided (or gone out of their way to avoid) drunk people or drunk places. Interpersonal aggression relating to alcohol is also considered, as it is likely that the incidence of such harms contributes to fear and reduces the inclusivity of a space.

**Method**

A review of relevant local and international literature was conducted, guided by the research question:

*What is known about the extent and nature of reduced amenity and inclusivity in public spaces due to the local supply and use of alcohol?*

The review included articles from peer reviewed journals, published reports and relevant survey data. When developing search terms for the review, no studies were found with a primary focus on alcohol’s impact on public space amenity or inclusivity. However, aspects of amenity and inclusivity have been investigated in wider studies of alcohol’s harm to others, alcohol policy, urban planning and regulation, and the relationships between alcohol availability and related harm. Several related search terms were used to retrieve relevant literature, as follows:

“alcohol” AND ("public space” OR “public place”; “urban drinking spaces”; “inclusivity”; “amenity”)
Other words and phrases were then added including: “harm to others”; “non-violent crime”; “fear”; “safety”; “avoid drunk people” “avoid drunk places”; “vandalism”; “drunk and disorderly behaviour”; “public nuisance”; “offensive behaviour”; “local alcohol supply” WITH sales/density.

The search was completed in Scopus and Medline, with no date restrictions but excluding grey literature (unpublished or informally published material, usually not peer reviewed). The search terms returned over 60 published articles, 38 of which had some relevance to the main research question. The articles referenced eight further studies, which were included in this review. Three main groups of research were evident. About a third of the research was based on surveys examining the prevalence of specific harms, a third used qualitative methods to explore personal or community harms from others’ drinking or from policies introduced to regulate drinking and disorder, and a third explored relationships between alcohol availability (mainly density and location) and relevant amenity harms. Another prominent focus in the literature retrieved was the experience or needs of street drinkers in public spaces. However, most of these studies were excluded from review as they did not examine harm to others.

Findings

Findings are presented from the three main research groups identified within the literature, namely quantitative prevalence studies, qualitative studies, and relationships between harm and availability of alcohol.

Quantitative surveys of alcohol’s relationship with public space amenity and inclusivity

Prevalence

Representative surveys of AHTO in 13 countries have included items on the prevalence of alcohol-related amenity and inclusivity issues. Findings that relate to amenity and inclusivity are summarised by country or region of survey in Table 2. Each survey incorporated a large sample size and was weighted to be representative of the population in the specific location. Results were generally reported by gender, and some by age group. The surveys contained some common items and some that varied, and many did not include several of the items used in the Australian and New Zealand surveys, leaving some gaps in the table. The results should be interpreted with some caution regarding total prevalence of AHTO. As Laslett et al. (2010) note, when more types of harm are included in AHTO surveys, more people report experiencing harm in the past twelve months. For instance, results from the New Zealand and Australian surveys suggest around 70% of the population experienced at least one harm from someone else’s drinking in the year prior to the survey; the corresponding proportions in surveys of eight European countries ranged from 25% to 63%.
Nevertheless, the data show the relative prevalence of different harms and consistent patterns by gender and age.

Table 2: Proportion of people experiencing harm from others’ drinking in the past 12 months in representative population surveys (by gender if available or total)

<table>
<thead>
<tr>
<th></th>
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<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Gender or total</td>
<td>F / M</td>
<td>F / M</td>
<td>Total</td>
<td>Total</td>
<td>Total</td>
<td>Total</td>
<td>Total</td>
<td>F / M</td>
<td>Total</td>
</tr>
<tr>
<td>Avoid drunk people or places where drinkers are known to hang out</td>
<td>43 / 43</td>
<td>33 / 31</td>
<td>26 / 23</td>
<td>15 / 13</td>
<td>35.8</td>
<td>19.2</td>
<td>46 / 23</td>
<td>36 / 12</td>
<td>6-34</td>
</tr>
<tr>
<td>Felt unsafe in a public place</td>
<td>26 / 23</td>
<td>15 / 13</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Felt unsafe waiting for or using public transport</td>
<td>21 / 18</td>
<td>13 / 8</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Kept awake and disturbed at night</td>
<td>40 / 34</td>
<td>30 / 33</td>
<td>49.4</td>
<td>30</td>
<td>32 / 28</td>
<td>46 / 35</td>
<td>15-33</td>
<td>22</td>
<td>23 / 19</td>
</tr>
<tr>
<td>Annoyed by vomit, urination or litter</td>
<td>28 / 28</td>
<td>42 / 50</td>
<td>43 (vomit)</td>
<td>54 (litter)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Trouble or noise related to licensed venue</td>
<td>20 / 24</td>
<td>7 / 8</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Verbally abused or harassed</td>
<td>16 / 22</td>
<td>17 / 22</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Been Threatened</td>
<td>8 / 15</td>
<td>11 / 13</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Serious argument</td>
<td>9 / 14</td>
<td>10 / 13</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Property damage</td>
<td>9 / 10</td>
<td>9 / 11</td>
<td>4 / 6</td>
<td>6 / 7</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Forced or pressured into sexual activity</td>
<td>1 / 1</td>
<td>2 / 2</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Unwanted sexual attention</td>
<td>13 / 8</td>
<td>5</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Physically assaulted or injured</td>
<td>3 / 5</td>
<td>2 / 4</td>
<td>3 / 6</td>
<td>1.5-6</td>
<td>4</td>
<td>2.5 / 4</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

i Range and median reported for Denmark, Finland, Iceland, Norway, Sweden and Scotland
* Proportion who felt unsafe in a public place, pub or nightclub
^ made frightened when meeting drunk people in the streets

References: (1) Laslett et al., 2010; (2) Casswell et al., 2011; (3) Gell et al., 2009; (4) Huhtanen & Tigerstedt, 2012; (5) Tamutiene, 2017; (6) Moan et al., 2015; (7) Marmet & Gmel, 2016; (8) Rossow & Hauge, 2004.

Reduced public space amenity and inclusivity were consistently the most commonly experienced harms from others’ drinking in the past 12 months, with aggression or physical harm considerably less common (Table 2). The frequently reported impacts on amenity included being kept awake at night, and annoyance from vomit, urination or littering. Regarding inclusivity of spaces, 32% of New Zealanders and 43% of Australians
reported they had gone out of their way to avoid drunk people or places where drunk people hang out (Laslett et al., 2010; Casswell et al., 2011). Further, a considerable proportion from each population felt unsafe in public spaces or while waiting for public transport due to strangers’ drinking, and this was consistent with findings from several other countries.

**Magnitude of harm**

The frequency and magnitude of experiencing amenity and inclusivity harms from strangers’ drinking has only been extensively explored by Laslett et al. (2010) in Australia. The harms they investigated occurred a median of 2 to 4 times per year – although the average for avoiding drunk people/places was 18 times in a year, suggesting the impact is considerably higher for some people. Again, the harms experienced more frequently during the preceding year were avoiding drunk people/places, and being disturbed or annoyed by noise, vomit, urination or litter, as compared to experiences of violence or threatening behaviour. Some 10% of respondents had experienced property damage, at an average rate of 1.75 times per year, costing an average of AU$1,222 per person per event; 6% reported damage to clothes or personal belongings, on average twice per year at $166 per event. When asked to rate the extent of feeling affected by incidents across all harms from a stranger’s drinking, 36% of respondents reported being affected ‘a little’, and 4% ‘a lot’. These intangible costs were estimated at AU$5.3B. Further research could quantify such costs in specific domains.

**Who is most affected?**

Some impacts of others’ drinking on amenity and inclusivity differed by gender and age. In New Zealand and Australia, significantly larger proportions of women felt unsafe waiting for public transport due to others’ drinking (Table 2). Women were also more likely to feel unsafe in public places. These effects on women’s feelings of safety are seen consistently in AHTO survey data from other countries, while qualitative studies describe the ways this impacts women’s activities and travel (see page 14). On the other hand, men were typically a little more likely than women to experience verbal or physical aggression.

Age differences were also large. In surveys reporting AHTO by age, young adults were consistently more likely than older age groups to experience amenity and inclusivity harms due to others’ drinking, with the exception of being kept awake at night. Two Australian studies suggest the impact on young people’s mobility and sense of safety is widespread. Among 16 to 24 year-olds and 18 to 29 year-olds, approximately 60% of young people reported going out of their way to avoid drunk people or places in the past year, while over 45% had felt unsafe in a public place or when waiting for transport due to others’ drinking (Callinan & Room, 2014; Laslett et al., 2010). This may be linked to the frequency with which young people go out, but this would need to be confirmed in future research.
Analysis of Global Drug Survey data (a self-selecting survey) from 21 countries on 18 to 34 year-olds produced similar findings. Being kept awake was one of the most frequent harms reported, and a much greater proportion of women (41%) felt unsafe on the way home than did men (20%). The analysis also indicated feeling unsafe on the way home was more prevalent among those who had experienced a verbal, physical or sexual assault. However the study did not explore whether this led to young people avoiding going out in the future (Bellis et al., 2015). Similarly, the survey studies generally have not assessed the extent of distress or the personal consequences for the respondents; for example, how often people feel the need to avoid drinkers, drinking locations or social occasions; how significantly they are affected emotionally; and whether the impacts are occasional or ongoing.

Those who experienced more types of physical, verbal or social harm from strangers’ drinking were more likely to have harmful drinking patterns, and to visit drinking places more frequently (Laslett et al 2010; Rossow & Hague, 2004). They were therefore more likely to encounter other drinkers, and, due to their own drinking, may have reduced capacity to recognise or avoid risky situations (Bellis et al., 2015). It is probable that the increased harm experienced by young people is also linked to the frequency with which they go out, but this would need to be confirmed in future research. Similarly, a study of young Australians found those who drink heavily were somewhat more likely to experience amenity and inclusivity harm due to others’ drinking. This included annoyance due to vomit, litter, or urination; feeling unsafe in a public place; and actively avoiding drunk people or drinking places (Callinan & Room, 2014).

**Associations between alcohol-related crime, disorder and personal wellbeing**

Among the 1,318,000 violent interpersonal offences recorded in New Zealand in 2013, the offender had been drinking in 46% of the offences. Offences included sexual and other assault, robbery, damage to property, and threats of violence or damage to property (Ministry of Justice, 2014). Such regular involvement of alcohol in crime is likely to affect the inclusivity of public spaces for the wider community by contributing to fear of harm, particularly with respect to places where drinkers congregate.

For example, an Australian survey of Geelong and Newcastle residents found just over half the participants who went to city entertainment precincts had seen or been part of a verbal or physical assault in the past year. Among all residents surveyed, 9 out of 10 agreed alcohol-related violence was a concern in their local entertainment precinct, and most supported stronger controls on alcohol supply including reducing trading hours (Tindall et al., 2015). Similarly, surveys of seven New Zealand communities found more than 3 in 4 respondents believed alcohol was a major contributor to violent crime (Connor & Casswell, 2012).

Perceptions of disorder and fear of crime in a community have both been associated with common mental illnesses. In one study, those with greater fear of crime were nearly twice as likely to have depression as
those reporting lower fear of crime. Participants reporting lower quality of life exercised less and socialised with friends or attended activities less often. This restriction of physical and social activity, which are generally protective of mental health, was a potential explanation for the links between fear of crime or community disorder and poorer mental health (Polling et al., 2014; Stafford et al., 2007). Polling et al. (2014) also noted that perceptions of community disorder were higher among women and those living in income-deprived areas, and may therefore add to inequalities in health outcomes.

Summary of quantitative findings

Overall, amenity and inclusivity harms are widespread in all countries where they have been investigated. Loss of sleep, property damage and general nuisance effects were reported as common experiences. Other people’s drinking also makes a substantial proportion of people feel unsafe, with significantly more women feeling unsafe than men. These impacts are more pronounced for young people, more than half of whom may go out of their way to avoid drunk people and drunk places in a typical year.

There have been few studies directly exploring the ways and extent to which these amenity and inclusivity harms affect people’s wellbeing, their neighbourhoods and their quality of life. Australian research found a third of the population were affected ‘a little’ by others’ drinking, and 4% ‘a lot’, with total costs (tangible and intangible) estimated at AUS$6.9B (Laslett et al., 2010).

The high occurrence of alcohol-related crime is very likely to contribute to people’s experiences of discomfort and fear. Not only does this affect where people go, but some data suggests it may have serious consequences for people’s wellbeing and mental health via reduced social and physical activity.

Qualitative studies of alcohol and public space amenity and inclusivity

A small number of qualitative and mixed methods studies provide further insight into how women, young people and communities are affected by others’ drinking. Excessive consumption in town centres and the night-time economy were the most common areas of research, while a few studies investigated effects in suburban neighbourhoods and shopping areas.

One of the few studies of suburban areas investigated experiences of children (9 to 15 years old) in their neighbourhoods. The children actively avoided places where alcohol was consumed, feeling threatened when encountering groups of young drinkers in their park who fight and throw bottles. The children also mentioned broken glass, with many wanting their playgrounds to be alcohol free (Witten & Field, under review).

Other impacts of alcohol on amenity in suburban areas are briefly described in studies of street drinking and the effects of public (or street) drinking bans. As in the study above, broken glass and litter were reported as
a nuisance, and families and children who use parks were uncomfortable encountering people continuing to drink through the day. Noise from shouting, negative effects of street drinking on trade for nearby businesses, and the potential for delayed commercial development were other concerns (Pennay et al., 2014; Van Hout & Bingham, 2013).

A review of alcohol ban evaluations found that generally, when a ban is introduced to target problematic drinking in a specific public place, reductions in litter, noise and fighting follow. However the drinking and other problems may merely be displaced to other locations. Studies also highlight potential negative impacts for vulnerable young drinkers and the homeless. After being ‘moved on’ from their favoured locations, young or otherwise vulnerable people may lose contact with supportive peers, or move to less visible and consequently more risky locations to drink. They experience exclusion because they drink in public spaces (for instance, police moving them on), while those who can afford to drink at outdoor or on-street bar and restaurant areas do not (Wilkinson, 2015; Pennay & Room, 2012).

Participants in studies of town centres and entertainment precincts at night consistently raise fears of alcohol-related crime, abusive behaviour and physical harm as central concerns. These concerns stem from direct experience of intimidation or harm, or witnessing such events, and a general concern for keeping safe is evident. Studies in the United Kingdom identified considerable growth in drinking-related problems in many town centres from the late 1990s. Problems accompanied a major expansion in alcohol outlets, a buoyant economy, and the relaxation of licensing laws (Roberts, 2006). This review notes that ‘no-go areas’ developed in many town and city centres over this time, and describes ‘drinking streets’ dominated by large numbers of younger people binge drinking and engaging in antisocial behaviour, including urination, shouting and swearing.

A study in Leeds, United Kingdom detailed how women going for a night out are affected by other peoples’ drinking. Although they continued to enjoy going to restaurants, pubs and clubs, the women described a need for constant vigilance, having witnessed or experienced unwanted sexual attention, heckling, aggression or violence fuelled by alcohol. The strategies some women reported doing for their own safety included never going into a pub alone, avoiding male-dominated pub environments, and avoiding groups of young people and specific venues or streets. Women of all ages feared for their safety on the way home when encountering groups of drinkers, especially on public transport including ‘the last train home’. This impacted behaviour including changing routes to avoid drunk people, and avoiding drinking alone or going home alone. Even after drinking and walking home alone safely, women regretted taking the risk, describing it as a poor decision that was ‘alcohol influenced’. Some women expressed anger that choosing to drink or walk alone was seen as inviting trouble, or would lead to being blamed if attacked (Sheard, 2011).
A third United Kingdom study reported specifically on the inclusivity of English towns and cities at night from the perspective of participants who rarely ventured out at this time. A considerable proportion of the participants reported feeling “alienated” from their town centres due to alcohol-related concerns regarding security and crime, and that the city centre was “not for me” (Eldridge & Roberts, 2008).

However, people’s ambiguity about drinking and drunkenness was also evident in this study, as drinking environments and the prospect of drunkenness did not always deter respondents from venturing out. Study participants enjoyed visiting drinking establishments and being intoxicated on occasion. They did however raise a strong preference for ‘relaxed’ venues or places they felt more included by other drinkers, ranging from quiet venues to live music events, or European drinking environments where people of all ages are present at night (Eldridge & Roberts, 2008). This suggests different social environments also play some role in alcohol’s relationship with people’s experience of inclusivity or comfort in town centres.

Different experiences of alcohol-related inclusivity for different social groups were evident in an evaluation of a one-way door policy (meaning after a set time of night, entry to licensed premises is not permitted but people may leave) in Sydney. After the policy was introduced in Kings Cross, the nearby suburb Newtown experienced an influx of drinkers. Residents of Newtown, an area known as a relaxed and welcoming place for people of diverse sexual orientation and gender identity, described how the amenity of the area was rapidly diminished by the influx of drinkers from Kings Cross. Drunken behaviour reported by Newtown residents included being harassed, pushed, and seeing lights and shop signs smashed. As one noted, “It’s not a local crowd so nobody gives a f... if they start trouble outside” (Hughes & Weedon-Newstead, 2018, p. 392). Another interviewee suggested the impact was more severe for sexual and gender minorities in the area. Overall, in terms of sense of community, there was a feeling that what was special about Newtown was being lost, to the extent that some began avoiding the main road and one person decided to leave the area. In dramatic contrast to Newtown, substantial reductions in public drunkenness and improvements in safety and amenity were reported in Kings Cross, although potentially at a cost to local venues and the live music business (Hughes & Weedon-Newstead, 2018).

**Links between alcohol availability and reduced amenity and inclusivity**

The alcohol policy literature has demonstrated that increases in the availability of alcohol are typically followed by increases in population levels of consumption and in alcohol-related health and social harm (Babor et al., 2010). This is exemplified by changes in the United Kingdom’s nightlife. As described above (Roberts, 2006), alcohol-related town centre problems were produced in part by large-scale expansions in the number and patron capacity of alcohol-focused venues in United Kingdom towns during a period of relaxation of alcohol licensing restrictions, including longer trading hours.
A large body of research has found increasing local experiences of harm are related to greater access to alcohol, in terms of both proximity to alcohol outlets and outlet density. Specific pathways that link alcohol outlet density to harm have been described in place-based theories, notably routine activities theory (Livingston et al. 2007). Routine activities theory proposes there is more opportunity for problems to occur when victims and potential perpetrators come together in the same location. A cluster of alcohol outlets creates such an opportunity by attracting more people, including drinkers. It also increases the chances of drinking in or near the location, and being intoxicated reduces people’s inhibitions and capacity to guard against problems occurring (Snowden et al., 2017). Regarding local amenity, the theory suggests alcohol-related noise issues and property damage are likely to be more common than direct interpersonal harm, as residents and property are relatively permanent in the location and therefore have greater opportunity for damage by people purchasing and consuming alcohol in the area.

In line with place-based theories, empirical studies generally find positive associations between violent crime and density of alcohol outlets (Cameron et al., 2016b). In New Zealand, bar and night club density was significantly associated with violence events and antisocial behaviour, while greater off-licence outlet density was associated with increases in antisocial behaviour, violence events and sexual offences (Cameron et al. 2016a; Cameron et al. 2016b). Amenity related outcomes have been studied less often; however, increased proximity to alcohol outlets and density of alcohol outlets have both been associated with increases in theft, property damage and disorder such as noise and nuisance (Donnelly, 2006; Toomey et al, 2012; Wilkinson & Livingston, 2012). While studies have differentiated between different types of alcohol outlet (on-licensed premises or off-licensed) in relation to violence, whether relationships to amenity also differ for different outlet types has not been consistently established due to the low number of studies of this kind (reviewed in Snowden et al., 2017).

One study of proximity found Australians living closer to off-licensed premises experienced greater property damage (Wilkinson & Livingston, 2012). Other recent studies of the density of on-licensed and off-licensed premises showed the density of each outlet type had positive relationships with some amenity harms, most often property damage. In the United States, Toomey et al. (2012) found greater incidence of vandalism, nuisance and public consumption was significantly associated with greater density of both on- and off-licensed premises, but the associations were smaller for off-licensed premises. Similarly, Snowden et al. (2017) found the density of both off- and on-licensed premises was significantly and positively associated with vandalism, while only on-licensed premises density had a significant and positive association with theft from vehicles. It is worth noting that the cumulative effect of all outlet types combined typically shows the strongest relationship with amenity harms (Donnelly, 2006; Toomey, 2012).
Social disorganisation theory describes the potential for the links between alcohol outlets and local harms to be mediated by the collective capability of people in a neighbourhood to informally control local behaviour and local supply. It suggests more organised communities may have greater capacity to spread and reinforce shared values and social norms, including appropriate behaviour concerning alcohol, and addressing or reporting local problems relating to alcohol. They may also be more capable of using formal channels to oppose the licensing of additional outlets in their area (Gorman et al., 2013; Livingston et al., 2007). As such, Livingston et al. (2007) suggest density of alcohol outlets may be a potential marker of social disorganisation.

There is empirical evidence in support of these theories suggesting that social organisation mediates the relationship between density of alcohol outlets and violent crime. However the only study exploring whether it mediates frequency of non-violent crime was inconclusive (Snowden et al., 2017). In addition, recent reviews found consistent evidence that outlet density had a greater impact on harm in areas of high social deprivation, and that outlet density also tended to be higher in these areas (Cameron et al., 2016b).

Another study in Amsterdam purposively looked for ‘hotspots’ for alcohol-related harm located away from alcohol outlets and entertainment areas to identify factors other than alcohol availability that contribute to such harm. For the purposes of the study, hotspots were places with a higher than average experience of alcohol-related incidents requiring an ambulance to be called out. The study found some environmental factors common to these hotspots, including locations where public parks bordered a deprived neighbourhood, nearby social housing, nearby dance event facilities and residential services for rough sleepers (Veldhuizen et al., 2017). These studies indicate some of the social and environmental factors that should be considered in research exploring alcohol-related amenity and inclusivity.
Summary

Main findings

Alcohol supply and use by others has widespread impacts on community amenity and inclusivity in many different countries, affecting more than 1 in 3 people in most countries that have surveyed AHTO. Despite considerable variability in the prevalence of different harms across countries, amenity effects are consistently more common than experiences of serious physical harm. The most common effects are lost sleep and reduced inclusivity, including avoiding drunk people or drinking places, or feeling unsafe in public areas and around drunk people.

These experiences differ by age and gender, with young people affected considerably more often than older age groups. Slightly higher proportions of women than men feel unsafe around drinkers in public places, and women express particular fears for safety while waiting for public transport or travelling home.

Qualitative research has elaborated somewhat on how people are affected by these harms from others’ drinking, mostly with respect to the night-time economy and entertainment precincts. Women discussed a range of situations and locations in which they feel unsafe or uncomfortable, including male-dominated venues, specific streets, on the last train home, or entering a pub or bar alone. In such places they feel more vulnerable to harassment, unwanted sexual attention, or physical or sexual assault. They also feel responsibility is placed on them to remain safe, and they employ a range of strategies to do so.

At the neighbourhood level, effects of increases in drinking and drunken behaviour include significant changes in the overall ‘feel’ of a neighbourhood, and shifts in the culture and safety of neighbourhoods, including the development of ‘no go’ zones and streets that some people begin to avoid. Overall, sense of belonging was impacted in some locations, with people feeling that their town was no longer a place for them at night.

Elaborating on this loss of inclusivity, people who avoided United Kingdom town centres at night indicated they did not simply want to avoid drinkers or drinking establishments, but were interested in finding more relaxed environments where they felt included or that might cater for different ages. This finding indicates that a lack of variety in terms of different drinking and non-drinking entertainment options for different ages or social groups may also affect the inclusiveness of a location, alongside concerns over aggressive drunken behaviour.

The empirical research clearly relates alcohol supply to AHTO. Greater total density of alcohol outlets (both off-premises and on-premises) is consistently associated with both violent crime, reduced amenity and
behaviour that reduces the inclusivity of public spaces. The small number of studies that look separately at the density of off-licensed outlets and their link to amenity generally show statistically significant, positive relationships with vandalism or property damage, nuisance and public consumption.

Matters of community setting also influence the relationship between outlets and harm, as increasing density of outlets has a greater impact on more socially deprived communities and on those which already have a high density of outlets. Social organisation can mediate the relationship between outlets and violence, but has not yet been found to mediate non-violent or amenity harms.

Research regarding the impact of alcohol bans and one-way door policies also highlights alcohol’s contribution to amenity and inclusivity problems. While these policies tend to improve amenity where they are applied, there is evidence they can also displace harm to nearby locations. In addition, alcohol ban areas may further marginalise young drinkers or rough sleepers, and may encourage them to drink in less visible, higher risk locations.

Considerations for future research

Research to date provides few details as to how and to what extent inclusivity and amenity problems impact peoples’ day to day lives in suburban areas, with the major focus being experiences at night in town centres and entertainment precincts. The New Zealand study that this review informs will be the first, to our knowledge, to look in detail at how drinking in local spaces and off-premises alcohol outlets affect amenity, inclusivity and other outcomes for people outside of town centres and entertainment areas.

Only one population survey we found measured how often or how extensively people felt their lives were affected by amenity and inclusivity issues; various amenity and inclusivity harms were typically experienced 2 to 4 times in a year (Laslett et al., 2010). The costs of alcohol-related property damage (including clothing and personal belongings) were also collected, and estimated to cost the country AU$1.6B. Given the potentially substantial costs of such harms, future research should consider how often different amenity and inclusivity harms are experienced, and provide greater detail as to how and to what extent people are impacted by these harms.

One such area is the cost to women of their efforts to remain safe in relation to drunk people or places, such as avoiding going out alone, or avoiding specific venues and types of transport. Other potentially costly impacts reported in the literature are moving to a new job or residence due to increasing alcohol-related disorder in a suburb.

In addition, as people avoid drinking establishments at some times and not others, it would be useful to consider whether people who avoid certain places do so all the time or only in certain circumstances, what
those circumstances are, and how they manage potential discomfort in those locations. Similarly, the extent to which experiences of actual harm contribute to future reluctance to use a location could be explored. Comparisons with those who do not avoid drinking locations would also be helpful.

Lastly, it is very concerning that fears over crime, safety and disorder have been found to limit people’s social and physical engagement in their community, which is linked not only to reduced quality of life but also to reduced physical and mental health. From a health equity perspective, it is important to better understand how the wellbeing of people living in low socio-economic areas, who may already be less financially able to travel elsewhere or attend recreational activities, is affected by neighbourhood stress relating to alcohol.
References


