



Indigenous Narratives about alcohol impacts and sobriety

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For a substantial proportion of Northern Territory (NT) residents, the goal of sober communities remains firm but, with every policy and legal shift, drifts further towards being the impossible dream.

Participants in the project spoke to us about the problems associated with complex and intersecting, multi-tiered government policy and legislation; local issues related to the contested interests of industry, public health, communities and government; the absence of integrated, regional responses; and, some of the factors that have led to success within this increasingly volatile context. Their contributions are important in developing 'best practice' pathways for communities to develop, implement and monitor AMPs.



- This paper presents some of the findings – in two case studies – from an ethnographic study of AMPs conducted in the NT, based on qualitative, semi-structured, in-depth interviews and focus groups conducted with a range of key stakeholders in Alice Springs, Darwin, Katherine and the community of Jilkminggan.
- The aims of the research were to identify the role and understandings of Alcohol Management Plans (AMPs) and related alcohol interventions in Indigenous communities in Australia.
- We acknowledge with gratitude the Lowitja Institute for funding provided to this project. PM&C, FARE and the ARC have also funded the larger research project since 2013.



What are Alcohol Management Plans?

- Increasingly popular policy response by governments & communities to address alcohol-related harms in Indigenous contexts.
- An Alcohol Management Plan (AMP) is a set of strategies designed to reduce harms resulting from alcohol misuse in designated areas.
- In Australia, AMPs have primarily been used to control the availability of alcohol through either:
 - (1) banning or restricting the supply, possession and/or consumption of alcohol in certain places, or
 - (2) placing local restrictions on liquor outlets as broader strategy for reducing local alcohol-related harm.

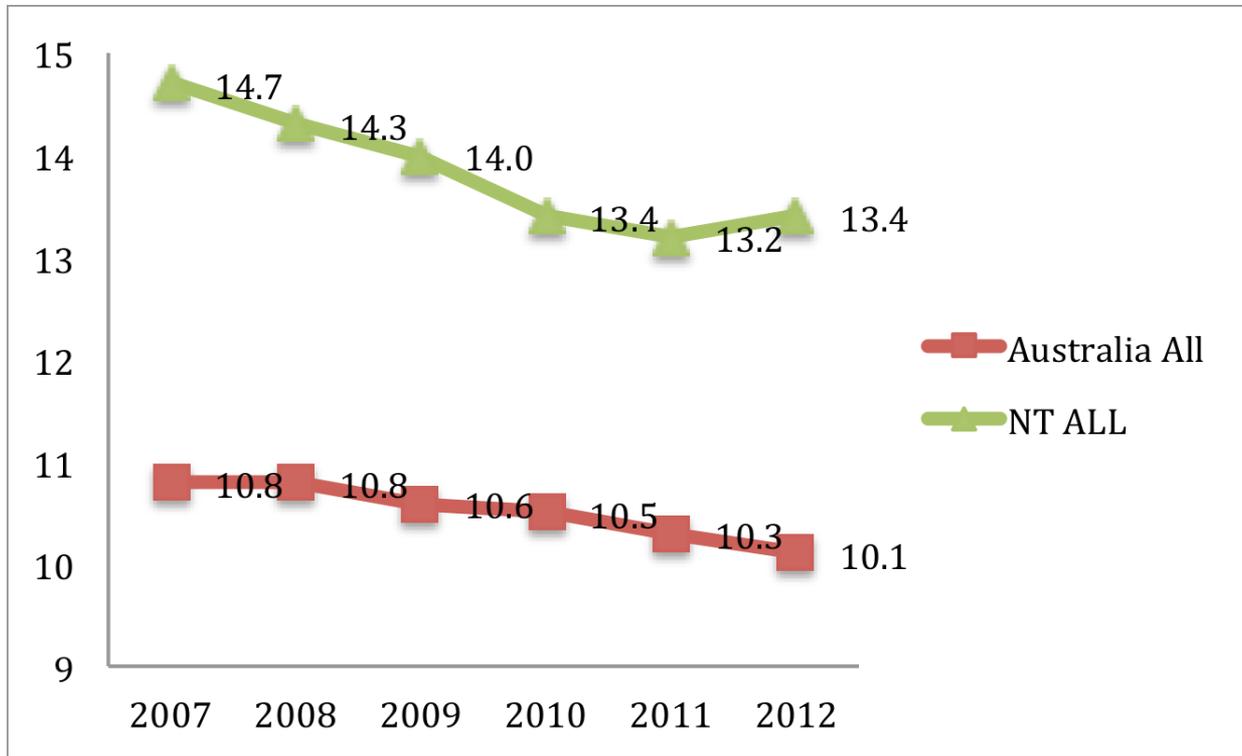




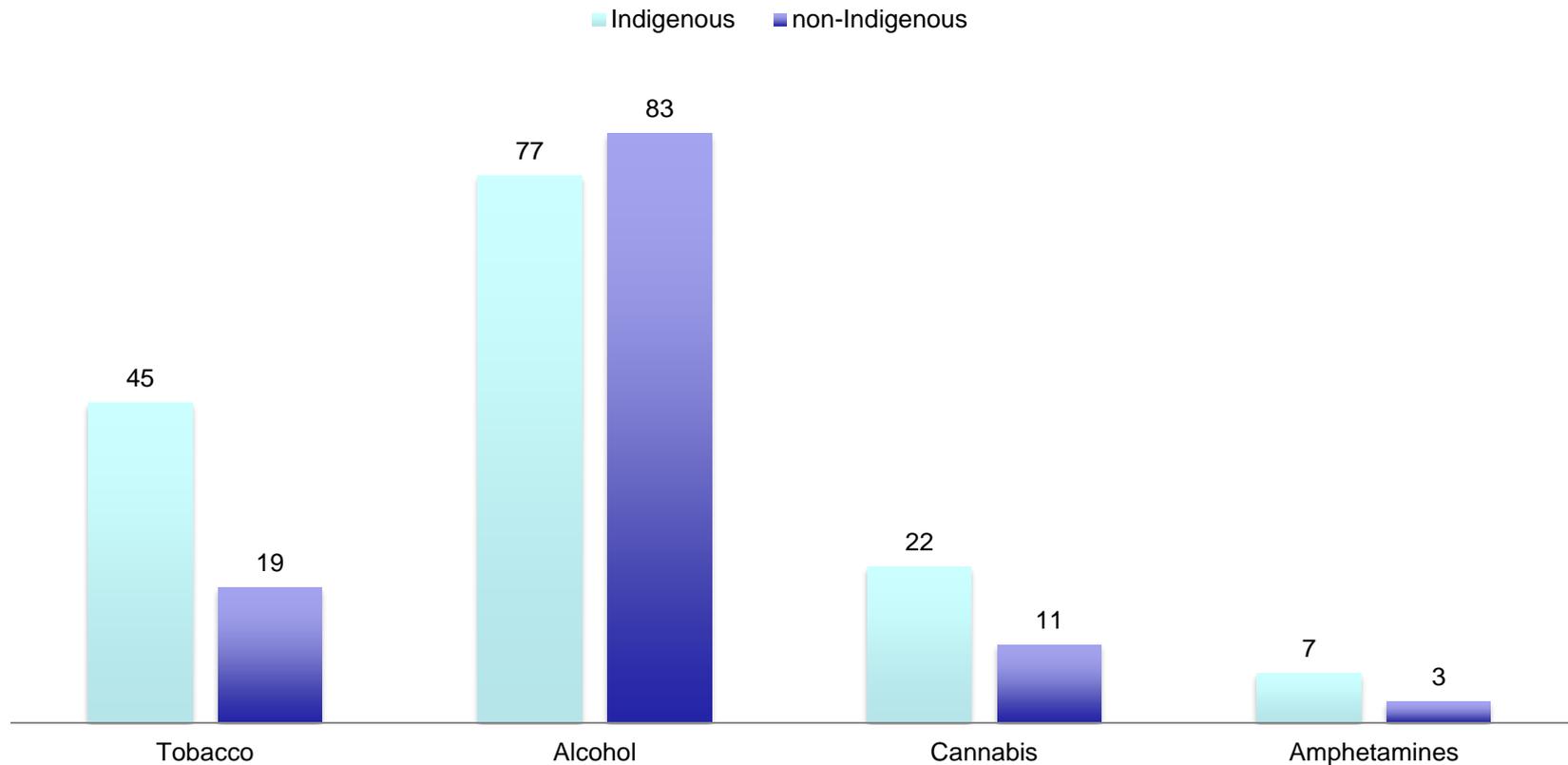
- Assemblage theory: an assemblage of any phenomena is the entire set of relational components/elements, speaking to the processes of how they ‘fit together’.
- Alcohol interventions (or responses) arise from arrangements of *social, historical, economic, cultural, regulatory, and political* factors.
- Multi-sited Ethnography (MSE) traces “people, connections, associations, and relationships across space” (Falzon, 2009, pp. 1-2).
- Fieldwork conducted 2013 – 2014, in four main sites in the NT: Alice Springs, Darwin, Katherine and Jilkminggan.



- In 2012 the per capita alcohol consumption in the NT adult population (Aboriginal and non-Aboriginal) was approximately 3.1 litres of pure alcohol higher than the nation as a whole.
- Although alcohol consumption had been on the decline in the NT between 2007 and 2011, in 2012 it increased by approximately 2 per cent (see Figure 1).
- *I think it's probably getting worse. You only have to go down Todd Tavern and have a look at the people that are lined up there and crowded into the pub. Because it only allows a certain number, so it actually control the traffic flow and people stand up and wait for the 2:00, when Aboriginal people turn into Russians Sorry, it's a joke. They rush to the bottle shop at 2:00 if they can get to another source of alcohol. (Alice Springs doctor)*



Source: (Australian Bureau of Statistics, 2013)



Use of other illicit drugs approximately 1.5 times higher in Aboriginal than non-Aboriginal population (Gray & Wilkes, 2010)



- Per capita consumption is 30% higher than the nation as a whole.
- Alcohol-attributable deaths and hospitalisations higher than anywhere else in Australia.
- Alcohol misuse costs the NT approx. \$642 million per year (police time, judicial system, medical treatment etc).
- The majority of assaults in the NT are alcohol-related, and Indigenous women are 18 times more likely to be victims of assault than non-Indigenous women.
- Alcohol related assaults and domestic assaults have been on the incline.
- Alcohol consumption increased in 2012 (after 6 years of decline)
- AHA biggest political funder (both CLP and Labour)



- In the NT, the *Northern Territory Liquor Act 1979* contained a provision enabling communities to apply to the Liquor Commission to become a 'restricted area'.
- *Alcohol Reform (Substance Misuse Assessment and Referral for Treatment Court) Act 2011*
- *Alcohol Reform (Prevention of Alcohol-Related Crime and Substance Misuse) Act 2012*
- *Alcohol Reform (Liquor Legislation Amendment) Act 2011*
- There were additional alcohol-related interventions and mechanisms created through these Acts, including: SMART Court and the Banned Drinkers Register (BDR). All three Acts were subsequently repealed and replaced by two new Acts in 2013: the *Alcohol Mandatory Treatment Act 2013*, and, the *Alcohol Protection Order Act 2013* (subsequently repealing all three former Acts). This had the effect of removing both the SMART court and the BDR, and in their place two new mechanisms were put in place:



- Alcohol Protection Orders (APO): individuals placed on an APO by the NT police are prohibited from purchasing or consuming alcohol and are not permitted to enter or be on any licensed premises at any time.
- Mandatory Alcohol Rehabilitation: people repeatedly taken into police protective custody due to alcohol misuse are required to undertake mandatory treatment.
- A specialist court dealing with offenders on criminal charges who had significant histories of substance abuse.
- Individuals issued with a Banning Notice for the purchase, possession and consumption of alcohol throughout the NT were placed on this Territory wide register.

Although there have been multiple AMPs in place in towns across the Territory (e.g. Alice Springs, Katherine, Tennant Creek), the re-invigorated Katherine AMP, announced in late 2013, is the only AMP that is operational.



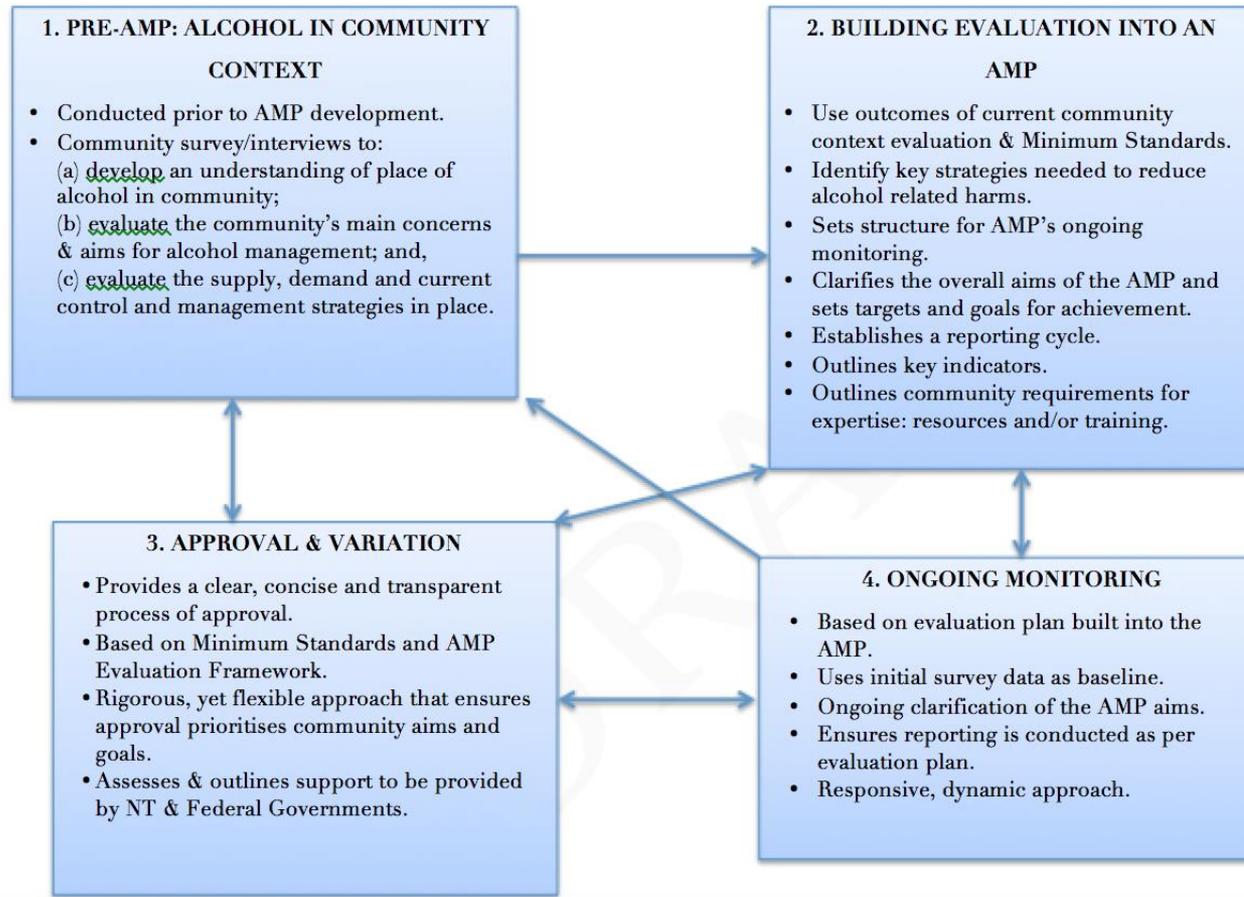
- KATHERINE CASE STUDY



- NPY WOMEN'S COUNCIL AND THE CURTIN ROADHOUSE CASE STUDY



FIGURE 1. AN EVALUATION FRAMEWORK FOR ALCOHOL MANAGEMENT PLANS





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