The Partysafe project
Working with an Australian rural community to reduce alcohol harm
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Introduction

High rates of alcohol consumption and harm in the remote northern and eastern regions of Western Australia support the need for greater prevention efforts in these areas (Daly & Philp 1995; Holman et al. 1993; Midford et al. 1998; Unwin et al. 1997). However, metropolitan focussed national prevention campaigns may not be appropriate in such rural communities, as the social and environmental factors that influence drinking are quite different (Midford & McBride 1999). Furthermore, the prevention ‘dose’ afforded by such campaigns may be quite small in individual communities. In addition, any prevention programme in rural areas needs to take into consideration the research that shows consumption predominantly occurs in private dwellings, rather than on licensed premises (Jeffrey & Milligan 2001; Midford et al. 1997; Boots & Midford 1995).

These factors were important considerations in formulating Partysafe as a demonstration project for preventing alcohol harm in high consumption rural communities. The other critical consideration was involvement of a suitable community and in this regard the town of Carnarvon was seen as ideal. It has a population of approximately 6,300 (Australian Bureau of Statistics 1999). The majority are of European descent, but a substantial minority are of Aboriginal descent (Australian Bureau of Statistics 1996). The local economy is quite diverse with strong fishing, horticulture, mining and pastoral sectors. The town has it own media in the form of local radio and newspapers. There is also a local Public Health Unit with a history of supporting health promotion projects. These qualities give the town stability, diversity, capacity and a sense of community, which in turn create a good foundation for a whole of community prevention project.

Acknowledgement: The Partysafe project was funded by Healthway and generously assisted by the Gascoyne Public Health Unit.
The location of the town in the north of the state means that patterns of consumption and harm are typically high. Alcohol sales data collected by the Office of Racing, Gaming and Liquor, Western Australia show that in 1998 consumption in Carnarvon was 17.2 litres of alcohol per person aged 15 years and older. This compares with state per capita consumption of 10.4 litres. Accompanying harm is also greater in Carnarvon. Unwin et al. (1997) give the number of alcohol-related deaths in the Gascoyne region (with Carnarvon as the main population centre) as 31 per 100,000 over the period from 1984 to 1995. This is considerably higher than the state average of 10 per 100,000.

**Implementation and rationale**

In the first instance community agreement to host the project was sought. Community input was then maintained through a local steering committee. The methodology deliberately emphasised local involvement in decision-making and flexibility in responding to local concerns, rather than research control of the intervention process. In this regard the local Public Health Unit was an important partner, providing valuable day to day support, strategic advice and access to local influence networks.

The initial rationale for the Carnarvon Partysafe project was identification of harms in rural communities associated with drinking in non-licensed settings and development of local prevention initiatives to reduce such harms. Interventions would be continuous over the whole 18 month life of the project, but there would be greater emphasis on the periods leading up to the Christmas holiday seasons in 1999/2000 and 2000/01. Partysafe adopted Thompson & Kinne’s (1999) predictive model of community operation as the conceptual basis for intervention planning.

Within this paradigm the community is viewed as a system of component parts held together by a dynamic social structure that is ‘long lasting, functionally independent, and relatively stable’ (p. 32). Carnarvon is well described by this model, being an isolated and discrete community with well established community structures and relatively low population turnover. A change in the behaviour of community members is thus best achieved by making changes to the community system as a whole.

As this was a demonstration project, evaluation had to be an integral part of implementation. Initial data collection would also be used to refine project focus in the light of identified community needs. Emphasis would be given to locally gathered, qualitative data because of the short time frame of the project. Communities take time to change and archival, quantitative data would not be sufficiently sensitive to detect the beginnings of any effects.

The Partysafe intervention comprised the following major component activities:

- Media advertising of prevention messages
- Media advocacy of prevention generally and particular action strategies being undertaken in the community at the time
- Publication of a weekly peer character cartoon strip highlighting alcohol issues and modelling behaviour change
- Participation in a series of high profile community collaborative campaigns (The Christmas Collaborative Campaigns).

Implementation of Partysafe was undertaken by a full time project officer, recruited from the local community. She came to the project with a good network of contacts, particularly in the health area. A formal community steering committee was established at the beginning of the project. However, contact between the project officer and the committee members occurred almost daily because of the nature of transactions in small communi-
ties. Accordingly, while local input into prevention choices was substantial, it occurred fairly informally. The other critical contribution from local steering committee members was support with implementation. Their local networks facilitated broader business and service agency involvement. A number of committee members were also involved in undertaking prevention activities, which better linked the project to the community. In some ways the facilitation of local collaboration was an intervention in its own right. Its impact has not been separately measured, but the eventual benefits are probably best illustrated by the achievements of the Christmas Collaborative Campaigns.

**Sources of data**

There were two major sources of project data:

1. Pre and post survey of approximately 300 Carnarvon residents – An intercept survey (n~300) was carried out in the main shopping centre during November 1999 prior to commencing the community intervention. This was repeated on completion of the intervention in January 2001. The sample was stratified by age, sex and Aboriginality. The survey gathered data on the following variables:
   - Demographics – Sex, Age, Occupation, Aboriginality (pre & post)
   - Time of alcohol consumption (pre & post)
   - Quantity of alcohol consumption (pre & post)
   - Location of alcohol consumption (pre & post)
   - Statements regarding issues of concern related to alcohol consumption (pre & post)
   - Recognition of project radio advertisements (post)
   - Recognition of project media promotional materials (post)
   - Awareness of project related events (post)
   - Behaviour change as a result of media promotions (post)
   - Recognition of the Partysafe cartoon character Mac (post)
   - Readership of the cartoon (post)
   - Importance of local nature of cartoon (post)
   - Understanding of cartoon message (post)

   The intercept method of data collection was chosen for a number of reasons. It offered the opportunity to readily select respondents in each sample stratum. Many Aboriginal people in the community did not have telephones. Additionally, local experience indicated that respondents were more relaxed and forthcoming when interviewed face to face in a familiar setting by a known community worker. The data collected in the surveys afforded analysis of each issue across a number of variables. Results that proved statistically significant are reported and discussed in terms of possible causation. The following variables were included in the analysis: gender, age, target group, level of consumption.

   Where data was nominal the Chi squared test was used. The p values presented are those associated with the likelihood ratio. In cases where data was of an ordinal nature the Mann-Whitney U test was used to compare pre and post distributions.

2. Pre and post key informant interviews – These informants were leaders from a variety of sectors in the local community. They were chosen because of their awareness of the activities, services, and general social milieu of the town. The interview was devised subsequent to the initial survey of the general public and hence, focused on issues raised by that survey. Respondents were asked about the following local alcohol related topics:
   - Health problems in general
   - Alcohol problems
   - Alcohol issues for men
   - Awareness of alcohol-related harm prevention programmes and interventions
   - Opinions regarding alcohol-related harm interventions
   - Recent changes in attitudes and behaviour in relation to alcohol consumption
Awareness of media coverage of alcohol-related issues
- Suggestions for future prevention strategies.

The pre and post interviews were carried out 12 months apart, beginning in January 2000. In all there were thirteen pre and ten post interviews. As far as possible the same people were interviewed. Where this was not possible an appropriate replacement (e.g. a new person in the same position) was interviewed.

Partysafe also contributed to the conception, planning and implementation of a whole community alcohol harm prevention strategy that operated over the 1999 and 2000 Christmas seasons. This took the form of two Christmas Collaborative Campaigns (CCC), which while distinct from Partysafe, were substantially a consequence of Partysafe’s work with the community. Accordingly, the effects of these campaigns have been included in this evaluation. Some of the initiatives of these campaigns were evaluated utilising the pre and post survey and are described under that heading. However, a description of the overall CCC and an evaluation of some interventions not covered by the community survey appears later in the paper.

Data analysis – Community surveys

Identification of target group

Respondents’ alcohol consumption for each day of the week was recorded. This was then used to create four consumption categories from Non-drinker to Excessive Drinker based on National Health and Medical Research Council guidelines for safe drinking levels (Pols & Hawks 1992). Consumption patterns from the pre survey were very important in refining the focus of the Partysafe intervention. On the basis of data contained in Figures 1 and 2 males aged between 25 and 45 years were selected as the primary target group for this project.

Problematic alcohol consumption was predominantly a male issue. The 25–35 year age group comprised almost half of the Excessive Drinkers. The Medium-Heavy Drinker category was dominated by the 36–45 year olds. There was also reason for concern regarding younger men, but it was decided to target the 25–45 year old males for the following reasons:

- Men in this age group are likely to be more receptive to change.

Figure 1. Breakdown of drinking category by gender

![Figure 1. Breakdown of drinking category by gender](image1)

Figure 2. Breakdown of drinking category by age

![Figure 2. Breakdown of drinking category by age](image2)
- Harm caused in domestic situations is likely to be higher in this age range.
- This age group is more stable residentially, which means they can be well accessed by a local prevention intervention.
- Men in this age group are more likely to have good community links through family, work and social networks and thus be more receptive to community prevention efforts.

Interestingly, the survey also indicated that a large proportion of the alcohol was consumed on private premises during Friday and Saturday evenings, confirming the relevance of targeting drinking in such settings.

Community alcohol consumption patterns

When the pre and post intervention community alcohol consumption patterns were compared, post-survey rates of consumption were found to be significantly higher (p=.0001). A possible explanation for this is the timings of the surveys. The pre-survey was carried out in November prior to the holiday season, whereas the post-survey was carried out in January at the height of the holiday season. Some support for this position is provided by post-survey findings of an increase in afternoon drinking. People on holiday have more opportunity to drink in the afternoon. This increase in consumption was mainly attributable to females. There was no statistically significant change in the pattern of male consumption (see Table 1). While the evidence is not conclusive and attribution of cause and effect is difficult, the result does suggest that Partysafe had a preventive effect on the males of Carnarvon.

Awareness of Christmas Collaborative Campaign radio advertisements

A series of approximately 60 radio advertisements were presented by community identities as part of the second Christmas Collaborative Campaign. These promoted safety, responsible alcohol consumption and safe sex. Based on the optimistic assumption that 50% of the population would be expected to hear radio advertisements, the percentage that heard the CCC advertisements (60%) was statistically significant (p=.00005). Furthermore, a greater proportion of drinkers (65%) heard the advertisements (p<.00001) and the hypothesis that being a drinker and hearing the advertisements were independent was rejected (p=.0008). This suggests that the advertisements were well targeted. These data are presented in Table 2.

An important element in the recall of the advertisements was local content. Many survey respondents mentioned the names of the community presenters.

Awareness of newspaper items

Throughout the Partysafe project newspaper articles/advertisements promoting safe partying, responsible hosting, and responsible alcohol consumption appeared in the local press. Three representative items were shown to survey respondents to prompt recall. Overall responses were high.

Table 1. Male drinking patterns at pre and post surveys

<table>
<thead>
<tr>
<th>Drinking Category</th>
<th>Non-Drinker</th>
<th>Light-medium</th>
<th>Medium-heavy</th>
<th>Excessive</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre Survey (n=130)</td>
<td>35</td>
<td>61</td>
<td>25</td>
<td>9</td>
</tr>
<tr>
<td>Post Survey (n=122)</td>
<td>29</td>
<td>56</td>
<td>31</td>
<td>6</td>
</tr>
</tbody>
</table>

Table 2. Relationship between being a drinker and hearing the advertisements

<table>
<thead>
<tr>
<th></th>
<th>Non-drinker (n=85)</th>
<th>Drinker (n=210)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Heard ads</td>
<td>41</td>
<td>136</td>
</tr>
<tr>
<td>Didn't hear ads</td>
<td>44</td>
<td>74</td>
</tr>
</tbody>
</table>
call was strong (86% of people recalled at least one item). Recall of individual items is presented in Table 3.

Item 3 had the highest recall. This may be related to the fact it was a news article, had a photo of local people or perhaps simply because it was the most recently published.

**Reported behaviour change**

After being asked about the above promotions, respondents were asked whether as a result of these promotions they had changed their drinking behaviour over the Christmas period. A total of 10% indicated that they had changed their behaviour.

**Community concerns**

Both the pre and post surveys included a question in which respondents were asked to state what alcohol-related issues or problems existed in Carnarvon. These pre and post lists were compared in order to examine any changes that had occurred in community opinion over the course of the Partysafe interventions. Analysis concentrated on the respondent’s first answer as representing the most pressing issue for that particular person. Table 4 highlights the major areas of opinion change.

**Street drinking**: There was a statistically significant decrease (p=.0004) in the number of people who reported that street drinking was an issue in Carnarvon. During the intervening year the police addressed the problem by preventing street drinking in prominent locations in Carnarvon. And this action may have been a contributory factor in the change.

**Violent or aggressive behaviour**: Less people in the post-survey reported violent or aggressive behaviour as the first alcohol issue that came to their mind (p=.0014). This may be related to a reduction in visible street drinking as discussed above.

<table>
<thead>
<tr>
<th>Issue</th>
<th>Pre-Survey % (n = 273)</th>
<th>Post Survey % (n = 296)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Street drinking</td>
<td>23.1</td>
<td>12.2</td>
</tr>
<tr>
<td>Violent or aggressive behaviour</td>
<td>12.8</td>
<td>6.8</td>
</tr>
<tr>
<td>Number of liquor outlets</td>
<td>1.1</td>
<td>4.1</td>
</tr>
<tr>
<td>Domestic violence</td>
<td>6.2</td>
<td>1.4</td>
</tr>
<tr>
<td>No alcohol issues</td>
<td>2.9</td>
<td>14.5</td>
</tr>
</tbody>
</table>

**Table 3. Recall of individual newspaper articles/ advertisements**

<table>
<thead>
<tr>
<th>Percentage of respondents recalling item (n = 296)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Item 1: Full page Partysafe Advertisement</td>
</tr>
<tr>
<td>Item 2: Quarter page Partysafe Advertisement</td>
</tr>
<tr>
<td>Item 3: News article + photo of local workers</td>
</tr>
</tbody>
</table>

**Number of liquor outlets in town**: More people in the post survey reported that there were too many liquor outlets in town (p=.0023). There was no specific source for the variance between the two surveys obtainable from further analysis of the data. This result may indicate an increase in community concern prompted by the higher-priority of alcohol issues in the local media over the last year. However, the numbers were small (with a swing from 1% of respondents in the pre-survey to 4% in the post survey) meaning the result should be interpreted with caution.

**Domestic violence**: There was a statistically significant reduction in the number of people reporting domestic violence as the first alcohol issue that came to their mind (p=.00015). Male opinion did not change, but females reporting this as an issue dropped significantly (p=.0004). This is probably a more sensitive indicator of change, because females tend to be the ones that experience domestic violence.
There are no alcohol issues in Carnarvon: A large increase occurred at post survey in the number of people who reported there were no alcohol issues in Carnarvon \(p<.00001\). While this could conceivably be interpreted as favourable, in fact, it is likely to be the opposite, indicating a lower awareness of alcohol issues than would be desirable after an intervention such as Partysafe. Visible problems may have decreased, but objective data indicates that alcohol still causes a lot of harm in Carnarvon. This suggests that there is still much work to be done in raising people’s awareness of the harms alcohol brings to the Carnarvon community.

Mac – Peer character cartoon

A major intervention of the Partysafe Project was an ongoing cartoon in the local press featuring a character named Mac (see Figure 1). He was portrayed as a male from the target group. He recognises he has a problem with alcohol and, over time, modifies his behaviour. Mac has a partner and two children meaning that his errant behaviour affects more than just himself. However, it was considered important that Mac make changes for his own reasons and not as a result of nagging or pressure. The cartoon, while humorous, was intended to present achievable lifestyle change. The plots of the cartoons revolved around Mac’s family, work, and friends. Local identities such as the local alcohol and drug counsellor were periodically written into the cartoon and these editions were particularly popular. Mac also attended events that were occurring in the community at the time of publication, which enhanced the local flavour of the cartoon.

Mac was recalled by 65% of those surveyed. This was based on aural cues (they were told Mac was a cartoon character in the local press). No picture of Mac was shown.

Of those who recalled the cartoon, 70% reported that they read it each week.

Of those who recalled the cartoon, 60% were able to clearly state the message portrayed.

Data analysis – Key informant interviews

Thirteen pre and ten post interviews were conducted with key informants from Carnarvon to gain a more informed and detailed perspective on local alcohol issues

Conception of local health problems

50% of respondents mentioned alcohol as a serious problem in the pre-interview. This was followed by nutritional and related problems such as heart disease. The post interviews followed much the same pattern with regard to alcohol. However, among the other issues mentioned, obesity and related problems such as heart disease were more prevalent.

Conception of local alcohol problems

At both times respondents seemed very aware of how local norms/culture support high alcohol consumption in Carnarvon. Phrases used included ‘frontier attitude’, ‘obligation to drink with others’, ‘children grow up accepting alcohol as the norm’ and ‘considered masculine to drink’. The post-intervention responses indicated increasing awareness of the seriousness of alcohol as a local health problem. This suggests that Partysafe had an educative effect on community opinion leaders.

Conception of alcohol issues for men

The respondents’ assessment of alcohol issues for men was very similar to their statements regarding alcohol issues in general. Issues did not change from the pre to post survey and
there was considerable emphasis on social/cultural expectations and norms. Secondary concerns were related to weight gain and consequent health problems.

**Awareness of prevention programmes in Carnarvon**

The interviews indicated a greater awareness of local campaigns at the post (the pre interviews was carried out in January 2000 just subsequent to the beginning of Partysafe and after the first Christmas Collaborative Campaign). Table 5 illustrates not only the growth in awareness of the Partysafe and CCC interventions, but the impact that the local projects had compared to State and National campaigns, which were barely mentioned in the post survey. The Mac cartoon has not been included in this table, because publication had not commenced when the pre interviews were conducted. However, key stakeholder awareness of the cartoon was 100% in the post survey. This again supports the importance of local projects and content.

Another point of interest is that the 13 people interviewed in the pre survey identified 16 different alcohol programmes whereas the 10 people from the post survey named 24 different programmes. This again indicates a greater awareness of alcohol-related harm prevention programmes in the post-survey. All but two of the post respondents were aware that Partysafe was targeting men’s drinking in particular.

Awareness of media interventions was very high: newspaper ads/articles (Partysafe & CCC) 70%; radio advertisements 9%.

**Opinions regarding harm prevention interventions in Carnarvon**

The key informants’ opinions regarding the CCC were particularly positive. There was
considerable ownership of the campaign’s achievements. However, the strongest theme related to the long term community benefits of having a range of local agencies involved in a large scale prevention initiative. The linkages and experience gained from this involvement were seen as strengthening the community.

The contribution of the Christmas Collaborative Campaigns

Partysafe was not totally responsible for this broader community initiative, but it was a major contributor in terms of conception, planning and execution. More importantly, Partysafe facilitated the community mobilisation and capacity building that made these campaigns possible. The first Christmas Collaborative Campaign (CCC) was held over the 1999/2000 season. The Carnarvon business community joined forces with the Gascoyne Public Health Unit, the COMPARI Community Drug Service Team, other local service agencies and the Partysafe project to reduce the alcohol-related harm during the festive season.

The 1999/2000 CCC strategies were the following:

Media: Series of radio advertisements written and recorded by community identities, series of ongoing newspaper editorials and advertisements, support from, and integration with, existing regional and statewide campaigns.

Provision of food: Liaison with licensees on provision of better quality bar snacks, bar snacks to be provided at a more ‘customer-friendly’ time, healthy snack tips pamphlet developed and distributed through takeaway liquor outlets, shire lobbied to permit a food van to operate outside licensed premises in the town centre at closing time.

Alcohol consumption: Encourage the purchase of low alcohol products through take away liquor outlet and bar promotions, encourage the spacing of alcoholic drinks by placement of a free, self service, refrigerated water dispenser in licensed premises, reinforce responsible serving practices through increased dialogue with Licensees, develop Licensee Responsibility Package to be distributed to occasional licence applicants by the Clerk of Courts.

Public health and safety: Provision of all night lighting in town centre and other identified trouble spots, commitment by police to increase night patrols, police monitoring of patrons using the food van outside licensed premises, liaison with Aboriginal patrol.

Transport: Roadhouses to provide free coffee for drivers, donation of vouchers by local taxi company to reduce driving after drinking.

Results from the 1999/2000 Christmas Collaborative Campaign

Perhaps the most important outcome of the 1999/2000 CCC was the development of a number of strong partnerships as a result of agencies working together on a well-received campaign. The shared purpose, good will, and extensive range of initiatives created a greater sense of community ownership.

The local police did provide data indicating a reduction in harm. There was a reduction in the total number of incidents reported compared to the previous year. In particular do-

<table>
<thead>
<tr>
<th>Campaign</th>
<th>Pre %</th>
<th>Post %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Partysafe</td>
<td>38</td>
<td>70</td>
</tr>
<tr>
<td>Christmas Collaborative Campaigns</td>
<td>15</td>
<td>60</td>
</tr>
<tr>
<td>National alcohol campaigns</td>
<td>23</td>
<td>20</td>
</tr>
<tr>
<td>State alcohol campaigns</td>
<td>8</td>
<td>0</td>
</tr>
</tbody>
</table>

Table 5. Key stakeholder awareness of harm prevention interventions
Domestic violence incidents were down by 30% and motor vehicle accidents were down by 50%. The statistics, while encouraging, were based on small numbers and a single comparison. Attributing cause to the CCC would be premature and the real value lies in the process involved in obtaining and presenting these data. It suggests greater commitment to prevention, evaluation and collaboration.

The success of the first CCC was a catalyst for further community involvement and commitment in the following year was easier as a consequence. The 1999/2000 campaign was the eventual State winner of the Prime Minister’s Award for Excellence in Community/Business Partnership, which further boosted community pride in their achievements. In addition, the following practice changes were institutionalised:
- Commitment from Local Government to continue all night street lighting in the town centre
- Responsible Server Training developed for bar staff
- Support from Licensees for delivery of Responsible Server Training
- Permanent placement of free, self service water dispensers in licensed premises
- Commitment by the Clerk of Courts to reinforce Licensee responsibility in the case of occasional licence applicants.

**Discussion**

The major beneficial impact of the Partysafe project was the high level of awareness created within the community. Of particular interest was the effectiveness of local content in attracting community attention to the project’s message of reducing alcohol-related harm. Community interest was most evident in the locally produced Mac cartoon. A high proportion of survey respondents not only recalled the cartoon, but also claimed to read it each week, and were able to express ‘the message’ it encapsulated. The cartoon proved to be an inexpensive, interactive, and on-going method of presenting the Partysafe message. Furthermore, the weekly nature of the strip meant the issues were continually before the Carnarvon community. A regular and evolving intervention of this type has the benefit of being able to be extremely responsive to community events and issues. This immediacy gives it a major advantage over fixed national and state campaigns. While Mac grew and changed with the Carnarvon community, the national campaign advertisements were simply repeated. Another advantage of the Mac intervention is the ease with which it can be adapted to other rural communities. A number of other country towns have asked if they can modify the cartoon series to suit their own circumstances.

A second initiative that highlighted the utility of local content was the CCC series of radio advertisements. These utilised local personalities and were notable for their effectiveness in bringing attention to the prevention messages. Importantly, drinkers were particularly sensitive to this approach and recall seemed to be closely linked to recognition of the local identities used in the advertisements.

These findings indicate that many of the interventions developed by Partysafe for Carnarvon could be successfully applied in similar small rural communities. The key ele-
ments were local content and local media. Messages with a strong local flavour that were delivered via local media had the greatest impact in terms of recall. Also encouraging were the changes in community opinion regarding street drinking, aggressive behaviour, and domestic violence. These results show people are feeling safer around Carnarvon. This is a good starting point, but longer-term analysis is required to assess whether this is because of decreased visibility or an actual decrease in problem behaviour. The reduction in street drinking may satisfy the community, as this has tended to be seen as the major alcohol problem. However, street drinking is not necessarily associated with the most serious harm. Less visible harms also need to be addressed in ongoing interventions in the region.

In addition to the above impact aims, a major emphasis of the project was to mobilise the Carnarvon community to work cooperatively in minimising alcohol-related harm. Partysafe worked very closely with the local Public Health Unit and this collaboration proved to be influential in developing awareness and effecting changes in the community. Evidence for this is seen in two major ways. Firstly, the partnership was the main force in mobilising the community to undertake the Christmas Collaborative Campaign. This was widely seen as a worthwhile local prevention programme and has continued subsequent to the completion of Partysafe. Secondly, the partnership has formed the basis for a follow-on collaborative health promotion program targeting the health of men in the region. This new concern came from a realisation over the course of implementing Partysafe that many local alcohol problems grow out of dysfunctional male health behaviour norms.

The brief nature of the Partysafe project meant that it was always going to be difficult to demonstrate effect in terms of objective serial measures. The much larger COMPARI project operated as a research demonstration for over 3 years and it also had difficulty in this regard (Midford & Boots 1999). However, important change has been achieved by Partysafe. Local efforts to prevent alcohol harm are greater, more systematic and better regarded. This has long term implications in terms of the community’s sense of its own efficacy and willingness to take on subsequent prevention initiatives.

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reduce alcohol-related harm associated with drinking in private settings. However, subsequent to the pre-intervention community survey, greater emphasis was placed on influencing males in the age range 25–45 years, because of the high risk drinking behaviour identified in this group. The intervention comprised a number of components, including local media advertising and advocacy; participation in high profile community collaborative campaigns and use of a peer character cartoon strip to highlight alcohol issues and model behaviour change. Use of local media content was particularly effective in raising community awareness as to the project’s message and obtaining support for its aims. On completion of the intervention phase, process and impact data were gathered from a number of community sources. The major impact of the Partysafe project in its own right was heightened awareness of alcohol issues in the community. However, the project also contributed in a major way to institutionalising a collaborative Christmas alcohol harm prevention campaign.

Summary

Richard Midford & Martin Cooper & Julie-Anne Jaeger: The Partysafe project: Working with an Australian rural community to reduce alcohol harm

Partysafe was a community mobilisation project, conducted in the remote Northwest town of Carnarvon in Western Australia over a period of 18 months. The initial goal was to