

Do community interventions targeting licensed venues reduce alcohol-related emergency department presentations?

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Abstract

INTRODUCTION AND AIMS: Excessive alcohol consumption is related to substantial health and social order costs. Many of the harms have been identified as coming from licensed venues. Most communities struggle to find interventions that are effective, particularly in an environment of little federal government action. Furthermore, most interventions are based on little or no empirical evidence. This study aims to investigate the effect of a suite of interventions on emergency department (ED) attendances in Geelong, Australia. **DESIGN AND METHODS:** This paper reports stage one findings from the Dealing with Alcohol-Related Problems in the Night-time Economy project (DANTE) and specifically examines all alcohol-related injury frequencies before to after intervention in the City of Greater Geelong of Victoria, Australia, from 2005 to 2009. Auto-regressive integrated moving average time-series were used to determine the effect of the interventions on ED attendances in Geelong. **RESULTS:** There were 3934 triage presentations involving

alcohol. Over two-thirds (68.9%) of triage presentations were male and over half (58.5%) of alcohol-related attendances occurred on the weekend. The time-series analyses indicated that ID scanners ($z = 2.66$, $P < 0.001$) and the Just Think awareness campaign ($z = 4.21$, $P < 0.001$) were significant predictors of increases in alcohol-related injury presentation rates to the ED. DISCUSSION AND CONCLUSIONS: Overall, the community interventions implemented have not been associated with reduced alcohol-related attendances at the ED. The findings raise questions about whether targeting the night-time economy is effective and whether interventions should instead be targeted at reducing whole-of-community alcohol consumption.

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