

## Public participation in local alcohol regulation: Findings from a survey of New Zealand communities

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### Abstract

**Introduction and Aims.** In many high-income countries, the responsibility for alcohol regulation is being devolved from central to local governments. Although seeking public input is typically required by law, there remains little empirical evidence on whether and how the public is involved. We investigated public participation in local liquor licensing and related regulation in New Zealand. **Design and Methods.** In 2007, we randomly sampled 2337 residents from the national electoral roll in seven communities and invited them to complete a postal questionnaire assessing their level of general community engagement, whether they had taken action on alcohol issues, and barriers to participation they perceived or encountered. **Results.** A total of 1372 individuals responded (59% response). Fifty-two percent were current members of community organisations, and 40% had ever taken action on a local issue. Respondents considered alcohol to be a major problem locally, but only 4% had been involved in action to address a problem, whereas 18% had considered taking action. In their communities, 12% and 24%, respectively, felt they could influence the number or location of alcohol outlets. There was little variation across communities. **Discussion and Conclusion.** Despite high levels of general community engagement and alcohol being widely regarded as a local problem, few community members reported acting on alcohol issues, and their self-efficacy to effect change was low. [Kypri K, Maclellann B. Public participation in local alcohol regulation: Findings from a survey of New Zealand communities. *Drug Alcohol Rev* 2014;33:59–63]

**Key words:** alcohol, local government, policy, community, participation.

### Introduction

Centralised controls on the price and availability of alcohol have decreased markedly in many countries, with many of the responsibilities for managing alcohol-related problems being devolved to local government [1]. In New Zealand, the 1989 *Sale of Liquor Act* shifted the responsibility for liquor licensing to local government on the grounds that it would facilitate community control [2]. These changes occurred in the context of a political movement away from social democratic values toward a system underpinned by neoliberal economics [3].

In the years that followed, the number of alcohol outlets increased substantially, and alcohol became available in grocery stores and cafes [4]. Citizens and public health agencies have repeatedly expressed

concern about the effects on hazardous drinking and related disorder [4]. An architect of the 1989 legislation came to consider it a public health catastrophe [4] and recommended major reform [5].

In 2009, the Law Commission was tasked by government with a ‘root and branch’ review of the sale and promotion of alcohol. It published a comprehensive issue paper [4] and recommendations, including a requirement that communities have meaningful input on the number, character, location and operation of alcohol outlets in their localities [6]. The government responded by passing legislation in 2012, including provision for Local Alcohol Policies which seek to meet these objectives [7]. We sought to investigate public participation in liquor licensing and related regulation in a period predating the new laws with a view to examining change in participation in future years.

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## Methods

### *Design*

The design was a cross-sectional survey in seven Territorial Authority areas.

### *Study sites*

There were four north island areas (North Shore, Hamilton, Palmerston North and Wellington) and three south island areas (Selwyn District, Dunedin and Alexandra) selected for a project examining modifiable determinants of hazardous drinking among university students at campuses located in the first six of these areas [8]. It was recognised that many determinants of student drinking are nominally under the control of local government (e.g. outlet density [9]).

The methods and questionnaire were piloted in a seventh site: the rural township of Alexandra [10], selected to provide a contrast with larger metropolitan areas. The questionnaire was found to be acceptable in the pilot, and given that sampling was the same as in the main study, data from Alexandra were included in the overall analysis.

### *Sampling and statistical power*

Residents were randomly selected from the national electoral roll in each area and invited to participate. It is compulsory in New Zealand for those aged  $\geq 18$  years to be on the electoral roll. For the 2006 general election, 95% of eligible voters were registered [11].

To be eligible for the study, those invited to participate had to be currently living in the area in which they were registered to vote. There were no other restrictions on eligibility. One hundred residents in Alexandra and 400 in each of the other six communities were invited to participate. The sample size of 400 assumed a 50% response rate (i.e. 200 respondents in each community), producing a sampling error of less than  $\pm 7\%$  in each community and  $\pm 3\%$  overall.

### *Procedures*

The recruitment procedures have been described in detail elsewhere [10]. In summary, questionnaires were posted with a personalised letter, information sheet, stamped return envelope and a pen. The mailing procedures were based on protocols found to maximise participation rates in postal surveys [12]. Two weeks later, a reminder letter was sent to non-respondents. After another two weeks, a reminder telephone call was

made to those with a listed number. Another reminder letter and questionnaire were sent to those without a listed telephone number.

### *Questionnaire*

We used a 12-page questionnaire (available in Supporting Information Appendix S1), including the items shown in the tables.

### *Analysis*

Unweighted proportions of responses to questions in each community were examined, and  $\chi^2$ -tests were used to identify differences in proportions reporting behaviours of interest in the seven areas.

## Results

Of 2500 residents invited, 1372 returned a complete or partially complete questionnaire that met a minimum data requirement. One hundred and sixty-three individuals were deemed ineligible because they no longer lived at the address on the electoral roll. The final response rate was therefore 59% (1372/2337). Non-respondents included 307 (13%) who declined to participate and 658 (28%) with whom we could not establish contact.

The median age of voters ( $\geq 18$  years) across the seven communities during the March 2006 Census was 41 years. The median age of respondents was 47 years (range: 17–92). The median age of the sample in each community, except Alexandra, was higher than that of the population in that area (range of difference from the Census: 2–6 years). In the population aged  $\geq 18$  years in the seven areas, 52% were women. In six of the communities, samples contained a slightly larger proportion of women than the general population (range of difference: 1–6%). The North Shore sample contained 2% fewer women than the general population. In each area and overall, Māori (range: 0–6%), Pacific Islanders (range: 0–2%) and Asians (range: 1–9%) were under-represented among the respondents.

Table 1 shows the number and proportion of respondents who reported having undertaken voluntary work, being current members of community organisations or having ever taken action to address a community issue. Around half reported recent voluntary work and current membership of a community organisation, and 40% had taken action on an issue. There was little variation in these proportions across communities.

Table 2 summarises community members' self-reported involvement and self-efficacy on local alcohol issues. Four percent had ever been involved in action on a local alcohol issue, 2% had ever encouraged their

**Table 1.** Prevalence of respondents' involvement in community activities

		Community							
		North Shore	Hamilton	Palmerston North	Wellington	Selwyn District	Dunedin	Alexandra	All
Unpaid voluntary work in your community in last 2 years: once or more ( <i>n</i> = 1301)	<i>n</i>	95	93	102	105	140	125	34	694
	% (95% confidence interval)	48 (41, 55)	57 (49, 65)	48 (42, 55)	54 (47, 61)	57 (51, 63)	55 (49, 62)	54 (42, 66)	53 (51, 56)
Currently a member of a community organisation ( <i>n</i> = 1305)	<i>n</i>	94	84	108	105	124	124	44	683
	% (95% confidence interval)	47 (40, 54)	51 (44, 59)	50 (44, 57)	54 (47, 61)	50 (44, 57)	55 (49, 62)	70 (58, 81)	52 (50, 55)
Ever taken action to deal with an issue or problem ( <i>n</i> = 1293)	<i>n</i>	84	67	87	87	95	88	11	519
	% (95% confidence interval)	42 (35, 49)	41 (34, 49)	40 (34, 47)	45 (38, 52)	39 (33, 45)	40 (33, 46)	19 (9, 29)	40 (37, 43)
									<i>P</i> = 0.07
									<i>P</i> = 0.04

After Bonferroni adjustment for multiple tests (0.05/3), none of the differences between communities were statistically significant ( $<0.017$ ).

local council to address alcohol issues and 18% had thought of taking action. Twelve percent felt they could influence the number of alcohol outlets in their community, whereas 24% felt they could influence the location of alcohol outlets. There was a little variation in these proportions across communities.

## Discussion

Only 4% of respondents reported ever being involved in action on local alcohol issues despite relatively high levels of community engagement more generally, and there was remarkably little variation across these seven diverse communities on these measures. Few respondents felt they could influence the number of alcohol outlets in their areas, whereas others felt they could influence the location of alcohol outlets somewhat more.

The sample was not intended to be nationally representative, but rather, we sought to recruit representative samples from a diverse range of Territorial Authority areas because that is where local alcohol policy is made and implemented. The inferences we make are to New Zealand because the seven areas we studied are demographically diverse, including large cities, regional centres and small towns. However, it should be noted that they are, on average, wealthier than other Territorial Authority areas, and most of them include smaller proportions of Māori and Pacific peoples than the country as a whole (<http://www.stats.govt.nz/Census/2006>). It is not known whether Māori and Pacific peoples are more or less engaged in local government affairs than the general population, but there is evidence that people of lower socio-economic status and ethnic minorities are less involved than the general population [13], such that levels of engagement in alcohol issues may be lower in many communities than indicated in this study.

Late respondents did not differ from early respondents in their support for alcohol policies, suggesting that estimates of public opinion are less biased by non-response than are estimates of alcohol consumption [14]. Coverage bias, arising from adults not being on the electoral roll, is low given the enrolment proportion of 95% [11]. Information bias is probably a greater concern, arising from differences in interpretation of questions or difficulty recalling whether voluntary community work or action on alcohol issues had been undertaken.

The only comparable research we have identified is an Australian study of residents randomly selected from the electoral roll in western Adelaide and invited to complete a postal questionnaire about health and community participation (response 64%, *n* = 2542) [15]. Fourteen percent of respondents had been in a volunteer group, 11% had been involved in a school group

**Table 2.** Community members' self-reported involvement and self-efficacy on local issues concerning alcohol

		Community					
		North Shore	Hamilton	Palmerston North	Wellington	Selwyn District	All
Ever been involved in any action on a local issue concerning alcohol ( $n = 1273$ )	$n$ % (95% confidence interval)	9 5 (2, 8)	9 6 (2, 9)	10 5 (2, 8)	6 3 (1, 6)	8 3 (1, 6)	2 3 (0, 8) 50 4 (3, 5)
Ever encouraged council to address alcohol issues ( $n = 1253$ )	$n$ % (95% confidence interval)	2 1 (0, 2)	6 4 (1, 7)	5 2 (0, 5)	6 3 (1, 6)	3 1 (0, 3)	2 3 (0, 8) $P = 0.77$ 27 2 (1, 3)
Ever thought of taking action but did not ( $n = 1269$ )	$n$ % (95% confidence interval)	39 20 (14, 26)	30 19 (13, 25)	48 22 (17, 28)	43 22 (16, 28)	26 11 (7, 15)	7 16 (5, 27) $P = 0.39$ 227 18 (16, 20)
I feel that I can influence the number of liquor outlets in my community: agree/strongly agree ( $n = 1298$ )	$n$ % (95% confidence interval)	32 17 (11, 22)	23 14 (9, 20)	17 8 (4, 11)	22 11 (7, 16)	37 15 (11, 20)	2 3 (0, 8) $P = 0.02$ 155 12 (10, 14)
I feel that I can influence the location of liquor outlets in my community ( $n = 1297$ )	$n$ % (95% confidence interval)	54 28 (22, 35)	38 23 (17, 30)	47 22 (16, 27)	40 21 (15, 26)	68 28 (22, 33)	12 19 (9, 29) $P = 0.09$ 307 24 (21, 26)
$P = 0.59$							

After Bonferroni adjustment for multiple tests (0.05/5), none of the differences between communities were statistically significant ( $<0.01$ ).

and 23% had attended church in the previous 12 months. The prevalence of individual participation in various forms of civic engagement ranged from 4% having attended a council meeting to 41% having signed a petition. Levels of collective participation ranged from 2% (involvement in a local government group) to 6% (membership of a community action group). Baum *et al.* [15] asked about specific types of community involvement and civic engagement, and respondents may have been involved in more than one of these. If this were the case, then perhaps the rates of general civic participation are somewhat higher in New Zealand.

Against this backdrop of prevalent community activity in social causes, engagement in local alcohol issues was very low in New Zealand. Residents' self-efficacy to influence the density and the location of alcohol outlets was low, suggesting communities have not felt empowered to use official processes to control how alcohol is sold or do not know how to exercise the powers they have. With the new alcohol legislation in place from 2013, community engagement has become more important as arguably the only mechanism for affecting known environmental risk factors for hazardous drinking [7]. There is substantial uncertainty about whether Local Alcohol Policies will empower communities or be subverted by commercial interests. Early signs are that policies seeking to restrict the density or opening hours of outlets will be fiercely contested by the alcohol industry [16]. In addition to revisiting the legislation in light of what transpires in the coming years, there would be value in gaining better understanding of why communities are not better engaged in local alcohol regulation given the high levels of civic involvement and the apparent widespread concern about alcohol-related harm [10].

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## Supporting information

Additional Supporting Information may be found in the online version of this article at the publisher's web-site:

Appendix S1. Community Views on Alcohol-Related Problems.