I would like to thank the organisers for inviting me to present at this conference.

This presentation will give you an overview of the Kalgoorlie Alcohol Action Project, what we are trying to achieve and how we approach prevention of alcohol related harm in a west Australian mining community.
Some background information on the city of Kalgoorlie-Boulder

The city of Kalgoorlie-Boulder is located just south of Great Western Desert in Western Australia some 600kms east of Perth. It has a population of approximately 30,000 and it is the capital of the Goldfields Region. The Goldfields Region constitutes 1/3 of Western Australia and is approximately twice the size of Poland.

The population is highly international and some 10% are of aboriginal descent, which is higher than in other areas in Australia.

It is one of the world’s most important mining areas with Gold and Nickel as the main minerals. Kalgoorlie-Boulder has Australia’s biggest open cut mine, it’s about 300meters deep, 2kms wide and 4kms long.

The population is highly transient and 2/3 changes every three years and 20% of the population leaves within 12 months.
The Kalgoorlie Alcohol Action Project is a joint venture between the National Drug Research Institute at Curtin University in Perth and the City of Kalgoorlie Boulder. The project will be running for a minimum of 3.5 years and the aim is to reduce alcohol related harm from excessive drinking.
The project has an “all-of-community” approach, where the main aim is to change the drinking culture of the community.

In addition to targeting the whole community special focus will be put on various target groups, depending on where our research findings guide us. We do not pursue any area without a solid evidence base.

We have been very clear in our communication with the community that this is a whole of community project. Otherwise there is a significant risk that people say that it is “those over there who are the problem, so there is no need to focus on us.”

In addition to the broad all of community approach and focusing in on special target groups we will also push to increase awareness at the local and state political levels.
In 2006 we conducted a baseline survey where we investigated people’s perception on alcohol and alcohol related harm. Earlier studies had showed significant higher drinking levels and levels of alcohol related harm in comparison to the rest of the state. It was therefore determined important to investigate people’s perceived views of the current situation.

A representative sample of 400 individuals were interviewed on the streets of the city utilising a specially developed questionnaire.

In addition to the questionnaire study we also wanted to investigate the community’s readiness for change. This was done to determine what kind of interventions to initiate and whether these interventions would be accepted by the community.

During the latter part of 2006 we conducted interviews with 16 key informants in the community, a snowball sampling method was utilised with the goal of identifying people in key positions (community members, agency representatives, etc). Each interview took on average 45 minutes to conduct.

An instrument called “Community Readiness Model” was used, an instrument developed by the Tri-Ethnic Center for Prevention Research at Colorado State University.
Community survey results

- 68% of those who drink consume alcohol weekly.
- 1 in 5 consume alcohol every day, which is twice the state average.
- Binge drinking is high among both men and women.
- The majority of respondents usually drank alcohol at home (65.4%) or at the pub (37.3%)
- 50.6% consume most alcohol at home

Our results showed that approximately two thirds (or 68%) of those who have had at least one standard drink in the past year, drink at least once a week and 1 in 5 do so everyday, a rate which is twice the state average.

Men binge drink approximately twice as much as the state average and women binge drink approximately three times as much as the state average.

The majority of respondents usually drank alcohol at home or at the pub.

Over half of the sample reported that they drink most of their alcohol at home.

People consider themselves to be moderate drinkers.
In the survey people were asked to identify what they saw as the most prevalent problems in the community and this is their response.

The most prominent problem in their view was alcohol related violence (e.g., fights in bars or in the street), followed by public drunkenness and drink driving.

When asked what problems they perceived had increased the most during the past 12 months the picture is slightly different with underage drinking coming first, followed by domestic violence and alcohol related violence.

If we compare data related to violence in Kalgoorlie-Boulder with the situation in the rest of the state this community shows alarmingly higher levels. For example, per capita night time assaults, which is a proxy measure of alcohol related problems, were approximately 83 per 10,000 residents in Kalgoorlie-Boulder while an equivalent state figures indicated approximately 6 per 10,000 residents (these are 1997/98 figures).
The readiness for change interviews, which is scored between 0 and 10, indicated that key informants saw that the overall awareness of the average community member is relatively low in terms of knowledge of current effort and what agencies that was available if need be.

The political leadership was perceived as generally positive to take action, especially if there was a solid evidence base to prove the case. But at this particular point in time the perception is that they aren’t sure what to do.

The community climate came out as polarised with those who didn’t see this as a problem at all but rather as a way things are and always will be. On the other side there were those with a clear idea what the issues are and what should be done.

The overall knowledge of alcohol related harm is at best very limited, it was clearly stated that knowledge developed when and if people were faced with a problem and needed to look for assistance.

The perception is that there are available resources in the community but they are not used either because people don’t know what to do and how to allocate resources.

So with the results of the baseline survey and the readiness for change interviews it was quite clear that one of the most imminent tasks ahead was to increase community awareness about alcohol related harm. This would at the same time assist in promoting the project and brand our new take AIM logo.

We are also in the process of comparing our results with data from the police, hospital and ambulance services.
The analysis of the survey results was concluded just prior to Christmas and as a first step in our community awareness raising effort we, in collaboration with a number of other agencies, launched an information campaign.

We developed an information pack and the take AIM logo (see above) 2000 gift bags, containing the information pack were distributed through liquor outlets and various workplaces. In addition we ran a radio information campaign during the last 10 days prior to Christmas with 5 different messages. Two of those messages sounded like this (push button) These messages were broadcasted through commercial radio since most people listen to these channels.

The Christmas campaign was independently evaluated through a telephone survey, with a sample of 230 randomly selected people. What came out was that the main message got through to people, approximately 30% of the sample were aware of the campaign. And 78% of those remembered the take AIM message, take alcohol in moderation.
In addition to raise the overall awareness in the community three key groups crystallised that needs to be approach in a more specific manner.

First, young women, with a high disposable income who drink at harmful levels.

We also need to target at home drinkers, since over 60% of the respondents consume their alcohol at home, usually before they go out to the pub.

But furthermore, if we want to change the attitudes of the community and hope for some sustainable changes we need to target youth.
School poster competition

- Aim: Raise awareness among high-school students about alcohol related harm.
- Target group: years 8–12
- Indigenous & non-indigenous themes
- Headings: drink spiking, party smart, space your drinks, drink driving.
- Incentives for schools & students to participate
- Outcome: reduce harmful drinking among youth and develop information material by youth for youth that can be used throughout the project.

Part of our strategy is to keep our presence and momentum up in the community and we have just launched a school poster campaign aimed at high school students in year 8-12. The purpose of the campaign is to raise the awareness within this group about the harms associated with alcohol use, particularly if you are young.

Kalgoorlie-Boulder has an indigenous and non-indigenous population we want to involve both groups since they share the same dangers of alcohol.

We are using similar headings to those used in the radio campaign as a way to strengthen our message.

We have a small financial incentive for the schools to urge them to promote this to their student and we see this as an entry point to possible develop further school based interventions.

The students and the runners up will receive various prizes as a way to motivate their participation.

The main goal is to make them think about the issues related to drinking and the harms they expose themselves too, we are also hoping that some of the information will reach their parents as well. The next step to prevent harmful drinking is to, in collaboration with the local drug action group, develop a package to target school leavers later in the year.
Young women

Focus groups
- How are they drinking?
- Why are they drinking?
- What would change their drinking patterns and drinking levels?
- What messages would they adhere to?

Media campaigns
- Radio
- Women magazines
- Newspapers

Since our study results indicate that young women drink at hazardous levels we want to develop an intervention with specific focus for them. But instead of doing something that we think will benefit them we are going to run a number of focus groups.

During the focus groups we will try and ascertain how women drink, why they drink, what would make them change their drinking behaviour and what kind of messages would grab their attention. This is a group who generally have a high disposable income and they are therefore not particularly price sensitive.

The result of the focus groups will then be used run a media campaign in radio, women’s magazines and newspapers, in addition we will look into developing other interventions with local agencies, for example women’s health organisations, to target this particular group.
As indicated by the evaluation of the Christmas campaign, the Take AIM message is getting through to the community, which is to use alcohol in moderation.

But it has become clear during the Christmas campaign, and through our survey, that the concept of moderate drinking is slightly different from, lets say Perth, and is far from the guidelines of the National Health and Medial Research Council of Australia (which is 2 standard drinks per occasion for women and 4 standard drinks per occasion for men).

Our next goal is therefore to define “moderate” in a way that is understandable for community members, guidelines like “standard drinks” seems to have little effect. We need to educate people on how easy it is to step over the line and binge drink and make them aware of the harmful effects of excessive drinking, without pointing fingers.

We try, throughout the project we are trying to use an easygoing approach, without tampering with what evidence tells us are effective interventions. If we went into this community with blazing guns people would shut us out and it would be virtually impossible to conduct any type of interventions.
One of the main objectives of the project is to work with sustainable solutions, we want to leave a legacy behind us when the project ends. This also has to be done in a way that it is not dependant on a few people, since this is a highly transient population, but rather built into the framework of the community.

One way of achieving this is to develop interventions that does not require expert skills to keep them running and to “donate” interventions to community partners that can keep them running after the project ends. One example of this would be to donate the school art competition to the local Rotary group or one of the main industrial players who would find it beneficial to be associated with this kind of community programs.

So, this was just a brief overview of what we have done so far and what we are planning to do. We start out with awareness raising efforts before we attempt interventions that are likely to receive its fair share of resistance. We strongly believe that change need to com from within the community if we are going to find sustainable solutions.
If anyone wants to contact us or see what we are up to here are my contact details and the link to our website. There you can access our baseline report, as well as this presentation, and get more details that I was unable to present to you here today.

I would also like to take the opportunity to thank the following people for their valuable contributions

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Thank you.