Server intervention: what chance in Australia?
Ernie Lang

Online Publication Date: 01 January 1991
To cite this Article: Lang, Ernie (1991) ‘Server intervention: what chance in Australia?’, Drug and Alcohol Review, 10:4, 381 - 393
To link to this article: DOI: 10.1080/09595239100185431
URL: http://dx.doi.org/10.1080/09595239100185431

Full terms and conditions of use: http://www.informaworld.com/terms-and-conditions-of-access.pdf

This article maybe used for research, teaching and private study purposes. Any substantial or systematic reproduction, re-distribution, re-selling, loan or sub-licensing, systematic supply or distribution in any form to anyone is expressly forbidden.

The publisher does not give any warranty express or implied or make any representation that the contents will be complete or accurate or up to date. The accuracy of any instructions, formulae and drug doses should be independently verified with primary sources. The publisher shall not be liable for any loss, actions, claims, proceedings, demand or costs or damages whatsoever or howsoever caused arising directly or indirectly in connection with or arising out of the use of this material.

© Taylor and Francis 2007
Server intervention: what chance in Australia?

ERNIE LANG

National Centre for Research into the Prevention of Drug Abuse, Curtin University of Technology, Perth, Western Australia

Abstract

There is some evidence from studies in the USA and Canada that server intervention programs are effective in reducing alcohol consumption on licensed premises which, it is claimed, will lead to a reduction in the incidence of drink driving and other alcohol-related problems. Unfortunately, due to the relative newness of server intervention programs, there is little or no evidence to support such claims. Given this fact, and given that there is an emerging interest in server intervention programs in Australia, it is pertinent to address the question of whether or not server intervention programs are likely to ever be a viable prevention strategy here. It is argued that until steps are taken to overcome a number of impediments—such as the existing licensing laws, some elements of the alcohol industry resistant to change, a lack of community awareness, and a lack of interest by researchers—then such programs are unlikely to eventuate here. The various impediments are discussed and it is suggested that to overcome them will require a coordinated approach involving policy makers, police, the alcohol industry, educators and researchers. Based on experience elsewhere it is argued that server intervention programs should be aimed at the level of the local community. It is concluded that server intervention programs have the potential to become a major prevention initiative in Australia, but only if the various impediments can be overcome, and if present and future legislative provisions are enforced. [Lang E. Server intervention: what chance in Australia? Drug Alcohol Rev 1991;10:381-393]

Key words: alcohol consumption, Australia, server intervention programs

Introduction

In March, 1989, I had the opportunity to observe a training session for bar staff in one of Canada’s most famous and prestigious hotels, The Royal York in Toronto. The staff, all of whom were experienced bartenders and waiters, were being taught additional skills under a program known as SIP (Server Intervention Program), which originated at the Addiction Research Foundation in Toronto [1]. The program involved teaching a range of skills which aim to reduce the risk of intoxication among patrons and to reduce the risk of intoxicated patrons harming themselves or others. It had the full support of a management which knew only too well the legal and financial implications of the hotel being found liable for damages, injuries or death caused by intoxicated patrons. It should be noted that this program was being implemented prior to the introduction of mandatory training in Ontario.

During the training session the hotel manager gave a talk outlining the hotel’s legal obligations and the possible consequences should they fail to meet them, and detailed the main steps being
taken to minimize the risk involved. This involved a requirement for ALL bar managers, bar staff and waiters to successfully complete Server Intervention Program training, and the adoption of a comprehensive alcohol policy which ALL staff employed in the hotel are required to sign as a condition of employment. Breaches of the alcohol policy can result in summary dismissal.

It is hard to imagine a similar scenario in Australia. Up to now there have been no instances of licensees or their employees being found liable for the actions of intoxicated patrons, and there is little or no ‘incentive’ to take action similar to that noted above. This is despite the incontrovertible evidence that of the estimated 6000 deaths annually, and considerably more cases of injury, assaults, and road traffic accidents which can be attributed to alcohol, thousands involved persons who became intoxicated on licensed premises [2-4].

This paper will first discuss Patron Care, so far the only Australian initiative concerned with responsible serving practices, in order to contrast this to the programs which prevail in America and Canada. The discussion of server intervention programs in America and Canada deals briefly with their origins and subsequent evolution as an initiative in the public health model of prevention. A brief summary of a number of evaluation studies is included. Then follows a discussion of various factors which have been identified as impediments to the introduction of server intervention programs in Australia. These are: aspects of the existing legislation and failure to enforce these; a lack of interest by key elements within the alcohol industry; a lack of community awareness of, and therefore support for, server intervention programs and other innovative interventions; and finally, a lack of interest by researchers. The central argument is that server intervention programs are unlikely to eventuate in Australia unless steps are taken to overcome the various impediments. To do so will require a co-operative approach by all concerned if we are to avoid going down the same path as America and Canada where extreme punitive measures, such as costly litigation suits, were a major driving force behind the implementation of server intervention programs. The aim of this paper is to open debate on the concept of server intervention as a preventive measure in Australia.

Server intervention in Australia

Server intervention programs (or, responsible serving practices or responsible beverage service, as they are sometimes referred to), took their first faltering steps onto the Australian scene in 1981 under the guise of a Queensland program known as Patron Care [5-7]. This program was about identifying patrons whose behaviour and drinking causes problems, both to themselves and within the licensed environment, and referring them to a treatment centre. This referral component is unique among server intervention programs, and is the major plank in the program. It is interesting to note, however, that this approach is not unlike that first advocated in America where barstaff were seen as ideally situated to refer alcoholic patrons to treatment agencies [8]. Thus Patron Care can be likened to what Homel has termed the ‘social responsibility’ approach to alcohol problems, compared to the ‘server liability’ approach common in America [9]. This results from an emphasis on the individual ‘problem’ drinker as opposed to the drinking environment. In the ‘server liability’ approach legal sanctions and financial incentives form the basis for programs which create an environment in which server intervention programs operate to reduce the likelihood of individual premises being involved in costly liability cases. To this should be added a further distinction between the two approaches, and one of fundamental importance, which is that Patron Care, unlike server intervention programs elsewhere, does not aim to reduce the incidence of drink-driving, except insofar as people are successfully referred.

An overdue evaluation of the Patron Care program has recently been concluded [10]. The evaluation attempted to collect quantitative and qualitative data by means of surveys, in-house discussions with program staff, field observations, key informant studies, and from case studies. Unfortunately, a lack of resources within the Patron Care program had resulted in a less than adequate system of record keeping. As a result it proved difficult to measure objectively the impact and efficacy of the program, although there was considerable evidence of widespread and continuing support. Consequently, it was recommended that the program be restructured to ensure that the goals were clearly stated and that adequate records
be maintained, so that any future evaluation would be able to measure and report the outcomes.

While no real progress has been made in expanding Patron Care, or other forms of server intervention programs, outside Queensland, interest in the concept has increased, albeit somewhat slowly, as evidenced by the 'First International Conference' on hospitality practices held in Brisbane in 1988. The conference generated a number of recommendations on training programs for managers and for employees in licensed premises [17] which were subsequently sought by a joint government and industry working party attached to the Ministerial Council on Drug Strategy. Following protracted discussions [12] the working party produced a booklet on responsible serving practices [13] which was launched in Sydney on 1 May 1990. The booklet, which has been made available to every licensed liquor outlet, contains guidelines for responsible serving, and suggestions for environmental changes to premises, such as adopting a 'house policy', which aim to reduce the incidence of alcohol-related problems. It should be noted, however, that the adoption of the guidelines by licensees and managers is voluntary, so it will be difficult to gauge the efficacy of this initiative until the results of an evaluation being undertaken on behalf of the joint working party is known. Such evaluation is likely to use as a baseline measure the results from a pre-launch survey which suggested a very low level of awareness among licensees in respect of existing licensing laws [Professor D. Hawks personal communication].

The concept of server intervention programs has attracted only passing interest elsewhere in Australia. For example, it has been suggested that server intervention programs might be adopted as a road safety measure [14, 15], or that conformity with server intervention programs be a condition of liquor licence renewal [16], while others have suggested consideration be given to server intervention programs as a way to counter problems in licensed premises [4, 17]. In contrast, the Department of Employment, Education and Training failed to include any reference to responsible serving practices, Patron Care or server intervention programs in their recently published national guidelines for training in the hotels industry [18, 19].

So, while there is some evidence, albeit minimal, of an increasing interest in server intervention programs in Australia, it is the contention of this paper that programs similar to those in the USA and Canada are unlikely to eventuate here unless the impediments to their introduction are overcome. However, before discussing these impediments and possible ways of overcoming them, it will be useful to define what is meant by server intervention programs, and to explore their origins and current status so as to place the discussion in some form of framework.

Server intervention programs

The concept of server intervention programs originated in the late 1960's in America and was initially based on the notion that bartenders could act as referral agents for individuals identified as experiencing alcohol-related problems [8], or for bartenders to take action to modify drinking behaviours [20, 21]. Since then server intervention programs in America, and subsequently in Canada, have evolved toward a more comprehensive approach based on the public health model of prevention, largely as a response to the perceived failure of conventional measures to reduce the incidence of drink-driving and alcohol-related traffic accidents [22-24].

Today, server intervention refers to a range of strategies and responsible serving practices which Saltz [25] has shown to have six main goals. These are, (a) to minimize the likelihood of individuals becoming intoxicated and so reduce the risk of intoxicated individuals causing harm to themselves or to third parties; (b) to reduce the incidence of drink-driving; (c) to reduce the incidence of underage drinking; (d) to improve the morale of bar staff and the environment of licensed premises; (e) to maintain profit levels; and (f) to develop good community relations. To be effective management must be prepared to assess and, where necessary, modify the establishment's operating policies in order to incorporate responsible serving practices as an essential policy component.

One of the first programs to incorporate server training as the major intervention strategy to reduce the incidence of drink-driving was the California DUI project [26, 27]. It was around this time that James Mosher and his colleagues laid the groundwork for the legislative reforms which were to form the conceptual framework for future
As a result of the work of Mosher and his colleagues, server intervention programs evolved to address the drinking environment at two interrelated levels; the legal and physical environments. In the case of the former the best known is undoubtedly the concept of liquor liability laws or, more correctly, Dram Shop laws. In America there have been numerous costly law-suits brought against licensed premises shown to have been negligent in serving alcohol to persons who subsequently caused harm to third parties or themselves [30, 31]. In Canada such legal actions have been successfully prosecuted under common law [32, 33].

While server intervention programs existed at the time liquor liability cases were being prosecuted, the adverse outcomes (for the alcohol industry) of such cases accelerated the interest in such programs. There are two fundamental reasons for this. First, licensed premises which could show that staff had been trained in responsible serving practices, and that such practices were part of the house policy, could use this as a defense in a litigation case. Second, such premises are, in some places, able to obtain discounts on insurance premiums which had increased substantially as a result of liability prosecutions [34, 35]. Thus, it could be argued that the interest in server intervention programs in both America and Canada has more to do with avoiding liability than with alcohol-related problems [36-38]. Evidence that this may be the case comes from the fact that the most widely available server training programs are financed and implemented by the liquor and the insurance industries [34, 35]. However, despite the apparent 'hi-jacking' of server intervention programs by industry interests, there is still considerable support for the concept in both America and Canada from federal and state governments, to the extent that server training is now mandatory in Canada and in several American states [34, 35, 39, 40] and, furthermore, the majority of American states have some form of liquor liability laws, or have imposed liability based on common law principles [41]. In the case of Canada the onus is on the individual to undergo training at their own expense, thus avoiding an additional cost burden and therefore making server intervention programs more acceptable to the alcohol industry [Professor D. Hawks personal communication]. Support for server intervention programs in America and Canada has also come from government agencies, licensing bodies, and from researchers in the form of reports and reviews of experimental research projects [42-48].

**Evaluation studies of server intervention programs**

While there are a relatively high number of server intervention programs in America and Canada there have been surprisingly few reports describing such programs, and even fewer evaluation studies. Following is a brief review of some of the more comprehensive evaluation studies to date.

**The DUI Project**

The first attempt at evaluating a server intervention program was that undertaken by Mosher and Wallack of the California DUI project which aimed to test the efficacy of increased enforcement of the existing laws relating to serving intoxicated persons as a way to reduce service to such persons, and so reduce the incidence of drink-driving [26, 27]. Licensed premises identified by police records as the drinking location of drink-drivers were the main target for intervention. Where premises were identified on two or more consecutive occasions the licensee received a letter from the licensing authority pointing out their legal obligations and inviting them and their staff to attend a server training course. The premises were also visited by police and any breaches of the law were prosecuted. Over the two years of the project some 5700 persons from around 540 licensed premises underwent server training.

Pre- and post-test surveys of participants found the project to have been popular among licensees and bar staff, as well as being successful in improving relations between licensees and the licensing authority. Trainees were found to have become more concerned about the issues covered in training courses. The project also resulted in a number of self-training programs among corporate licensees.

A number of problems were identified, the main ones being: changing procedures in the face of new developments; and weakness in the training due to a lack of skills among trainers and a lack of relevant materials. This was exacerbated by limited funding which prevented expansion, as well as...
posing problems in evaluating the success of the training. These problems aside, it was concluded that projects such as this had been shown to be important in efforts to prevent drink-driving because of the high participation rate in training and the improvement in understanding and in the relations between the various parties. Unfortunately, no evidence was presented to support the claimed effectiveness of this type of program as a drink driving countermeasure.

**TIPS (Training for Intervention Procedures by Servers of Alcohol)**

Russ and Geller [49] evaluated the TIPS program which is one of the better known of many commercial server training programs currently available in America. The evaluation was confined to measuring the extent to which responsible serving practices were applied by trained staff. Pre-test and post-test measures involved researchers posing as customers and attempting to order and consume a drink every 20 minutes during a two hour period. It was hypothesized that after training staff would implement some form of strategy to slow the rate of consumption. It was found that trained staff did in fact intervene more frequently than was the case at baseline, but that interventions were low key and infrequent. When blood alcohol levels (BAL) of the pseudo customers were analysed, however, and it was found that those served by untrained staff had considerably higher BAL's than those served by trained staff.

While these results are encouraging it should be noted that the study was limited to approximately half the staff in only two licensed premises. Furthermore, delivery of the program for the study was carried out by specially trained university undergraduates as opposed to the normal practice which involves brewery representatives who would most likely have a different view on practices involving limiting the supply of beer.

**The San Diego Naval Club study**

This study by Saltz [47], which aimed to determine the efficacy of server intervention programs as a prevention strategy, is the most widely quoted to date. Two similar navy clubs in San Diego were enlisted, one in which staff underwent a server training course and where management practices were correspondingly modified, and the other served as a control. Evaluation involved a multi-trait, multimethod scheme with pre-test and post-test to measure changes in attitudes, knowledge and levels of consumption.

The findings were encouraging in that the consumption levels of the target group of heavy drinkers were reduced, although the overall consumption at the experimental site was maintained. This was attributed to heavy drinkers consuming less as a result of server interventions, while lighter drinkers consumed more because they received more attention from servers. The fact that overall consumption was shown to have been maintained is the major finding from this study, for it acts as a counter to criticism that server intervention programs will adversely affect profits.

There are a number of constraints to this study which have been acknowledged by the author. The major one being the generalizability of the study to more 'typical' licensed environments. Variations in the rate of consumption noted above were also seen to be problematic, especially as no comparison was made with lighter drinkers at the control site. In addition, nothing is known of the long term effect, both on retention of knowledge and on the extent to which responsible serving practices and management policies were continued. However, unlike other studies, Saltz and colleagues have attempted to replicate this project (see below) at a number of sites more representative of 'typical' licensed premises [40].

**National Highway Traffic Safety Administration (NHTSA) study**

As evidenced by recent reports, NHTSA has shown a close interest in developing server training programs and social host programs to combat the incidence of drink-driving [50–53]. McKnight [50] reported on the development and implementation of a server intervention program in 32 premises in two states which involved training nearly 250 bar staff. An additional 34 premises were used as controls. Site selection was based on the number of occasions a premise had been identified as the drinking location of drink-drivers, and on observations of the incidence of drinking. Evaluation involved pre-test and post-test surveys of attitudes, opinions and knowledge, as well as an observation measure which incorpo-
ated the use of researchers posing as customers and feigning intoxication.

The results of this evaluation can best be described as inconclusive. In one state the results were positive at the experimental sites, in contrast to their being no change at the control sites. There was an increase in post-test interventions by servers, as well as positive changes in knowledge and opinions. The result from the second state, however, was somewhat puzzling in that while interventions increased overall, the greatest increase was in the control sites. To further confound things, the most positive results in both states were achieved in 'up-market' premises with an older clientele and low volumes of sales. Despite the contrary findings, McKnight was able to advance a qualified conclusion to the effect that server education does improve knowledge and attitudes, and can bring about small but significant increases in interventions. However, much of it depends on situational variables such as the type and location of establishments; the type of patron; and the volume of sales.

The Thunder Bay study

Glicksman [54, 55] undertook a quasi-experimental observational study to measure the changes in serving practices of bar staff trained in the server intervention program developed by Simpson et al. [1]. The chosen site was eight bars (4 experimental and 4 control) in the small town of Thunder Bay, Ontario. As was the case with other evaluation studies mentioned previously, this study employed actors, or 'pseudopatrons', to pose as intoxicated patrons, so that researchers could observe the responses of trained servers.

By the author's admission, this project met with a number of problems which limited the value of the findings and, furthermore, the planned long term follow up had to be abandoned. These problems aside, the evaluation was able to demonstrate significant increases in knowledge and an increased intervention by trained servers to both limit and to stop the consumption of alcohol by intoxicated patrons.

Monterey-Santa Cruz responsible beverage service project

This is the most recent and most extensive evaluation report and, furthermore, the only evaluation to date of a community-based program [40]. The project lasted over two years (May 1987–July 1989) and involved a process evaluation of the community-based program and a quasi-experimental outcome study to assess the impact of the program on intoxication rates of patrons, designed to replicate the San Diego Naval Base study [47]. To meet the project objectives a number of innovative strategies were employed. These were: community activities to create interest and support for responsible beverage service training; free or low-cost community-based training for managers and bar staff; training of trainers to facilitate long-term continuation of responsible beverage serving; the feasibility of responsible beverage serving training in ethnic drinking establishments; and a survey of community responses to the project.

In the case of the community-based component, the results can best be described as mixed arising from differing perceptions and levels of concern about alcohol use. In Santa Cruz, for example, the high level of concern over alcohol-related issues generated support for the project from both citizens groups and the hospitality industry. In contrast, there was only minimal support in Monterey where alcohol was not on the public or political agenda, and where communications within the hospitality industry were poor. The results from the training component for 55 managers and 86 servers were also mixed. Initially, significant pre-and post-test differences were found in both counties, but a follow-up survey some months later resulted in only four responses, none of which demonstrated a strong commitment to the concept of responsible serving. This led the authors to conclude that training should be more intensive with follow-ups as a matter of course. This conclusion was supported by preliminary findings from the quasi-experimental study showing that the levels of intoxication were reduced in experimental sites in Santa Cruz but not in Monterey. Further analyses are being conducted to determine the reasons for the different results.

It may have been the lack of any definite progress in obtaining conclusive outcomes which prompted Mosher to recently suggest a move away from a narrow focus on server intervention programs, to a focus on what he terms 'host
responsibility' [56]. The strategies underlying the concept of host responsibility are identical to those applied in the Monterey-Santa Cruz study, and include, a co-ordinated and co-operative community based approach which, while initially more difficult to facilitate than a basic server intervention program, may ultimately prove to be more effective in preventing alcohol-related problems.

Impediments to server intervention programs in Australia

Legislative impediments

Perhaps the main reason for the dearth of interest in server intervention programs in Australia is because they are either not on the agenda of the majority of the parties likely to be involved or, if they are, their low priority precludes them from being actively promoted. Arguably, the major reason for this lack of interest is the fact that there have been no instances of litigation involving licensee liability, despite the fact a person as authoritative as a Liquor Licensing Commissioner is of the view that they should be [16, p. 76], which corresponds to advice given to the Western Australia Alcohol Advisory Council in 1986 by a QC who stated that the existing laws provided sufficient scope for mounting a liability case [A. Shoebridge personal communication].

It might be argued that the various State Licensing Acts are, to varying degrees, themselves impediments to server intervention programs because none of them contain server liability provisions or any requirement that persons employed under a particular Act be trained. It might be further argued that because these Acts require licensees to carry out what are essentially responsible serving practices (or duty of care) such as, not serving intoxicated persons and minors, or permitting disorderly conduct, then there should be no need for server intervention programs. In fact were these provisions in the Acts strictly observed (the extent to which licensees observe this duty of care is not known, and so is clearly an area requiring research), and adequately policed and, where necessary, enforced, then such an argument could be entertained. This is not, however, the case and to accept that the existence of these provisions precludes the need for server intervention programs can only impede their introduction.

Other legislative impediments are more to do with 'deficiencies' in the existing laws. For example, none of the Acts offer any definition of 'intoxication' or 'drunkenness', leaving such definition to what in most cases are young, inexperienced bar staff. Nor do the acts offer any guidelines similar to those used in America and Canada for measuring the extent of a person's intoxication. Such guidelines have been demonstrated to be effective [57]. In addition, there is no effective system in place for age identification which, again, is left largely to inexperienced staff. To compound matters a licensee, to avoid prosecution, need only demonstrate 'reasonable grounds' for believing a person was not intoxicated or under age, in the unlikely event of any prosecution being proceeded with.

As noted above, the extent to which licensees observe the law is not known. In the case of police enforcing the existing laws there is little evidence that this is done except in the case of underage drinking. Police annual reports contain no details on the level of licensing law enforcement specific to the serving of intoxicated persons, permitting intoxicated persons to enter or to remain on licensed premises, and for permitting disorderly conduct. Specific details of such licensing offences, including details relating to underage drinking, were requested by the author from all Australian police forces for the period 1985-1990. With the exception of Western Australia all other forces were, for a variety of reasons, unable to provide data on these questions [personal communications]. If the data provided by police in Western Australia [See Table 1] is taken as a yardstick for measuring the extent to which other states and territories enforce the licensing laws, then it can only be concluded that such enforcement is virtually non-existent. Further evidence to support such a conclusion can be found in a recent report which found that in the 5 years 1984-88 not a single prosecution was commenced against any licensee in the Northern Territory [58].

Research into why licensing laws are not, or, at best, only minimally enforced may identify ways to overcome this particular impediment to server intervention programs. The importance of such research can be seen from the American and Canadian experience where it was found that implementation of server intervention programs was enhanced if existing laws were enforced
Table 1. Selected licensing offences prosecuted by police in Western Australia 1985-1989. (Source: W.A. Police Dept.)

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>No. of occasions where licensees or their employees have been prosecuted for selling or supplying alcohol to juveniles</td>
<td>60</td>
<td>75</td>
<td>75</td>
<td>72</td>
<td>74</td>
</tr>
<tr>
<td>No. of occasions where licensees or their employees have been prosecuted for permitting intoxicated persons onto licensed premises and/or serving intoxicated persons with alcohol.</td>
<td>20</td>
<td>3</td>
<td>12</td>
<td>7</td>
<td>1</td>
</tr>
<tr>
<td>No. of occasions where licensees or their employees have been prosecuted for permitting disorderly conduct on licensed premises</td>
<td>No Record</td>
<td>7</td>
<td>2</td>
<td>0</td>
<td>1</td>
</tr>
</tbody>
</table>

and/or redesigned to make enforcement easier [24, 33, 40]. One example of how such research might be pursued would be to examine the effectiveness of community policing as a means of enforcing legislation specific to the serving of minors and intoxicated persons. Models for such approaches can be found in the California DUI project [26] and a community policing project reported by Jeffs and Saunders [59]. These two studies might be adopted separately or combined to create a novel new approach. A further example is the co-operative approach between licensing inspectors, police, medical officers of health and district health boards, which is currently being attempted in New Zealand following the recently promulgated Sale of Liquor Act (1989) [60].

Unless some effort is made to enforce the existing laws then overcoming the impediments noted above may well involve either amendments to existing licensing laws or, alternatively, the adoption of a Liquor Licensing Act similar to the model Act produced in America [28, 29]. Whether by amendment or by new Licensing Acts, such legislation should contain the prevention of alcohol-related problems as a central component, and which might incorporate provisions such as:

- Server liability (that is, licensees be liable for the actions of persons who were served to intoxication on their premises).
- Requirements for mandatory training as a condition of being granted a licence or employment at the managerial level.
- Requirements that all employees be trained in responsible serving practices as a condition of employment.
- An effective system for identifying minors (e.g., 'pub cards', or some other form of positive identification).
- Clear definitions of 'intoxication' and 'drunkenness', and which contain guidelines to assist in measuring alcohol intoxication.
- A requirement that licensed premises adopt a code of conduct on the serving of alcohol, such as promoting responsible service and moderate consumption, and undertaking not to promote irresponsible consumption (e.g. happy hours, free drinks, etc).
- An automatic loss of licence for breaches of the provisions relating to permitting intoxicated persons to enter or remain on licensed premises, and/or the serving of intoxicated persons.

The alcohol industry—attitudes, policies and structure

The alcohol industry will, if current attitudes are maintained, prove a major impediment to the introduction of server intervention programs. In fact the hotel industry is concerned that server liability and, ipso facto, server intervention pro-
grams, may emerge as a 'real threat' in Australia [62]. Consequently, industry opposition to liability laws and to server intervention programs can virtually be taken for granted, especially the latter, for it would require the industry to adopt policies with the potential to adversely affect profit margins. So, unless it can be conclusively demonstrated that profits could at least be maintained or, better still, increased, then there is little likelihood of the industry voluntarily supporting such programs.

There is also the problem of a highly fragmented workforce of largely untrained, and in many cases young, inexperienced, casual and part time barstaff. In addition there are problems posed by costs: that is, who would be required to meet these—the alcohol industry, individuals or government? Then there are the questions of who should be trained and who should be responsible for such training? Should training be confined to managers and full time staff, or ought it to include all staff? Should the industry take responsibility for training or should this be done elsewhere to ensure impartiality?

While the nature and structure of the workforce might pose problems, these are not insurmountable. For some time the industry has been concerned with developing a tourism industry training network as part of a national tourism strategy [18, 19, 62, 63]. Part of this concern involves developing a clearly defined career structure for persons employed in the industry as a means of overcoming the problems associated with a largely part time workforce. One way to overcome this would be to place the onus for being trained on the individual as a requirement for obtaining employment, as is the case in Canada. Placing the onus on individuals might effectively remove the problems related to who should pay for training, although it might not be unreasonable to expect the ultimate beneficiaries, the alcohol industry, to share some of the cost. It should be relatively easy to incorporate responsible serving practices into existing courses run by TAFE colleges and other like organizations involved in hospitality training. Such an approach would also ensure a degree of impartiality which might not be the case were the industry to take control of training.

The industry believes that satisfying customer needs is likely to be the main driving force for planning and developing a national training strategy [62, 63]. Were customer needs to be shown to include a drinking environment free of the problems associated with intoxication, assaults and other forms of anti-social behaviour, then health professionals and prevention researchers clearly have a role to play in convincing the industry that this would be good for business, and that server intervention programs are an essential component in creating such an environment.

**Lack of community awareness**

It might appear to be stating the obvious, but the fact that concepts like server intervention programs are virtually unknown to all but a handful of people is undoubtedly an impediment to their introduction in Australia. However, there appears to be an increasing concern among the public about alcohol-related issues in Australia, which means it should be possible to design, implement and evaluate a community-based program similar to, for example, the Monterey–Santa Cruz study [40], or the Thunder Bay study [55]. What would be difficult, however, is finding a 'community' in which such a program could be implemented. This would require: (1) a prevailing climate of concern about alcohol-related issues; (2) community support for the program; (3) the local alcohol industry to be organized with good communications and effective leadership; (4) a willingness on the part of police to enforce existing legislation; (5) publicity to support the program goals and, finally, training programs which target management as a first priority, followed by training servers once a strong management commitment has been established. This latter point is critical to the success of any program, for without management support it will almost certainly result in failure, thus making it so much harder to achieve success on subsequent occasions.

While it would appear that there is growing concern about alcohol-related issues in Australia as measured by the amount of space and time the news media devote to the question, little is known about people's attitudes to various interventions to tackle such problems (Random Breath Testing and the question of 0.05 laws aside). A major priority, therefore, will be to carry out community surveys to gauge the level of support for different measures, and the extent to which the community
would be prepared to actively participate in implementing them. This would be one way of raising community awareness; another would be to promote public discussion by targeting prevention programs at the community level. Tactics such as these may result in support for prevention programs such as those which incorporate responsible serving. The importance of public discussion, particularly at the level of the local community, should not be overlooked when carrying out research into programs and policy options which focus on environmental factors in local licensed premises [40, 46].

Lack of interest from health professionals and prevention researchers

Finally, there is the issue of support from health professionals and prevention researchers. Except for a few brief passing mentions and suggestions that server intervention programs might be tried in Australia, there has been no other professional interest. There have been no attempts, with the exception of Patron Care, to develop, implement and evaluate a server intervention program suited to the Australian licensed environment. It is almost as though researchers are waiting for the opportunity to react in the event of server liability emerging as an issue, as opposed to being proactive by establishing the foundations for server intervention programs based on sound empirical research which incorporates evaluation as a major component.

But perhaps the greatest failing of Australian health professionals to date is a failure to communicate theoretical models of prevention in terms which the lay person can understand, particularly to those elected representatives whose job it is to formulate public policy. This question was recently addressed by Douglas & Giesbrecht [64] who noted that a failure to communicate meant that

"... citizens elected to formulate policy are not aware of the relationships between drinking environments and problems, and the role of policy in moderating or contributing to drinking levels."

In other words, how can we expect support for prevention initiatives at this level if they are not readily understood. The same point can be made in respect to the alcohol industry and the community at large where such initiatives are aimed to impact.

It ought not to be too difficult for researchers to communicate in lay terms the theory behind prevention initiatives, such as server intervention programs which target drinking environments. Nor should it be difficult to communicate the aims of such initiatives. The evaluation studies reported above contain two or three examples of interesting and innovative programs which could be duplicated in Australia, after being modified to suit local conditions, and which could easily be communicated in terms readily understood by the lay person.

Research projects similar to these, as well as locally-designed studies, would have the effect of shifting the attention of researchers from the prevailing norm of trying to effect behavioural change in individuals, to that of effecting change in the environments which impact on individual behaviours. In addition to increasing our knowledge of the efficacy of such environmental interventions, the research will also give some impetus to further studies in what is a sadly neglected field of research in Australia.

Conclusion

On the available evidence there can be little doubt that server intervention programs offer a challenge for persons involved in the fields of public health and prevention research to become involved in developing, promoting, implementing and evaluating such programs. Before this could occur, however, the impediments identified in this paper need to be overcome. It is recognized this will be no easy task given the complexities in bringing about change at the political level, the difficulties involved in dealing with the alcohol industry, and the problems which might be encountered in the relatively untried area of community-based prevention initiatives. Such difficulties, whether real or imagined, should not, however, be used as an excuse for inaction for server intervention programs have the potential to become a major frontline initiative in preventing problems such as drink driving, alcohol-caused crashes, and alcohol-caused injuries and assaults. But it should be emphasized that training bar staff alone will not bring about any permanent or meaningful change
if there are no supporting management policies in place, or if the existing laws remain unenforced.

It is clear that to overcome the various impediments will require a co-ordinated approach involving diverse groups such as policy makers, the alcohol industry, police, health professionals, and educators. No single group or authority has the means to overcome these impediments alone. Co-ordination requires consensus so it will be essential that agreement is reached during discussions and, importantly, sustained during any subsequent initiatives. Based on experience elsewhere it would appear that server intervention programs should be aimed at the level of the local community, including where possible licensees or others representing the interests of the alcohol industry, and be co-ordinated by national and state agencies, and a level of legislative control, such as enforcing existing laws is essential. Except for a consultative role, and possibly in the area of meeting the costs of training, the alcohol industry should not be directly involved in the delivery of training courses so as to avoid any conflict of interest. The reason for a co-ordinated approach stems from the fact that experience in the USA and Canada has shown that the problems encountered by project facilitators have been with facing up to, and overcoming, conflicting interests and agendas.

At least one Australian researcher is of the view that reconciling these competing interests may not only be difficult but impossible without an external sanction (i.e. server liability) to force compliance [9]. While it would undoubtedly be true that extreme punitive measures, such as costly litigation suits, would accelerate the development and implementation of server intervention programs, the underlying argument of this paper has been that a more considered and co-operative approach, based on sound research and effective communications will, in the long term prove a better means of achieving the same end, providing present and future legislative provisions are enforced. To achieve these ends will require extensive research and planning to design appropriate strategies to ensure that ideas can become a practical reality.

References


[47] Saltz RF. The role of bars and restaurants in preventing alcohol-impaired driving: an evalu-


