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Kakadu / West Arnhem Region*

MENZIES SCHOOL OF HEALTH RESEARCH
Northern Territory Australia

Menzies Occasional Papers

**GUNBANG... OR CEREMONIES?
Combating Alcohol Misuse in the
Kakadu / West Arnhem Region**

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Living With Alcohol
A Northern Territory
Government Program

Issue No. 3/96

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Gunbang... Or Ceremonies?

Combating Alcohol Misuse in the Kakadu /West Arnhem Region

by

Peter d'Abbs
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"Gunbang... or ceremonies: Which do you want?"
*An Aboriginal resident of Manaburdurma Town Camp, Jabiru,
addressing fellow residents. November 1995.*

*A report prepared for the
Gunbang Action Committee
by the*

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FOREWORD

The report that follows is a revised version of a draft report initially submitted to the Gunbang Action Committee in Jabiru in February 1996 and formally considered by the Committee at a meeting on 1 April 1996.

At this meeting, the seventeen recommendations arising out of our study were considered. All but three of these recommendations were unanimously accepted by the Committee subject to some amendments, which have been incorporated into this final report. The three outstanding recommendations - namely numbers 3, 4 and 5 - in the Summary of Recommendations, were not acceptable to several members of a delegation from Oenpelli, many of whom were either committee members or employees of the Gunbalanya Sports and Social Club. Following discussion at the Committee meeting, the Oenpelli delegation asked that the Gunbang Action Committee postpone final acceptance of the draft report in order to allow time for further discussion amongst members of the Oenpelli community, and also to enable the consultants to make another visit to Oenpelli and take part in a community meeting.

This request was accepted by the Committee and the consultants agreed to visit Oenpelli at a mutually agreed upon date. Subsequently, on 17 May 1996 a community meeting was held in the open area outside the Gunbalanya Council offices. The meeting was chaired by Mr John Maley, Chairman of the Northern Territory Liquor Commission, and attended by about eighty residents of Oenpelli as well as the consultants.

Soon after the meeting began it became apparent that, contrary to the expectations of the consultants and other parties, virtually no discussion had taken place in the community regarding the three contentious recommendations. Indeed, when the Chairman asked those present how many had read or were even aware of the recommendations, only three people put up their hand. In the light of these circumstances, it was agreed by those present at the Oenpelli meeting that further discussion regarding the three recommendations was required.

Later on the same day, another meeting of the Gunbang Action Committee took place in Jabiru. At this meeting, the Committee concluded that further delay of the report itself was unwarranted, particularly in view of the fact that the report was itself the product of wide consultations in a number of settings (including Oenpelli) and also in view of the fact that the remaining recommendations clearly had the support of all Committee members.

It was therefore agreed that a final version of the report should be prepared incorporating amendments to the recommendations as agreed in Committee discussions, but also acknowledging the fact that recommendations number 3, 4, and 5 were subject to continuing deliberation in Oenpelli.

The report, therefore, should be read with this qualification **in** mind.

Peter d'Abbs
Trish Jones June
1996

INTRODUCTION

Concern with alcohol problems in the West Arnhem region is not new. In their 1977 report to the Federal Government, the authors of the Ranger Uranium Environmental Inquiry said bluntly :

Evidence placed before the Commission left no doubt that excessive consumption of alcohol by a large proportion of the Aboriginal people in the Region is having a deleterious effect on their general welfare. The Commission was left with the clear impression that the future of these people will depend in large part on removing or substantially reducing the causes of this problem¹.

Seven years later, one of the authors of a study of the social impact of uranium mining in the region gave an even bleaker assessment:

It would not be unfair to say that alcohol - the search for it, the imbibing of it, or the avoidance of those intoxicated - is a major preoccupation of the entire Region. Apart from long-term effects on health, vehicle accidents result from it, sometimes deaths, and certainly violence against property and people. Money is diverted from food to beer, energies are diverted from ceremonies to beer. And energies are consumed (principally by women) in maintaining a social fabric that alcohol threatens to tear down daily. The key question remains: for how long can unacceptable behaviour be tolerated; for how long will responsibility be disclaimed on the grounds of drunkenness; for how long can people patch the social and material damage done by drunks?²

In October 1995, Big Bill Neidjie, Traditional Owner, voiced his own heartfelt despair in a meeting with the researchers:

They won't listen to me - one man go one way and come back from grog another way.³

The report that follows sets out a strategy for reducing alcohol-related problems in the West Arnhem region, under terms defined in a consultancy commissioned by the Gunbang Action Group and awarded to the Menzies School of Health Research, Darwin.

The region covered by this report is sometimes referred to as the 'Kakadu/West Arnhem Region', sometimes as the 'Alligator Rivers Region'. It corresponds roughly with the catchments of the East, South and West Alligator rivers, and is the area occupied by those people who have been most directly affected by the discovery of substantial uranium ore deposits in the late 1960s and the

¹ (d'Abbs, Hunter & Reser 1977d).

² (Kesteven 1984b).

³ Big Bill Neidjie, Interview, 13 October 95

subsequent establishment of Ranger Uranium mine, the township of Jabiru, and Kakadu National Park⁴. As defined in the Consultants' Brief, the region includes :

all communities in Kakadu National Park, licensed premises at Mary River, Corroboree Park and Annaburoo, the community at Oenpelli and outstations serviced by the Demed Association.

Methodology

Five main sources of data were used in preparing the report :

review of relevant literature;
interviews with key informants;
group discussions;
official statistics relating to liquor sales, police offences and alcohol-related presentations at health clinics;
NT Liquor Commission files.

In the course of the consultancy, the consultants met with 182 people, some of whom spoke as individuals, some as representatives of organisations or groups. Groups consulted included :

- Energy Resources of Australia Ltd (ERA);
- The Australian Nature Conservation Agency (ANCA);
- Jabiru Town Council;
- Jabiru Sports and Social Club Committee;
- Officers and members of Kunbarllanjja Community Government Council;
- Police at Gunbalanya and Jabiru;
- Gunbalanya Health Clinic;
- Staff at Gunbalanya Sports and Social Club
- Injalak Arts and Crafts Association;
- Demed Inc;
- Gunbalanya Community School;
- Gagudju Crocodile Hotel;
- Gagudju Lodge Coinda;
- Border Store East Alligator River;
- All Seasons Frontier Kakadu Holiday Village;
- Northern Land Council,
- Gagudju Association;
- Diabulukgu Association;
- a women's group in Jabiru.

⁴ Fenner 1980).

Visits were made Oenpelli and to the following outstations or town camps: Spring Peak; Mudginberri; East Alligator River, Ranger Station; Manaburdunna; Manmoyi; Gamargawon; Marlgawa; Mamadawerre.

One written submission was received, from Marrawuddi Gallery, Kakadu.

Overview of the report

Following an Executive Summary, the report is set out in nine sections, plus appendices.

Section 1 outlines a framework for addressing alcohol-related problems at the community level. This framework is subsequently utilised in describing the recommended strategy.

Section 2 presents some basic social and demographic data relating to the West Arnhem region.

Section 3 traces the evolution of the present system **of controls on the availability of alcohol** in the region.

Section 4 uses 'purchase into store' figures collated by the NT Liquor Commission to estimate (a) regional alcohol consumption levels; (b) regional per capita consumption, and (c) per capita consumption among Aboriginal drinkers at the Gunbalanya and Jabiru Sports and Social Clubs,

Section 5 describes the nature and prevalence of alcohol-related problems in the region. The section begins with a lengthy extract from a judge's decision in a court case involving an alcohol-related homicide at Oenpelli, then goes on to consider additional evidence regarding drunkenness, violence and health-related problems in the region.

Section 6 examines the present system of controls on the sale and supply of liquor, responsibility for which is currently shared by the NT Liquor Commission, the Australian Nature Conservation Agency, and the Gagudju Association.

Section 7 looks at the services and programs currently available in the region for dealing with alcohol-related problems, and finds them to be particularly deficient in preventive services.

Section 8 outlines a strategy to reduce alcohol-related problems in the region, by means of a revamped system of controls on availability, the provision of preventive services, and establishment of a women's resource centre. The strategy would incorporate a community development approach.

Section 9 is a summary of recommendations.

EXECUTIVE SUMMARY

The region and its people

The population of the region is about 3,000, of whom a little over half are Aboriginal. The region contains two townships - Jabiru and Gunbalanya (Oenpelli) - and a number of smaller settlements or outstations, some of which are linked to Oenpelli, and others to Jabiru. Oenpelli and its outstations are located within the Arnhem Land Land Trust area, while most of the remainder of the region lies within Kakadu National Park, a World Heritage-listed park covering 19,804 square kilometres, created in stages from 1975⁵. The townsite of Jabiru lies within the Park area, but has been leased from the Park headlease to the Jabiru Town Development Authority. Jabiru is situated 256 kilometres by road east of Darwin, and Gunbalanya is 60 kilometres north east of Jabiru.

Background : Uranium mining, tourism and alcohol in the region

The Ranger Uranium Environmental Inquiry in its 2nd report, submitted to the Federal Government in 1977, recommended a number of steps which, it argued, would reduce alcohol problems in the region. These steps involved :

- acknowledging Aboriginal title to land;
- establishing a national park, which would not only create congenial job opportunities for Aboriginal people, but also provide a buffer to shield Aboriginal people from the impact of tourism and mining;
- creating additional employment opportunities in mining and buffalo eradication;
- creating an Aboriginal needs database;
- putting in place a series of controls on the availability of alcohol, the prime objective of which was to contain consumption within licensed clubs, prevent the introduction of new hotel licences, and discourage takeaway sales;
- complementing the control measures with a set of measures for enforcing the controls, which included appointing Aboriginal special constables and an Aboriginal 'special magistrate', and authorising rangers in the proposed national park to police licensing laws within the park.

These measures - with the exception of the database and the proposed enforcement measures - were subsequently endorsed and, in one way or another, implemented as part of the conditions under which uranium mining in the region proceeded.

⁵ (Forrest 1193)

In 1983 a dispute between the National Parks and Wildlife Service and the Northern Territory Government over authority to regulate liquor licences in the region resulted in an amendment to the National Parks and Wildlife Regulations, under which no person could sell liquor in Kakadu National Park without the permission of the Director, who would seek the views of the Northern Land Council before reaching a decision,

Despite these steps, a subsequent report on the social impact of uranium mining the region, published in 1984, concluded that alcohol misuse throughout the region was having a destructive impact on Aboriginal communities and families.

In recent years, several new liquor outlets have been established within or just outside the National Park. These outlets have been established primarily to serve the growing tourist trade, but also increase the availability of alcohol to Aboriginal people in the region.

Alcohol consumption in the region

- In 1994-95, nearly one million litres of alcoholic beverages (926,573 litres) were sold in the West Arnhem region. Of the total, 61% were sold in the three clubs serving local drinkers: Gunbalanya Sports and Social Club, Jabiru Sports and Social Club, and Jabiru Golf Club. A further 32% were sold through the five roadhouses in the region, and the remaining 7% was sold through the two hotel outlets in the region, the Gagudju Crocodile Hotel and Kakadu Frontier Lodge.
- Full-strength beer accounted for 74% of sales, low alcohol beer for 18%, and wine and spirits for 4% and 2% respectively. (Two percent of sales were 'other'.)
- Of the liquor sold through the three clubs serving local drinkers, a little under 10% were sold through the Jabiru Golf Club. The remaining 90% of sales were shared fairly evenly between Gunbalanya and Jabiru Sports and Social Clubs, both of which recorded sales in excess of 250,000 litres.
- Apparent per capita consumption by persons aged 15 and over from the three clubs in 1994-95 was equivalent to 14.1 litres of absolute alcohol. This is similar to the overall Northern Territory figure, and 50% higher than the national figure.
- Estimated per capita consumption by male Aboriginal drinkers at Gunabalanya and Jabiru Sports and Social Clubs was equivalent to 1,151 mls of absolute alcohol per week, or the equivalent of 56 cans of full-strength beer and 11 cans of light beer per week. Female drinkers consumed, on

average 35 cans of full strength beer and 7 cans of light beer per week, equivalent to 719.3 mls of absolute alcohol per week.

- These figures are disturbingly high. Among male drinkers, the mean consumption of absolute alcohol per week was *more than three times* the recommended upper limit for responsible consumption, and more than *double* the level designated by the NH&MRC as harmful. It was also more than three times the mean consumption level reported by drinkers in a sample survey conducted in Darwin, Katherine and Alice Springs in February 1993.
- Amongst female drinkers, the mean consumption level in the Gunbalanya/Jabiru SSC was *four* times the NH&MRC responsible drinking level, and more than double the 'harmful' level. It was also more than four times the mean consumption level reported by female drinkers in the 1993 survey of NT towns.
- These consumption patterns associated with the two main licensed clubs alone - quite apart from any additional consumption that might occur through other outlets - pose a major threat to the health and wellbeing of Aboriginal people in the West Arnhem region.

The effects of alcohol misuse in the region

The West Arnhem region exhibits serious alcohol-related problems associated with intoxication, chronic heavy drinking, and dependence.

Problems associated with intoxication are to some extent documented in statistics reporting assaults and drunkenness, although much of the violence associated with drunkenness is never reported and consequently never appears in statistics or reports.

Problems associated with chronic high consumption, on the other hand, are virtually undocumented. This is largely because neither of the health clinics in the region undertake regular screenings or maintain other databases. Consequently, while the very high consumption levels in the region suggest that the problems associated with chronic heavy drinking would be widespread, no statistical or other data are currently available.

The major problem associated with dependence occurs at the community level, in Oenpelli. For many drinkers in Oenpelli, the club has become a focal institution. As a result, the club in turn has become a dominant institution in the community. Working patterns, for example, are governed largely by the club's opening hours. A destructive symbiotic relationship has developed, in which drinkers are dependent upon the club, which in turn is dependent for economic prosperity on maintaining high consumption levels among drinkers. The club is able to use its economic and attendant political power to patronise worthy causes by diverting a proportion of its profits to them, thereby further broadening its political power-base in the community and ensuring protection against criticism or even scrutiny. Those many people in Oenpelli who are concerned about the role of the club are effectively disenfranchised. This situation should not be condoned.

While these aspects of the role of the Gunbalanya Sports and Social Club are grounds for concern, the positive contribution made by the present club management to creating a pleasant, ordered drinking environment must also be recognised. Prior to the present management assuming office, the club had been beset by chronic management problems, high turnover of administrative and other staff controversies with other groups in the community, and periodic disagreements with the NT Liquor Commission and police officers. These problems appear to have been overcome in recent years.

Existing programs and services for addressing alcohol-related problems in the region

Existing programs and services are reviewed under three headings : controls on the availability of alcohol; programs and services designed to change drinking practices, and measures designed to reduce risks associated with drinking environments.

Controls on availability of alcohol

Under the alcohol strategy proposed by the Fox Commission and adopted by the Federal Government in 1977, the key to minimising alcohol-related problems was seen to lie in a set of measures to control access to alcohol, chiefly by containing consumption within licensed clubs, discouraging and strictly limiting takeaway sales, and prohibiting the issuing of ordinary publicans' licences in the region.

These objectives have not been achieved. The control system that has evolved since then consists of two parallel sets of controls, one codified in formal licence conditions attached to licences issued under the authority of the NT Liquor Commission, the other in a series of informal verbal agreements negotiated between individual licensees and the Gagudju Association. The latter set special restrictions on the sale of liquor to Aboriginal people living in the region.

Both sets of controls are made up of *ad hoc* measures, with no evidence of an underlying strategic approach, and neither set is linked to the other in any coherent way.

Some formal licence conditions have been liberalised in recent years, apparently without consultation with local Aboriginal groups. The informal agreements are subject to a number of additional problems. Firstly, being verbal agreements, they are liable to be unilaterally repudiated at any time. Secondly, licensees claim that the agreements are difficult to enforce. Thirdly, licensees are also uncertain about the extent to which they are protected, under the agreements, against anti-discrimination legislation. Finally, and most importantly, the agreements have failed to curb excessive alcohol consumption.

Programs and services to change drinking practices

The range of programs and services designed to change drinking practices comprises :

- some *primary preventive programs*, including mass media campaigns to which Aboriginal people in the region are exposed, intermittent school-based education, and the Aboriginal Living With Alcohol Program, which seeks to use a community development approach to encourage groups in communities to identify and implement strategies for reducing alcohol-related harm, and
- limited access to *tertiary preventive measures* in the form of a residential treatment facility located outside the region.

Secondary preventive programs are conspicuously lacking. A visiting worker employed by CAAPS provides regular counselling and related services, and one community-based worker is employed by CAAPS in Oenpelli. Royal Darwin Hospital offers a hospital-based screening program which, however, screened only 12 people from the West Arnhem region in 1994/95. The most important gap in existing service is the absence of any regular screening or early intervention programs.

Measures to reduce risks associated with drinking

Apart from licensed clubs - which can be seen as attempts to create safe, controlled drinking environments - there are almost no measures in place to reduce risks associated with drinking, such as sobering-up shelters or night patrols. A former police facility in Oenpelli was being converted for use as a women's refuge late in 1995.

However, we do not believe the absence of such services to pose a problem at present.

The present range of programs and services, therefore, is shown to be inadequate on several counts.

Summary of recommendations

- 1 In view of the shortcomings of the existing system of controls on alcohol misuse in the region, a new strategic framework is needed for the reduction of alcohol-related problems in the region. This should be based on four types of measures :
 - (1) *effective* controls on availability of alcohol;
 - (2) a range of appropriate and genuinely accessible preventive and treatment services;
 - (3) suitable 'risk reduction' measures and services, and
 - (4) measures and services to enhance economic and social opportunities for Bininj.

In this report, we make some recommendations regarding the first three of these components. We do not discuss the fourth, mainly because the Djabulukgu Association has commissioned a separate consultancy to consider the development of employment and training opportunities, and is also taking initiatives with respect to education.

Controls on the availability of alcohol

2. Priority should be given to establishing a mechanism to develop and oversee a *coordinated, formalised* system of controls on availability, based on consultation with all relevant parties - including non-drinkers in communities. This mechanism, in the form of a regional alcohol committee, would include representatives from :
 - Australian Nature Conservation Agency (ANCA);
 - Northern Territory Liquor Commission;
 - Northern Land Council;
 - Gagudju Association;
 - Djabulukgu Association;
 - NT Hotels and Hospitality Association;
 - Council for Aboriginal Alcohol Program Services (CAAPS);
 - Kunbarlanjnja Community Government Council;
 - Jabiru Town Council;
 - Demed Inc.

The committee's primary task would be to review annually all special conditions and restrictions attached to licences, to consider any submissions that might be made with respect to licences, and to make recommendations both to the Director of ANCA and the Chairman of the NT Liquor Commission.

In reviewing licences, the committee would be mindful of the need to reconcile the needs and wishes of local residents and tourists with the urgent need to reduce excessive drinking and associated problems in the region.

The regional committee could be based upon the existing Gunbang Action Group, or it could be a completely new entity.

3. Operating conditions governing Gunbalanya and Jabiru Sports and Social Clubs should be amended in order (a) to make them more accountable to the diversity of interests, needs and views of members of the communities in which they are located, and (b) to counteract the concentration of economic and political power that tends to accrue to those individuals or groups who gain effective control over the

considerable financial resources of these clubs. To promote these goals, we recommend that the operating conditions of Gunbalanya and Jabiru Sports and Social Clubs be amended in three ways :

- in the case of Gunbalanya SSC, to make it mandatory that at least 50% of elected committee positions, including 50% of executive positions, be held by adult Aboriginal female residents of Oenpelli; in the case of Jabiru SSC, to make it mandatory that at least 25% (ie. 50% of 50%) of elected committee positions, including executive positions, be held by adult Aboriginal female residents of Jabiru and/or surrounding town camps. Should either club be unable to meet these conditions, its licence would be reviewed by the Liquor Commission.
 - to stipulate that club committees must include at least one nominee of the regional alcohol committee foreshadowed in recommendation number 2, above. Such nominated members would have full voting rights.
 - to require both clubs to submit annual reports, including statements of receipts and expenditure, to the regional alcohol committee foreshadowed in recommendation number 2, within three months of the end of each financial year; failure to comply to be brought to the attention of the NT Liquor Commission.
- 4 Further restrictions should be imposed on the availability of take-away alcohol region. Specifically, we commend that:
- The existing ban on all takeaway sales from Gunbalanya Sports and Social Club, and restrictions on takeway sales from other outlets in the region be either (a) retained or, (b) in consultation with the Regional Alcohol Committee proposed above, be extended.
 - Takeaway sales from Jabiru Sports and Social Club to Aboriginal club members be restricted to either 6 cans of full-strength beer per person per day, or 12 cans of light beer per person per day, initially for a trial period of six months, with effects being monitored.
 - Notwithstanding (1) and (2) above, consideration be given to permitting no takeaway sales of alcohol throughout the region on Thursdays or on 'royalty payment' days, again for an initial six month trial period.
1. The present arrangement at Gunbalanya Sports and Social Club, under which the club opens between 12 noon and 1.00 pm, with a further 30 minutes during which patrons can consume drinks purchased during the one hour sales period, is a matter of continuing controversy in the community. We believe that present lunchtime consumption patterns have a severe, deleterious effect upon Aboriginal employment and productive activity in the community. As a result, responsibility for the performance of many essential functions, *and the power and authority that goes with this responsibility*, remains vested largely in non-Aboriginal residents in the

community. This in turn contributes to a continuing marginalisation of Aboriginal people in a community that is ostensibly under their own control.

We also believe that (a) most if not all regular drinkers in Oenpelli favour the present arrangement, while the views of non-drinkers do not appear to have been adequately canvassed. Under these circumstances, we do not believe it appropriate to call for a cessation of lunchtime trading. We do, however, recommend that pending any community-based reform of lunchtime trading arrangements, some steps be taken forthwith to reduce harmful effects. Specifically, we recommend that lunchtime sales at Gunbalanya Sports and Social Club :

- (a) be restricted to light beer only, and
- (b) be contingent upon the club providing a meal, for which it should levy a lunchtime entrance fee of approximately three dollars per person.

- 6 The NTHHA should be asked by the Living With Alcohol Program to discharge its responsibilities to train bar staff in the region, under the terms of the grant that the NTHHA has received from the NT Government to enable it to carry out this role. Should the NTHHA be unable or unwilling to perform this role then (a) the LWAP grant should be reviewed, and (b) the proposed Regional Alcohol Committee should approach the Living With Alcohol Program, seeking funds to enable it to engage a trainer on its own behalf
- 7 Existing laws regarding serving of alcohol to intoxicated and/or underage patrons, and regarding public drunkenness, be rigorously enforced⁶.

Preventive and treatment services

Measures designed to reduce alcohol-related problems by controlling the supply of alcohol must, if they are to have any chance of success, be complemented by measures to reduce *excessive demand* for alcohol. The existing range of services and programs is inadequate, in that it is founded on (a) primary prevention measures of questionable effectiveness, such as media campaigns, some occasional school-based education, and an NT Government Aboriginal Living With Alcohol Program which, to

⁶ Between the time the research for this project was carried out, and a final report prepared, the law relating to serving intoxicated persons in the NT was amended. On 22 May 1996, under amendments to the LiqgQP Act, it (a) became a regulatory offence to serve alcohol to intoxicated persons; (b) the onus of proof was henceforth placed on licensees and their staff to establish that customers were NOT intoxicated at the time of being served, and (c) licensees became liable with respect to offences against the Liquor Act committed by their employees, whereas previously only the bar staff directly involved had been liable. In addition, evidence from breathalyser readings became admissible with respect to offences under the Liquor Act, whereas previously it had been admissible only with respect to offences under the Traffic Act.

date at least, appears to have had little impact in the region, and (b) limited access to residential treatment facilities located outside the region. The most important gap in present services is a dearth of secondary prevention measures, in particular, regular screening or early intervention programs.

- 8 To overcome these deficiencies, it is recommended that screening and early intervention programs be established at Jabiru Health Clinic and Gunbalanya Health Centre.
9. We also recommend that Dr Elizabeth Chalmers be engaged on a short consultancy basis to establish the program, in consultation with staff at Jabiru Health Clinic, and to train clinic staff in its use.
- 10 We recommend that funds to cover establishment of the screening and early intervention program be sought from the NT Living With Alcohol program. Such funds should also provide for monitoring and evaluating the program.
 - (a) The screening and early intervention program should be monitored and evaluated, in both the short and long term. Funds to cover the evaluation should be included in the funds sought from the NT Living With Alcohol Program.
11. The proposed screening and early intervention program should not be seen as an alternative to either the Aboriginal Living With Alcohol Program - which has a specifically non-medical focus - or to whatever community-based services CAAPS might put in place. There is a need for all of these, although the benefits accruing from each would undoubtedly be enhanced by mutual co-operation among the respective programs.
- 12 The current efforts by CAAPS to design a more effective range of community-based counselling, referral and follow-up services, should be supported, and such services encouraged to work in co-operation with the proposed screening and early intervention programs.

Risk reduction measures

- 13 It is not recommended that additional night patrols, sobering-up shelters or women's shelters be established at this time. However, (a) we support the moves at Oenpelli to convert some old police cells for use as a women's shelter; (b) we anticipate that the proposed new women's resource centre in Jabiru, referred to in Recommendation 14, would include provision for crisis accommodation, and (c) should community groups at some time in the future wish to set up a night patrol or similar ventures, these initiatives should, in principle, be supported.
- 14 We recommend that funds be sought to establish a new women's resource centre in Jabiru, and also to enable a coordinator of the centre to be appointed.

The need for a community development approach

A successful alcohol strategy in West Arnhem must reconcile three objectives: first, that of bringing about a reduction in per capita consumption; second, that of mobilising community support, and third, that of building and maintaining that support in a politically contested

environment. The only approach likely to meet these challenges is a community development approach.

15 *We therefore recommend that an experienced community development worker be appointed, initially for a 12 month period, to work in Oenpelli.* The primary roles of the worker would be :

- to mobilise those people and groups in the community who are concerned about the current high levels of alcohol consumption and associated harm, but who are effectively disenfranchised at present;
- to identify, through negotiations and consultations with all interested parties, a prioritised set of measures that can be put into effect forthwith to reduce alcohol problems;
- to liaise with other groups and agencies in the community and region, and
- to establish mechanisms for monitoring and evaluating any measures adopted.

16 The worker would be based in Oenpelli and should be located at the health clinic. The position should either be attached to the clinic, or to the recommended regional alcohol committee, a sub-committee of which could be appointed as a steering committee for the worker.

17 We do not see a need for a similar position in Jabiru. If a coordinator for a women's resource centre is appointed, as we recommend, this person would be able to liaise with Aboriginal women in and around Jabiru on alcohol-related matters, and also with alcohol workers employed by the Council for Aboriginal Alcohol Program Services (CAAPS). Similarly, if a screening and early intervention program is introduced as we recommend, health clinic staff would become even more effective than some of them are already in raising awareness about drinking problems and proposing alternatives.

1. A FRAMEWORK FOR ADDRESSING ALCOHOL-RELATED PROBLEMS

1.1. The nature of alcohol problems

Alcohol-related problems are a product of three inter-related sets of factors⁷ :

- the chemical and pharmacological properties of *alcoholic beverages* consumed (eg. the action of alcohol on the central nervous system);
- attributes of the *drinkers*, including their motivations, expectations, and state of health, and
- *the settings* in which alcohol is consumed (eg. proximity to drinkers' families; availability of food; reliance on motor vehicles for transportation).

Both the settings in which alcohol is consumed, and the expectations that drinkers bring to those settings, are also products of *drinking cultures* - that is, the set of meanings, values and goals attached to alcohol and drinking amongst members of a particular society or social group.

This means that, in addressing alcohol-related problems, we need to consider four sets of factors :

- alcoholic beverages (amounts, types, etc. consumed)
- drinkers (eg. their expectations, state of health)
- settings (eg. hotels, clubs, town camps)
- drinking cultures (eg. group drinking patterns; peer pressures on those who wish to stop or reduce their drinking).

When considering the effects of alcohol misuse, it is useful to make two further sets of distinctions. Firstly, it is important to distinguish between three kinds of effects: (a) those associated with *intoxication* - eg. violence, fighting, road crashes - (b) those associated with *chronic, excessive consumption*, such as hypertension, liver damage, and alcohol-related brain damage, and those resulting from *dependence*, such as the psychological problems and withdrawal symptoms displayed when consumption is stopped⁸

Secondly, the effects of alcohol misuse can be distinguished according to the levels at which they occur: these are (a) *drinkers* themselves (eg. involvement in criminal justice system; health problems), (b) drinkers' families (eg. domestic violence, loss of money for food) and

⁷ (Zinberg 1984)

⁸ (Heather & Tebbutt 1989c).

(c) *drinkers' communities* (eg. high unemployment; strain on health services)⁹.

These distinctions are important, not just for analytical purposes, but also as a basis for developing strategies. No single measure is capable of ameliorating all of the harmful effects of alcohol misuse. It is therefore necessary (a) to prioritise those effects that are to be the focus of intervention, and (b) to select the most appropriate measures for addressing those particular effects. In this way it is possible to have clear goals, and to avoid arousing unrealistic expectations about problem-solving.

These distinctions are summarised, and some examples listed, in the following table.

Table 1. 1: Types and levels of alcohol-related problems

Type of effect	Drinkers	Drinkers' families	Communities
Intoxication	<ul style="list-style-type: none"> • injuries; • road crashes • involvement in criminal justice system 	<ul style="list-style-type: none"> • domestic violence • psychological impact on children. 	<ul style="list-style-type: none"> • high rates of STDS • high rates of drunkenness, violence, vandalism; • deterrence against productive investment.
Chronic, excessive consumption	<ul style="list-style-type: none"> • hypertension; • liver damage; • 	<ul style="list-style-type: none"> • lack of income to meet basic needs, such as food, shelter, clothing; • negative effects on children's education 	<ul style="list-style-type: none"> • damage to maintenance of cultural values; • premature deaths, leading to reduced numbers of old people; • strain on services, including health and education; • high unemployment and reduced job opportunities.
Dependence	<ul style="list-style-type: none"> • incapacity, or impaired capacity, to regulate own consumption; • inability to function in various roles, including family and work. 	<ul style="list-style-type: none"> • As above 	<ul style="list-style-type: none"> • As above

⁹ (Moore & Gerstein 1981).

1.2. Measures to reduce alcohol-related problems

Given the multi-causal nature of alcohol-related problems, it follows that any strategy that aims to minimise these problems must address all of the sets of factors outlined above - the *alcoholic beverages*, the *drinkers* and the *settings* in which consumption occurs. To build a strategy on only one set of factors - whether it be, for example, a treatment program or restrictions on availability - is to invite failure.

Four types of measures are available :

1. Controls on the *availability* of alcohol;
2. Programs and services designed to change *drinking practices*;
3. Measures designed to reduce risks associated with particular *drinking environments*, and
4. Measures to overcome social and economic disadvantages, and to enhance the *social and economic opportunities* available to members of the population to which the drinkers belong¹⁰.

Controls on availability are achieved through measures such as licensing regulations that govern hours of trade, permissible promotional practices and the number and types of outlets; through legislation governing minimum drinking ages; through fiscal measures such as taxation, and through community initiatives such as the declaration of 'dry areas'.

Programs to change drinking practices include educational initiatives, screening and **early** intervention programs, and treatment and rehabilitation programs.

Measures to reduce environmental risk include sobering-up shelters, night patrols and initiatives such as designated driver schemes.

Finally, measures to overcome social and economic disadvantages include employment, housing and training programs.

¹⁰ The first three of these measures are adapted from May (May 1992); the fourth is emphasised both in the National Aboriginal Health Strategy and in the Final Report of the Royal Commission into Aboriginal Deaths in Custody.

2. THE REGION AND ITS PEOPLE

The population of the region is about 3,000, of whom a little over half are Aboriginal, as Table 2.1 shows.

Table 2.1 Estimated population of the West Amhem/Alligator Rivers region

Place	Aboriginal			Non-Aboriginal		
	Male	Female	Total	Male	Female	Total
Gunbalanya(a)	378	386	764	62	47	109
Gunbalanya outstations (b)	?	?	300			
Jabiru(c)	38	45	83	714	559	1273
Mudginberri (d)	67	62	129			
Manaburdurina (d)	37	35	72			
Cannon Hill/East Alligator (d)	25	32	57			
Patonga (d)	30	23	53			
Cooinda/Spring Peak/Paradise (d)	16	22	38			
Mamukala (d)	10	12	22			
Other outstations(d,e)	16	29	45			
TOTAL	617	646	1563	776	606	1382

- (a) Sources: ABS 1991 Census of Population and Housing, Basic Community Profile Catalogue No.2722.7, and Aboriginal and Torres Strait Islander Community Profile Cat. No.2722.7 (note: according to information supplied by Kunbarllanjnja Community Government Council, the population as at June 1995 was: Aboriginal 756; non-Aboriginal, 124).
- (b) Source:
- (c) Sources: ABS Estimated Resident Population by Age, Sex, and Statistical **Local Area**, Northern Territory, June 1993 and June 1994, Cat. No. 3207.7 and Jabiru Health Clinic **data**.
- (d) Source: Jabiru Health Clinic, 1995.
- (e) Deaf Adder, 009, Nourlangie.

The region contains two townships - Jabiru and Gunbalanya (Oenpelli) - and a number of smaller settlements or outstations, some of which are linked to Oenpelli, and others to Jabiru. Oenpelli and its outstations are located within the Amhem Land Trust area, while most of the remainder of the region lies within Kakadu National Park, a World Heritage listed park covering 19,804 square kilometres, created in stages from 1975¹¹. The townsite of Jabiru lies within the Park **area**, but has been excised

¹¹ (Forrest 1993)

from the Park. Jabiru is situated 256 kilometres by road east of Darwin, and Gunbalanya is 60 kilometres north east of Jabiru.

2.1. Oenpelli

The community of Gunbalanya has a population of around 870, about 760 of whom are Aboriginal (see table 5.1). The Aboriginal people of Gunbalanya today are referred to collectively as Gunwinggu people, although strictly speaking this term refers to the language spoken by a group who moved into the area from further east in Amhem Land¹².

The first permanent settlement at Oenpelli was established around the turn of the century by Paddy Cahill, a buffalo shooter who took up a pastoral lease over the area, and in 1906 established a dairy herd. In 1924 Cahill sold his property, and in the following year it became a Church Missionary Society mission¹³. For the next fifty years the CMS retained control over Oenpelli, as successive government policies shifted from 'protection' to assimilation' to 'self-determination'. With the advent under the Whitlam Labor Government of the policy of 'self-determination' in 1973, administrative authority in Oenpelli passed to the Oenpelli Council, which continues to administer the community. In 1995 the Council became incorporated under the Northern Territory Government's Community Government scheme as the Kunbarllanjja Community Government Council.

Since the 1970s, a number of traditional owners in the Oenpelli area have moved back onto their country to establish outstations. Today, there are nine such outstations, which are said to have a combined population of around 400 people, although at any one time there are usually only about 300 in residence¹⁴. Provision of services and infrastructure to the outstations is the responsibility of Demed Incorporated, an organisation headquartered in Gunbalanya.

2.2. Jabiru

The township of Jabiru is of comparable size to Gunbalanya (population of Jabiru is around 1356), but there any resemblance between the two communities ends. Jabiru is a new town, established on a 13 sq.km area leased from the Director of National Parks and Wildlife, to serve as a regional centre for the development of uranium mining at the nearby Ranger Joint Venture mine, under guidelines laid down by the Ranger Uranium Environmental Inquiry. The first residents arrived in July 1980¹⁵.

For the first few years following its establishment, Jabiru was administered by a statutory authority comprising representatives of the Northern Territory Government and the Ranger Joint Venture. Since 1984 it has been serviced by the Jabiru Town Council - a conventional municipal authority.

¹² Fox, Kelleher & Kerr 1977c).

¹³ (Cole 1975a).

¹⁴ Personal communication, Mr Bob Burton, Demed Incorporated.

¹⁵ (Lea & Zehner 1986b)

Almost all residents of Jabiru are employees, or families of employees, of Ranger, the NT Government or other agencies such as the Northern Land Council. The resident population is largely non-Aboriginal. However, a town camp area known as Manaburdunna has been designated for Aboriginal occupation. Other Aboriginal settlements in the vicinity are Mudginberri, Cannon Hill, Patonga, Cooinda and Mamukala, the populations of which are listed in Table 5.1 above.

2.3. Kakadu National Park

Kakadu National Park covers 19,804 sq. km, and includes parts of the Anhem Land plateau - a spectacular area made up of sandstone escarpments and areas of rainforest grasslands, savannas and floodplains. It is one of only 17 places in the world included on the World Heritage list for both cultural and natural values, having been occupied continuously for between 40,000 and 60,000 years¹⁶.

The Park's origins date back to 1971, when the Commonwealth Government agreed in principle with a proposal from the Northern Territory Reserves Board to establish a national park along the Anihem Land escarpment¹⁷. However, competing land use claims, which in turn became the subject of the Ranger Uranium Environmental Inquiry, brought about delays, and it was not until 5 April 1979 that Stage One of Kakadu National Park was proclaimed. Stage Two was proclaimed in February 1984, and Stage Three in June 1987.

Management of the Park is governed largely by two pieces of legislation: the Aboriginal Land Rights (Northern Territory Act 1976, under which unalienated land in the Northern Territory can be claimed by traditional Aboriginal owners, and the National Parks and Wildlife Conservation Act 1975, which established the statutory office of Director of National Parks and Wildlife, and provided for the area of the Park to be declared a national park.

In 1992 it was estimated that some 300 Aboriginal people lived in the Park, many of whom are actively involved in the Park's management. One of the main associations of traditional owners, the Gagudju Association, operates a number of commercial enterprises in the Park, including the Gagudju Crocodile Hotel in Jabiru and the Gagudju Lodge Cooinda Hotel Motel at Cooinda. Another Aboriginal body, the Djabulukgu Association, leases the Marrawuddi Gallery and other commercial enterprise¹⁸.

¹⁶ Press, Lea, Webb & Graham 1995a).

¹⁷ This account of the establishment of Kakadu National Park is based on (Forrest 1993).

¹⁸ (Press, Lee, Webb & Graham 1995b).

3. HISTORICAL BACKGROUND: URANIUM MINING,

ALCOHOL IN THE WEST ARNHEM REGION

TOURISM AND

In 1969, two events occurred that were to have a profound effect on the people of the Alligator Rivers region, and do much to shape the circumstances with which this report is concerned. The first was the granting by the Northern Territory Licensing Court of a liquor licence to the Border Store, located near the banks of the East Alligator River, just outside the Arnhem Land boundary, and just 17 km from Oenpelli. The second was the discovery by Peko-Wallsend Operations Ltd and Electrolytic Zinc Co of Australasia of substantial uranium ore deposits in what became known as the 'Ranger Project Area' and the site today of the Ranger uranium mine.

The decision to grant the Border Store licence was opposed at the time by the Oenpelli Council, but to no avail. Almost immediately, the impact on the community at Oenpelli was noted. Cole refers to reports of drunkenness, fighting, domestic violence and heavy spending on alcohol¹⁹. A series of community meetings held at Oenpelli in October 1971 agreed on the need for a policeman at Oenpelli, a ban on alcohol on the Oenpelli side of East Alligator River, and a ban on the Border Store selling take-away liquor. In 1974 the Council once again opposed the granting of the licence, but was again over-ruled by the Licensing Court. Subsequently, Council Deputy Chairman Jacob Nayinggul made representations to the Minister for Aboriginal Affairs, Senator Cavenagh :

Oenpelli was a very happy place until 1969 when a liquor licence was granted to a store just outside the Arnhem Land reserve. The Oenpelli community then unsuccessfully opposed the granting of the licence. Men drinking too much beer has led to lots of problems. People are sick. Six men have died and many have been taken to Darwin hospital. There have been lots of fights with fists, knives, axes and rifles.... In March 1974 we opposed the renewal of the licence in the Northern Territory licensing court, but our objections were overruled. Later in 1974 the problems became worse. On some nights none of the population of 600 were able to sleep because of drunken brawls²⁰.

¹⁹ (Cole 1975b).

²⁰ (Cole 1975c).

The Shire Council called for closure of the Border Store, establishment of a social club within Oenpelli, and provision of a police station at Oenpelli, to be manned ultimately by Aborigines themselves.

In 1975 Cole identified alcohol misuse as "the major social problem at Oenpelli", a view that was corroborated by the Commissioners of the Ranger Uranium Environmental Inquiry (known as the Fox Report) in 1977. The Fox Commission described the Gunbalanya Council as being on the verge of breakdown, Aboriginal employment and primary school attendances as both declining, and the community as a whole as being beset by "a general air of despondency"²¹.

3.1. The Ranger Uranium Environmental Inquiry

The Fox Commission was set up by the Federal Government to determine whether or not uranium mining should proceed and, if so, under what conditions. The Commission's findings were published in two reports, the second of which was submitted to the Federal Government in May 1977. Despite being deeply pessimistic about the possible social consequences of mining, and despite being well aware of the extent of local Aboriginal opposition to mining, the Commission recommended that mining proceed, subject to a range of constraints and guidelines. The Government accepted the decision and almost all of the Commission's recommendations, and announced in August 1977 that uranium mining would proceed.

The Commission viewed the control of alcohol as being of critical importance :

Evidence placed before the Commission left no doubt that excessive consumption of alcohol by a large proportion of the Aboriginal people in the Region is having a deleterious effect on their general welfare. The Commission was left with the clear impression that the future of these people will depend in large part on removing or substantially reducing the causes of this problem²².

Despite this gloomy assessment, the Commission professed to envisage "a unique opportunity to establish a program designed to reduce dependence on alcohol among Aboriginal people in the Region"²³.

This program, as outlined by the Commissioners, comprised four elements :

- 1 measures which the Commission claimed would improve the 'morale' of Aboriginal people, chiefly through the creation of congenial employment opportunities;
- 2 the creation of a data-base on the needs of Aboriginal people in the region;

²¹ (Fox, Kelleher & Kerr 1977e).

²² (d'Abbs, Hunter & Reser 1977d).

²³ (Fox, Kelleher & Kerr 1977a).

- 3 a system of controls on the availability of alcohol; and
- 4 measures to enforce these controls.

3.1.1. Measures to improve 'morale'

The Commission proposed several steps to overcome what it regarded as the poor 'morale' of Aboriginal people in the region. These were : (1) acknowledgment of Aboriginal title to land; (2) the establishment of a national park, which would create job opportunities that Aboriginal people would find attractive and at the same time shield Aboriginal people from the impact of tourism by acting as a buffer between Aboriginal and other people; (3) mining, which would provide some employment opportunities, in addition to continuing opportunities available through the abattoirs at Mudginberri; and (4) a buffalo eradication program, which would also create job opportunities that Aboriginal people would be likely to find attractive²⁴.

3.1.2. An Aboriginal needs 'database'

The Commission's second proposal was for a program to ascertain and record "the health, education, employment and accommodation needs of every [Aboriginal] individual²⁵ (p.231) in the region. (The Commission did not use the term 'database' but this, in contemporary parlance, appears to be what the Commissioners had in mind.) The Commissioners did not indicate just how they thought this compendium of data might be used to generate useful programs and services.

3.1.3. Controls on availability of alcohol

The central component of the Commission's strategy, and the one outlined in the most detail, was a regulatory environment, which essentially involved restricting alcohol sales to licensed clubs (and issuing no ordinary publicans' licences), where sales were to be rationed, and discouraging take-away sales. The Commission's proposals are listed below.

- *Liquor to be on sale at Oenpelli, but only through a licensed club or clubs. Sales to be rationed on a suitable basis.*
- *The bringing of liquor on to Aboriginal land in bulk quantities (eg. a dozen or more cans of beer) and the sale or supply in bulk quantities of liquor intended to be sent or brought on to Aboriginal land to be forbidden (except when being supplied to licensed premises). This prohibition should, for sake of completeness, also include Cooinda and the region centre, and may be extended so as to relate to the whole national park.*

²⁴ The Commission's optimism on this point is a little puzzling, as elsewhere in the report, the Commissioners argue that many job opportunities were already available, especially at Oenpelli and Mudginberri, but were not being taken up, partly because many Aboriginal people did not place the high value on regular employment that non-Aboriginal people do, and partly because many Aboriginal people were so preoccupied with alcohol. The Commission also suggested, on the basis of comparable mining developments elsewhere, that few Aboriginal people were likely to be attracted to working with the mining companies.

²⁵ (Fox, Kelleher & Kerr 1977a).

- *Bulk sales to be prohibited at Cooina and in the regional centre.*

- *At the Border Store and Cooina, and at any other licensed premises established on Aboriginal land (eg. at Jabiru), no more than a very limited amount of liquor to be sold unopened. Facilities at these places to be such that consumption on the premises is encouraged.*

- *Liquor to be on sale in the regional centre, but principally in licensed clubs. Sales at clubs to be rationed on a suitable basis. At other licensed premises, sales to be governed by the same considerations as apply to the Border Store and Cooina. An ordinary publican's license should not be granted.*

- *A number of Aboriginal special constables to be appointed, whose primary duty will be to control excessive consumption of alcohol on Aboriginal land. They will have a duty to enforce the licensing laws and for this purpose will probably have to be given wide powers of inspection and, as incidental thereto, power to stop people and vehicles and to enter premises. Consideration should also be given to their having such additional power to deal with Aboriginals who are under the influence of liquor as is recommended by responsible Aboriginal bodies.*

- *A special magistrate should be appointed from Aboriginals who reside in the Region to deal according to law with people who commit breaches of the licensing laws on Aboriginal land, or who are found on Aboriginal land under the influence of liquor. He may be given special power to deal with Aboriginal offenders in some fashion not recognised under the general law, but recognised as appropriate by responsible Aboriginal bodies.*

- *Rangers in the national park should also be given authority to police the licensing laws within the park.*

Source.. (Cole, 1975 & 2 1977b).

3.1.4. Enforcement measures

The final component of the strategy referred to enforcement, with the Commission making three recommendations. The first was the appointment of "Aboriginal special constables . . . whose primary duty will be to control excessive consumption of alcohol on Aboriginal land". The second was the appointment of an Aboriginal "special magistrate" to deal with offences against licensing laws on Aboriginal land, with special power to invoke Aboriginal customary sanctions, and the third, authorisation of rangers in the proposed national park to police licensing laws within the park²⁶.

²⁶ (Cole, 1975 & 2 1977b).

3.1.5. Comments

The Fox Commission's recommendations are as interesting for what they omit as for what they say. Despite their acknowledgment of already high levels of alcohol misuse in the region, they do not consider the need for education on the dangers of alcohol misuse, or for any intervention or treatment programs. Instead, they rely on two propositions: first, that proposed changes in the social and economic environment would raise 'morale' and therefore, by implication, curb demand for alcohol, and second, that a regulatory system built around containing as much drinking as possible within licensed clubs would minimise excessive consumption.

In Section 3.2 above, it was suggested that alcohol control strategies need to address all of the major components of alcohol-related problems - the alcoholic beverages themselves, drinkers, and the settings in which drinkers consumed alcohol - and that in order to do this, four types of measures are available : (1) controls on the availability of alcohol; (2) programs and services designed to change drinking practices; (3) measures designed to reduce risks associated with particular drinking environments, and (4) measures aimed at enhancing social and economic opportunities among the drinking population.

Within this framework, the Fox Commission's recommendations proposes measures in the 1st, 3rd and 4th categories, but say nothing about measures in the 2nd group.

3.1.6. The go-ahead for mining

The Commonwealth's decision to allow uranium mining to proceed according to guidelines proposed by the Fox Commission necessitated negotiations under the recently passed Aboriginal Land Rights (NT) Act, involving the Northern Land Council (negotiating on behalf of traditional owners), the Commonwealth, and mining interests. These negotiations resulted in an agreement being signed in November 1978. Under the Agreement, the NLC consented to uranium mining, subject to royalty payments of 4.25% of the value of mineral production, and employment of Aborigines in the mine and in associated service occupations²⁷.

In the following year, traditional owners established the Gagudju Association to represent their interests, and in 1980 the new Association purchased the Coinda lease, including the sub-lease, thus giving it control over the availability of liquor in the southern end of Kakadu National Park²⁸.

²⁷ (Lea & Zehner 1986a).

²⁸ (Kesteven 1984a).

3.2. Assessing the social impact of uranium mining : the 1984 report

The framework created by the Fox Commission provided mechanisms for monitoring the impact of mining on the natural environment, but no such mechanism for monitoring the social impact on Aboriginal people. In response to concerns expressed by the Northern Land Council, the Commonwealth in October 1978 commissioned the Australian Institute of Aboriginal Studies to set up a Uranium Impact Project Steering Committee, and to assess the social impact. The AIAS subsequently issued a series of six-monthly reports, culminating in the publication of a consolidated report in 1984²⁹.

Kesteven, whose report on alcohol problems forms part of the 1984 AIAS report, noted that, contrary to the Fox Inquiry's fears, the number of liquor outlets in the area had not grown substantially, but access to alcohol had increased. She noted that Gunbalanya Council had purchased the Border Store licence, initially allowed it to lapse, then transferred the licence to the Gunbalanya Sports and Social Club. In the meantime, another licensed club - the Jabiru Sports and Social Club - had been established in the new town of Jabiru³⁰.

Overall, Kesteven's assessment was a bleak one. Although the Fox Commission's recommendation that licensed clubs be the principal means of supplying alcohol had been followed, beer sales at Oenpelli were not rationed, and grog running was said to be rife. Among the consequences of alcohol misuse at Oenpelli, Kesteven cited violence, neglect of children, neglect of ceremonies and diversion of income away from necessities. In a pessimistic summation, she asserted :

It would not be unfair to say that alcohol - the search for it, the imbibing of it, or the avoidance of those intoxicated - is a major preoccupation of the entire Region. Apart from long-term effects on health, vehicle accidents result from it, sometimes deaths, and certainly violence against property and people. Money is diverted from food to beer, energies are diverted from ceremonies to beer. And energies are consumed (principally by women) in maintaining a social fabric that alcohol threatens to tear down daily. The key question remains: for how long can unacceptable behaviour be tolerated; for how long will responsibility be disclaimed on the grounds of drunkenness; for how long can people patch the social and material damage done by drunks?³¹

3.3. Delineation of control over liquor licences in Kakadu

As already mentioned, a central component in the guidelines for controlling alcohol proposed by the Fox Commission was a policy of restricting alcohol sales to licensed clubs, which by definition are entitled to sell liquor only to members and invited guests, and to discourage take-away sales. Not surprisingly, this policy was soon put to the test by commercial interests wishing to sell take-away

²⁹ (Tatz 1984).

³⁰ (Kesteven 1984b).

³¹ (Kesteven 1984b).

liquor to the general public. An attempt by a supermarket in Jabiru to secure a take-away licence in 1982 escalated into a dispute between, on the one hand, the Australian National Parks and Wildlife Service and the Northern Land Council, both of which opposed the application, and the Northern Territory Government. The upshot of the dispute was the passing by the Commonwealth of an amendment to the regulations under the National Parks and Wildlife Conservation Act 1975 which placed final authority over the sale of liquor in Kakadu firmly in the hands of the Director of ANPWS³².

Section 20E of the amended regulations states that "A person shall not sell liquor in Kakadu National Park without the permission in writing of the Director" and requires the Director, upon receiving an application under the section, to seek and take into account the views of the Northern Land Council³³.

The implications of this outcome are explored further in Section 6 of this report.

3.4. Tourism and the proliferation of liquor outlets

Although Kesteven, writing in the early 1980s, did not detect any proliferation of new liquor outlets, the prediction of the Fox Commission has since eventuated. The growth of tourism has brought in its wake an expansion in the number of outlets. In Jabiru itself, the Gagudju Crocodile Hotel - owned, as the name suggests, by the Gagudju Association - has operated since 1988, while the smaller Kakadu Frontier Lodge has held a liquor licence since 1991. Both of these outlets are subject to formal and informal restrictions on selling liquor to the general public (the nature of these restrictions is examined in Chapter 9, below). Also in 1988 the Corroboree Park Roadhouse commenced trading on the Amhem Highway, between Jabiru and Darwin, and in 1990 the Mary River Roadhouse was established on the Kakadu Highway that links Jabiru with Pine Creek, just outside the National Park boundary. While neither of these roadhouses is located within Kakadu, they are both easily accessible to residents of the Alligator Rivers Region.

As a result of these developments, there are today ten licensed outlets located within, or easily accessible from, the region. Three of these - Jabiru Sports and Social Club, Gunbalanya Sports and Social Club, and Jabiru Golf Club - are designed to serve local residents - that is, members and their guests. The remaining seven serve both the local and tourist markets. All of the outlets, which are listed in the table below, operate under a variety of formal and informal constraints. These are discussed in Chapter 9.

³² (Kesteven 1984b); (Lea & Zehner 1986a).

³³ (Commonwealth of Australia 1983).

Table 6. 1: Liquor outlets in t.he We.st Amhem/Alligator Rivers region

Outlet	Licence type	Year established	Location
Gunbalanya Sports & Social Club	Club	1979	Gunbalanya
Gagudju Lodge Coinda	Roadside inn	1979	Kakadu National Park
Kakadu Holiday Village	Roadside inn	1979	Kakadu National Park
Jabiru Sports & Social Club	Club	1979*	Jabiru
Jabiru Golf Club	Club	1982	Jabiru
Bark Hut Inn	Roadside inn	1981	Amhem Hwy
Gagudju Crocodile Hotel	Hotel	1988	Jabiru
Mary River Roadhouse	Roadside inn	1990	Kakadu Hwy
Corroboree Park Roadhouse	Tavern	1988	Amhem HWY
Kakadu Frontier Lodge	Private hotel	1991	Jabiru

* Licence for present premises issued August 1982.

3.5. Summary

The Ranger Uranium Environmental Inquiry in its 2nd report, submitted to the Federal Government in 1977, recommended a number of steps which, it argued, would reduce alcohol problems in the region. These steps involved :

- acknowledging Aboriginal title to land;
- establishing a national park, which would not only create congenial job opportunities for Aboriginal people, but also provide a buffer to shield Aboriginal people from the impact of tourism and mining;
- creating additional employment opportunities in mining and buffalo eradication;
- creating an Aboriginal needs database;
- putting in place a series of controls on the availability of alcohol, the prime objective of which was to contain consumption within licensed clubs, prevent the introduction of new hotel licences, and discourage takeaway sales;
- complementing the control measures with a set of measures for enforcing the controls, which included appointing Aboriginal special constables and an Aboriginal 'special magistrate', and authorising rangers in the proposed national park to police licensing laws within the park.

These measures - with the exception of the database and the proposed enforcement measures - were subsequently endorsed and, in one way or another, implemented as part of the conditions under which uranium mining in the region proceeded.

In 1983 a dispute between the National Parks and Wildlife Service and the Northern Territory Government over authority to regulate liquor licences in the region resulted in an amendment to the National Parks and Wildlife Regulations, under which no person could sell liquor in Kakadu National Park without the permission of the Director, who would seek the views of the Northern Land Council before reaching a decision.

Despite these steps, a subsequent report on the social impact of uranium mining the region, published in 1984, concluded that alcohol misuse throughout the region was having a destructive impact on Aboriginal communities and families.

In recent years, several new liquor outlets have been established within or just outside the National Park. These outlets have been established primarily to serve the growing tourist trade, but also increase the availability of alcohol to Aboriginal people in the region.

4. ALCOHOL CONSUMPTION IN THE REGION

Conventionally, two methods of estimating alcohol consumption are available : (1) sample surveys or censuses, in which drinkers are asked to describe their consumption of liquor over a given period, and (2) the use of sales figures. Each method has its strengths and weaknesses. Self-report surveys notoriously fail to account for more than about half of the liquor that is actually consumed by a given drinking population, but allow for comparisons among categories of drinkers, such as males/females, under-25s and over 25 year olds, and so on. Sales-based estimates incorporate more accurate assessments of total amounts consumed, but do not permit comparisons among categories of drinkers.

For present purposes, sales-based estimates have been used, since the time available would have precluded all but the most superficial sample surveys. The estimates are based on quarterly returns to the Northern Territory Liquor Commission, which record 'purchases into store' for purposes of setting licence fees. In the sections that follow, data has been amalgamated where necessary in order to protect commercial confidentiality.

4.1. Regional consumption patterns

In 1994-95, nearly one million litres of alcoholic beverages (926,573 litres) were sold in the West Arnhem region. The liquor was sold in three main types of outlets: *licensed clubs*, established to serve local drinkers; *roadside inns* located in or around the Park area, and serving both local and a tourist trade³⁴, and *hotels*. Of the total, 61% - more than half a million litres (566,450 litres) - were sold in the three clubs serving local drinkers: Gunbalanya Sports and Social Club, Jabiru Sports and Social Club, and Jabiru Golf Club. A further 32% were sold through the five roadhouses in the region, and the remaining 6.7% was sold through the two hotel outlets in the region, one of which (the Gagudju Crocodile Hotel) holds a conventional hotel licence while the other - the Kakadu Frontier Lodge holds a private hotel licence.

³⁴ One of these outlets, the Corroboree Park Tavern, actually holds a *tavern* licence, which is slightly more restrictive than a roadhouse licence, particularly in not permitting sales before 10 am.

Figure 5.1 shows the proportion of sales from clubs, hotels and roadhouses/taverns.

Pie graph inserted here:

Total sales 1994-1995: 926,573 litres

- Clubs 61%
- Roadhouses/taverns 32%
- Hotel/private hotel 7%

More than 90% of all liquor sold was in the form of beer. As Figure 5.2 shows, fullstrength beer accounted for 74% of sales, and low alcohol beer for 18%. This is a lower proportion than that found in the Northern Territory as a whole, which in 1994-95 was 28.5%³⁵.

Figure 5.2 : Proportions of beverage types sold, 1994-95.

Pie graph inserted here

Beverages

- Beer FS 74%
- Beer, LA 18%
- Other 2%
- Wine 4%
- Spirits 2%

Only in the hotels did wine sales constitute a significant proportion of total sales, and even there, they accounted for only 16.5% of sales, as Table 5.1 shows.

³⁵ Estimate based on alcohol 'Purchase into Store' figures, 1994-95. NT Liquor Commission.

Table 5.1: Regional liquor sales*, 1994-95 by beverage category (%sales)

Beverage	Club	Hotel/ private hotel	R'house/ tavern	Total
Wine, cask	0.9	4.0	3.9	2.1
Wine, bottled	0.8	12.5	2.1	2.0
Wine, fort	0.2	0.1	0.1	0.2
Cider, FS	1.4	2.3	1.6	1.5
Cider, LA	0.0	0.0	0.0	0.0
Spirits	0.5	4.4	1.5	1.1
Spirits, mixed	0.4	0.0	2.8	1.2
Beer, FS	77.0	59.9	71.0	73.9
Beer, LA	18.8	16.8	17.0	18.1
Total	100.0	100.0	100.0	100.0

* Source : NT Liquor Commission; strictly speaking, the data refer not to sales but to 'purchases into store' by licensees.

Of the 566,450 litres sold through the three clubs serving local drinkers, a little under 10% were sold through the Jabiru Golf Club. The remaining 90% of sales were shared fairly evenly between Gunbalanya and Jabiru Sports and Social Clubs, both of which recorded sales in excess of 250,000 litres. In other words, the two main licensed clubs are far and away the most important outlets for local drinkers.

4.2. Estimating apparent per capita alcohol consumption

Two procedures are conventionally used to obtain per capita estimates on the basis of liquor sales. The first involves (a) estimating the total amount of absolute alcohol sold, by applying conversion factors based on the alcohol content of particular kinds of alcoholic beverages, and (b) dividing the total by the estimated resident population aged 15 and over. This yields an 'estimated apparent per capita consumption by persons aged 15 and over'.

This procedure is useful in that it allows for comparison across drinking populations that may consume varying combinations of beer, wine, spirits, etc. At the same time, as an indicator of actual consumption, it has some important drawbacks. Firstly, it makes no allowance for non-drinkers in a population (who, in the case of Aboriginal communities especially, constitute a large proportion of the population), and thereby understates the true consumption of those who do drink. Secondly, it takes no account of gender-based differences in drinking, which have been universally found to be highly significant - with male drinkers invariably drinking more heavily than female drinkers.

The second procedure provides a more accurate estimate of actual consumption levels among male and female drinkers (as distinct from the more notional mean level among a *population*), but requires evidence as to the number of drinkers in a population. The total amount of absolute alcohol sold is divided by the estimated number of drinkers, to yield an estimate of means consumption per *drinker*.

Both of these procedures have been used in preparing this report. The assumptions and calculations involved are outlined in Appendix 1.

For the purpose of preparing an estimate of per capita consumption by persons aged 15 and over, only the sales at the three licensed clubs have been taken into account. Thus, the figures are certainly an under-estimate, since they take no account of sales through the seven remaining outlets. However, as it would be impossible to estimate the proportion of local versus visitor sales at all of these outlets, and as the three clubs are the major outlets for local drinkers, an estimate based on sales at the three clubs is at least useful as one indicator of overall drinking patterns.

Apparent per capita consumption by persons aged 15 and over from the three clubs in 1994/95 was equivalent to 14.1 litres of absolute alcohol³⁶. This is similar to the overall Northern Territory figure, and 50% higher than the national figure, as Figure 7.3 shows.

Figure 7.3: Apparent per capita consumption of absolute alcohol by persons aged 15 and over

Inserted tower graph

Absolute alcohol (litres)

West Arnhem 1994 – 95 = 14.1

NT 1992-93 = 15.3

Aust 1992-93 = 9.4

NOTE: The NT estimate is based upon ABS population data and 'purchases into store' recorded by NT Liquor Commission, and includes a 'tourism factor' based upon data compiled by the NT Tourist Commission. The national estimated is derived from Australian Bureau of Statistics, Apparent Consumption of Selected Foodstuffs, Australia, Cat. 4315.0; Estimated Resident Population by Sex and Age, States and Territories of Australia, Cat. 3201.0.

³⁶ See Appendix 1 for the calculations involved.

4.3. Estimating apparent per capita consumption by Aboriginal drinkers at Gunbalanya and Jabiru Sports and Social Clubs

The estimate reported in the previous section not only includes non-drinkers as well as drinkers in the denominator, but also non-Aboriginal together with Aboriginal drinkers. Previous studies have shown that Aboriginal and non-Aboriginal drinking patterns are quite different from each other: among the latter, the proportion of drinkers is relatively high, but the proportion of drinkers who consume to excess is relatively low. Among Aboriginal populations, the proportion of drinkers tends to be lower, but of those who do drink, a high proportion drink to excess³⁷. Because the primary focus of this study is on issues and problems associated with Aboriginal alcohol misuse, estimates of per capita consumption among drinkers in the region are here related to Aboriginal drinkers at the two licensed clubs which, between them, are the main sources of liquor for Aboriginal drinkers.

The only alcoholic beverage that can be sold to Aboriginal customers at either club is beer. The Aboriginal population from among whom regular drinkers at the two clubs are drawn comprises the population aged 18 and over from Gunbalanya, Manaburdurma and other settlements in the Jabiru area. Some residents of Gunbalanya outstations also make intermittent use of either or both clubs.

How many Aboriginal people in the region drink alcohol? A health screening survey conducted in Gunbalanya in 1994 found that 75% of adult males interviewed, and 25% of adult females, reported that they drank alcohol³⁸. Watson, Alexander and Fleming, in their major survey of drug use in Northern Territory Aboriginal communities in 1986-1987, found that in communities with licensed clubs 83.6% of males and 18.5% of females reported drinking³⁹. Since that time the proportion of females who drink is widely believed to have risen.

For present purposes, it is assumed that 75% of adult Aboriginal males and 25% of females drink alcohol. For the purposes of estimation, it was also assumed that 10% of sales at Gunbalanya SSC were accounted for by non-Aboriginal residents, visitors, and/or residents of outstations, and that 20% of sales at Jabiru SSC were accounted for by non-Aboriginal members and/or visitors.

The calculations involved in deriving estimates of apparent per capita consumption by Aboriginal drinkers at the two licensed venues are outlined in Appendix 1. The resulting estimates are summarised in Table 7.3. They indicate that male Aboriginal drinkers consume, on average, 56 cans of full-strength beer and 11 cans of light beer per week, which is the equivalent to 1,150.9 mls of absolute alcohol per week. Female drinkers consume, on average 35 cans of full strength beer and 7 cans of light beer per week, equivalent to 719.3 mls of absolute alcohol per week.

³⁷ (Hunter 1992).

³⁸ Findings from this survey had not been released at the time of preparation of this report, and accordingly are not presented here.

³⁹ (Watson, Fleming & Alexander 1991).

Table 7.3: Apparent per capita consumption of alcohol by drinkers

Drinkers	FS beer		LA beer		Abs.alcohol
	Litres per year	Cans per week	Litres per year	Cans per week	Mls per week
Male	21.1	56.2	4.0	10.6	1150.9
Female	13.2	35.1	2.5	6.6	719.3

4.3.1. Interpreting the apparent Aboriginal per capita consumption figures

The National Health and Medical Research Council has categorised drinking levels in terms of three categories: responsible, hazardous and harmful. A *responsible* level of consumption is one that carries, on the available epidemiological evidence, an acceptable level of risk, although the NH&MRC also points out that there is no such thing as a level of alcohol consumption that can be declared safe for all individuals under all circumstances, and that there are certain circumstances in which any consumption is unwise. A *hazardous* level of consumption is one that is likely to lead to harmful consequences for the drinker, while a *harmful* level is one that is known to have caused tissue damage and/or mental illness⁴⁰.

The NH&MRC guidelines are generally couched in terms of 'standard drinks' - one standard drink being an alcoholic beverage containing about 10 grams (=12.5 mls) of absolute alcohol. As a rule of thumb, males should not drink more than four standard drinks per day, and females not more than two. Table 7.4 sets out the NH&MRC guidelines, showing the amounts in mls. of absolute alcohol per week, as well as standard drinks per week.

Table 7.4: drinking levels, as designated by the National Health and Medical Research Council

Risk level	Standard drinks per week		Equivalent in mls of absolute alcohol per week	
	Men	Women	Men	Women
Responsible	<=28	<=14	<=350	<=175
Hazardous	29-42	15-28	351-525	176-350
Harmful	>42	>28	>525	>350

The Gunbalanya SSC/Jabiru SSC consumption levels, in the context of the NH&MRC guidelines, are disturbingly high. Looking first at male drinkers, the mean consumption of absolute alcohol per week was *more than three times* the recommended upper limit for responsible consumption, and more than *double* the level designated by the NH&MRC as harmful. As Figure 7.4 shows, the

⁴⁰ (National Health and Medical Research Council 1992).

Gunbalanya/Jabiru level was also more than three times the mean consumption level reported by drinkers in a sample survey conducted in Darwin, Katherine and Alice Springs in February 1993⁴¹.

Figure 7.4: Apparent per capita consumption by male drinkers, NT urban and Gunbalanya/Jabiru SSC (mls absolute per week)

Mls absolute alcohol per week Male

- NHMRC Responsible max = 350
- NT urban 1993 = 309
- GSSC/JSSC = 1550.9

The figures for female drinkers present a similar picture. The mean consumption level by female drinkers in the Gunbalanya/Jabiru SSC was four times the NH&MRC responsible drinking level, and more than double the 'harmful' level. It was also more than four times the mean consumption level reported by female drinkers in the 1993 survey of NT towns.

Figure 7.5: Apparent per capita consumption by female drinkers, NT urban and Gunbalanya/Jabiru SSC (mls absolute alcohol per week-)

Mls absolute alcohol per week Females

- NHMRC responsible (max) = 175
- NT Urban 1993 = 120
- GSSC/JSSC = 719.3

In short, the consumption patterns associated with the two main licensed clubs alone - quite apart from any additional consumption that might occur through other outlets - pose a major threat to the health and wellbeing of Aboriginal people in the West Arnhem region.

4.4. Summary

- In 1994-95, nearly one million litres of alcoholic beverages (926,573 litres) were sold in the West Arnhem region. Of the total, 61% were sold in the three clubs serving local drinkers: Gunbalanya Sports and Social Club, Jabiru Sports and Social Club, and Jabiru Golf Club. A further 32% were

⁴¹ (d'Abbs 1993).

sold through the five roadhouses in the region, and the remaining 7% was sold through the two hotel outlets in the region, the Gagudju Crocodile Hotel and Kakadu Frontier Lodge.

- Full-strength beer accounted for 74% of sales, low alcohol beer for 18%, and wine and spirits for 4% and 2% respectively. (Two percent of sales were 'other'.)
- Of the liquor sold through the three clubs serving local drinkers, a little under 10% were sold through the Jabiru Golf Club. The remaining 90% of sales were shared fairly evenly between Gunbalanya and Jabiru Sports and Social Clubs, both of which recorded sales in excess of 250,000 litres.
- Apparent per capita consumption by persons aged 15 and over from the three clubs in 1994-95 was equivalent to 14.1 litres of absolute alcohol. This is similar to the overall Northern Territory figure, and 50% higher than the national figure.
- Estimated per capita consumption by male Aboriginal drinkers at Gunabalanya and Jabiru Sports and Social Clubs was equivalent to 1,151 mls of absolute alcohol per week, or the equivalent of 56 cans of full-strength beer and 11 cans of light beer per week. Female drinkers consumed, on average 35 cans of full strength beer and 7 cans of light beer per week, equivalent to 719.3 mls of absolute alcohol per week.
- These figures are disturbingly high. Among male drinkers, the mean consumption of absolute alcohol per week was *more than three times* the recommended upper limit for responsible consumption, and more than *double* the level designated by the NH&MRC as harmful. It was also more than three times the mean consumption level reported by drinkers in a sample survey conducted in Darwin, Katherine and Alice Springs in February 1993.
- Amongst female drinkers, the mean consumption level in the Gunbalanya/Jabiru SSC was four times the NH&MRC responsible drinking level, and more than double the 'harmful' level. It was also more than four times the mean consumption level reported by female drinkers in the 1993 survey of NT towns.
- These consumption patterns associated with the two main licensed clubs alone - quite apart from any additional consumption that might occur through other outlets - pose a major threat to the health and wellbeing of Aboriginal people in the West Arnhem region.

5. THE EFFECTS OF ALCOHOL MISUSE IN THE REGION

In Section 1 of this report, we suggested that the effects of alcohol misuse could usefully be categorised as (a) effects associated with *intoxication* - eg. violence, fighting, road crashes (b) effects associated with *chronic, excessive consumption*, such as hypertension, liver damage, and alcohol-related brain damage, and effects resulting from *dependence*, such as the psychological problems and withdrawal symptoms displayed when consumption is stopped⁴². We also suggested that the types of effects could also usefully be distinguished according to the levels at which they occurred: that of drinkers themselves, their families, and the communities in which they lived.

In this section we attempt to depict some of the major effects of alcohol misuse, beginning with effects associated with intoxication.

5.1. Effects associated with intoxication

The following lengthy extract is taken from the Judge's decision in a recent case in the Northern Territory Supreme Court⁴³.

The admitted crown facts were as follows..

The prisoner and the deceased were married and residents of Gunbalanya. The prisoner is 33 years of age, the deceased was 32 years of age at the time of her death. The deceased was a small woman, 148 centimetres in height and 39 kilograms in weight.

Late in the afternoon of 25 January this year the couple were at Gunbalanya Sports and Social Club. The club had limited opening hours and served alcohol from approximately 5.30pm until 8pm each evening. During the course of the day at the social club the couple consumed a considerable amount of alcohol and both became very intoxicated. Tests conducted after post-mortem examination indicated that the deceased's urine alcohol level was .371% and this indicated to the pathologist that the deceased had reached a maximum blood alcohol level of about .28%, which had been reduced to just under .2% by the time she died.

⁴² (Heather & Tebbutt 1989c).

⁴³ (Supreme Court of the Northern Territory 1995).

The prisoner was asked to leave the club at about closing time because of his conduct. He insisted that his wife be sent home also and that occurred. The couple walked towards their home at Claycy's camp at about 2 kilometres south of Gunbalanya and about 3 1/2 kilometres from the club. It was raining heavily at the time and had been raining heavily for some time.

The couple began to argue and oral exchanges occurred whilst they were still in the town, particularly around the area of the community supermarket. The deceased went to a man who was making a telephone call and asked for help. She told him that the prisoner was hitting her. This witness told her to go home and he then punched the prisoner. The witness states that he acted at the direction of the deceased when he struck the prisoner and that the punch was a pretty hard punch.

The prisoner had a rock in his hand but he threw it down after being told by the deceased to do so. The prisoner was angry and indicated to those listening that he thought the deceased had been off with another man. The prisoner was growling and talking about giving some one a hiding. The prisoner approached one of the local police officers who was patrolling the area and asked the police officer to lock up the deceased. At this time the deceased was talking to the man whom she had approached for help.

The couple then continued on their way home. They passed the residence of one Mr Otto Dan and he saw the couple arguing outside his house. They were both wet from the rain. Mr Dan invited them into his house and gave them dry clothes to wear. The couple continued to argue and eventually left together. Mr Dan gave them a torch.

The prisoner continued to question the deceased about whom she had been with. He became angry and whilst questioning her, he assaulted her by striking her on the right eyebrow with the torch he was carrying. The prisoner kicked and punched the deceased and hit her on the back, the back of the head and face with a rock which was the size of a man's fist.

The deceased could not walk properly and at about midnight the prisoner left to go to the deceased's father's house where he obtained another torch, a blanket, a tarpaulin and some food. At this time the prisoner tried unsuccessfully to borrow a tractor from another resident, presumably to try to move the deceased.

The prisoner returned to the deceased and observed that she had a deep cut beside her eyebrow. They moved to another spot. The prisoner helped and/or carried the deceased some of the way. They layed [sic] down on the blanket under the tarpaulin and slept. When the prisoner awoke in the morning he

realised that his wife was dead. When police arrived at the scene, they found the deceased lying on blankets underneath the tarpaulin.

The post mortem examination showed the deceased had been severely beaten about the head and body. It was noted that the deceased had sustained a series of 37 irregular lacerations with associated abrasion rings on the head and face. They were most prominent on the face, the right side of the head and the back of the head. They varied in length from 1.1 by 3 centimetres, to 2.4 by 2.4 centimetres. Bruising associated with some of these lacerations was present. The deceased had also sustained an irregular crushing laceration on the left middle finger, abrasions on the lip, left ankle, left foot and right ankle.

The prisoner, as I have said, is 33 years of age. He was born and raised at Gunbalanya and is of the Kunwinjku tribe. He is one of seven children, of which he is the eldest. His brothers and sisters are all adults living in Arnhem Land or far eastern Arnhem Land. Members of his family have been lost through criminal violence five years ago. The prisoner's younger sister was shot dead by a member of the Nabegeyo family. The offender recently died in gaol.

The prisoner is fluent in the English language, was educated at Oenpelli and spent two years at Kormilda College. The prisoner and his deceased wife used to paint together. The prisoner is an artist whom Raintree Aboriginal Art Gallery has supported for many years. He and his deceased wife have been resident artists at The Gallery.

The prisoner met the deceased in 1989, following his release from prison, in respect of a series of offences, including driving offences, receiving offences, stealing and unlawful entry offences. Since 1989 the prisoner only has one conviction, that of possessing liquor in a restricted area, for which he was convicted on 23 March '93.

Prior to 1989 the prisoner has a long record of previous convictions going back to November 1978. With the exception of the offence I am about to mention, they all have been driving offences, Liquor Act offences and dishonesty offences, usually stealing and breaking and entry in relation to alcohol.

There are no prior convictions for violence, save for his conviction on 7 September 1981 for the manslaughter of his father.

Forster CJ imprisoned him for 3 years with a non-parole period of 18 months and directed that he be released after 8 months imprisonment on a good behaviour bond. The sentencing remarks on that occasion disclose that the prisoner, then 19 years old, unintentionally killed his father in a drunken brawl with sticks when the prisoner was severely provoked by his father and urged on

by his mother to hit his father. It was described by the Chief Justice as at the lower end of the scale of manslaughter cases and the comparatively lenient sentence adequately reflects the view then held by the court on that occasion.

All of that, of course, was 12 years ago and the prisoner is now a much different person from the person who committed that offence. It is significant that the prisoner, with the exception of one Liquor Act offence, has not offended since July 1989 which was approximately the time he entered into a relationship with the deceased.

Evidence was led before me which I accept that whilst living on outstations and free of alcohol, the prisoner and the victim enjoyed a harmonious relationship. As I have said, they often worked together and painted together. However, things were different when in Darwin or at the club at Gunbalanya where they used to drink to excess and often fight. The victim was known on occasions to publicly taunt the prisoner and act provocatively.

Evidence was also led that the prisoner suffered on occasions from the DT's and would only settle down to paint after drinking alcohol at lunch time. His past history of offences certainly suggests a longstanding alcohol problem.

The plea of manslaughter is based on an unlawful killing unaccompanied by any intent to kill or cause grievous [sic] harm. It is not alleged that the victim, in fact, misconducted herself on the night in question.

There can be little doubt that this is yet another example of an Aboriginal woman violently killed by her drunken husband after an argument.

The autopsy evidence is indicative of a vicious and sustained physical attack. It involved assault with a rock and multiple punches and kicks. The victim was physically small and certainly no physical match for the prisoner. As is not unusual in cases of this type, I have regrettably sentenced a number of similar offenders, the prisoner slept with his beaten wife and only learned that she was dead the following morning.

In respect of the charge of manslaughter the prisoner is convicted and sentenced to 9 years imprisonment. I fix a non-parole period of 4 years. The sentence is backdated to 26 April 1995 to take account of time spent in custody.

When the time comes for consideration of parole the board shall have to consider what if any measures are suitable to contain or control the prisoner's drinking of alcohol

Is there anything arising?

MR WAKEFIELD: No thank you, Your Honour.

MR DOOLEY. I don't believe so, Your Honour.

HIS HONOUR.. I direct the sentence to be carried out and I will adjourn the court⁴⁴.

Somehow the forensic language, stripped of all emotion, conveys even more forcefully the horror of the events. The Judge's summing up also offers some important clues as to the subtle and sometimes not-so-subtle parts that alcohol played in the events related.

Let us begin where Justice Angel's account began - at the Gunbalanya Sports and Social Club. By all accounts, the GSSC is a well-managed venue. The physical environment, with its pool tables, video room and beer garden, would put many more urban licensed premises in the Northern Territory to shame. The Club Committee operates a system of bans and suspensions with respect to drinkers who 'play up' on the premises. Offenders are banned from attending the club for several weeks or months, and/or limited to light beer only. Names of offenders are displayed on a board near the entrance to the bar.

It is also a place where drinkers at Oenpelli spend in excess of \$2 million a year on beer. Between 200 and 300 drinkers consume more than 10,000 cans of full strength beer and more than 2,000 cans of light beer each week

On 25 January 1995, as we have seen, "the prisoner" and his wife attended the GSSC and became highly intoxicated. We do not know how this happened. When we mentioned this particular case to the manager of the GSSC in the course of conducting our research, he simply denied that the couple in question had drunk at the club that evening. They must have brought their beer in from elsewhere, he suggested. At that stage we had not seen the transcript of the court proceedings.

The manager's denial was an example of an attitude we encountered on several occasions among a small number of powerful individuals in Oenpelli - a blanket refusal to acknowledge that there were any problems associated with the activities or role of the GSSC. One man in a senior administrative position claimed that violence was virtually unknown in the community, and directed our attention instead to the GSSC's generosity in ploughing back profits into the community. For example, the Club has funded the construction of a half-size olympic swimming pool.

Violence, however, was far from uncommon in Oenpelli. Over the six years from 1989/90 to 1994/95, staff at Gunbalanya Health Clinic attended an average of 22 trauma cases per month. For the first three of those 12-month periods, staff recorded whether or not the cases were alcohol-

⁴⁴ (Supreme Court of the Northern Territory 1995).

related. As Table 5.1 shows, the proportion that were recorded as alcohol-related varied between 41% and 64%.

Table 5. 1: Trauma presentations, Gunbalanya Health Clinic, 1989/90-1994/95

Year	Total	No. months data recorded	Ave. per month	% alcohol related
1989/90	257	11	23.4	41.2
1990/91	176	11	16.0	64.2
1991/92	262	12	21.8	51.1
1992/93	285	9	31.7	*
1993/94	223	12	18.6	*
1994/95	2281	11	20.7	*

* Data on alcohol-relatedness not regularly recorded

Let us return to the Club. *After* "the prisoner" and his wife had become highly intoxicated, he was evicted from the Club and - at his request - so too was his wife. They then walked through the administrative centre of the community, arguing and fighting in the rain. At one point, she sought help from a man in a telephone booth, who responded by telling her to go home, and punching her husband. Later, the husband asked a police **officer** to take his wife into custody. The police **officer** declined to do so.

Again, we are left wondering why. It is clear from the "admitted facts" that both the man and his wife were very drunk, and that he was in a violent frame of mind. Under Northern Territory law, drunkenness is not a crime, but people who are intoxicated in public are liable to be "apprehended without arrest" and taken into what is officially called Protective Custody. The very phrase conveys the purpose of the law: inebriates are no longer regarded as criminals, but the law recognises that persons intoxicated in public pose a potential threat or at least nuisance to others and/or are potentially vulnerable to deliberate or accidental harm from others. The law in question - Section 128 of the Police Administration Act - exists to provide *protection*, both to drunks and from drunks.

It is difficult to imagine a situation in which an intoxicated person was in more obvious need of protection under the law than that in which "the deceased", as she was shortly to become, found herself

People do get apprehended for being publicly intoxicated in Gunbalanya, as well as in Jabiru. However, as Figure 5.1 shows. this is not as likely to occur in Gunbalanya as in the past.

Figure 5. 1: Protective Custody Apprehensions for public drunkenness, Gunbalanya and Jabiru

Protective Custody Apprehensions

Year	Gunbalanya	Jabiru
1988 – 89	450	254
1989-90	388	491
1990-91	332	245
1991-92	292	325
1992-93	265	458
1993-94	202	653
1994-95	130	348

Figure 5.1 shows that the number of apprehensions for public drunkenness in Gunbalanya has been steadily declining for several years. Is this because drunkenness is less prevalent, or because police are less willing to apprehend inebriates, or is it because some heavy drinking has shifted to Jabiru? It may be because of a combination of all these factors; we do not know. However, it is interesting to note that between 1990 and 1994 the decline in the number of apprehensions in Gunbalanya appears to have been offset by a corresponding increase in Jabiru.

But it is not just for what it tells us about the circumstances immediately surrounding the senseless killing of a partner that the above account is noteworthy. The story of "the prisoner" and "the deceased" also offers a number of glimpses into the lives of these two people, and in particular into the ways in which alcohol is intertwined into so many unhappy events in those lives, like some sort of family curse. We learn that "the prisoner", 12 years before he killed his wife, also killed his father in a drunken brawl. The judge refers briefly to a series of entanglements with the criminal justice system, most of them alcohol-related. We are told that when they were not caught up in drinking, the pair formed a harmonious, creative couple, but that when they started drinking, conflict and fighting became the norm. We hear of their retreat to an outstation, away from the "gunbang".

Finally, - and especially saliently in the context of this report - we hear the judge virtually wondering out loud what can be done about the man's drinking problems when the time comes for parole. What services are available? As we shall show in a later section – not much.

Fortunately, not every tale of alcohol misuse ends as tragically as this one, although, as the Judge pointed out, too many do so. As elsewhere, excessive drinking by a proportion of Aboriginal people exacts a heavy toll, especially in terms of :

- violence, particularly domestic violence against women;
- neglect of children, and consequent inattention to children's education, and
- undermining of employment opportunities.

Data on violence has already been presented. Some of the effects of alcohol misuse on children were succinctly summed up by George Djandjomerr, a resident of Manaburdurmur :

Things (at Manaburdurmur) are getting worse and worse; I can see with my own eyes, people under age drinking; there's nothing happening, you know, all the parents are responsible for looking after their kids, they should be sending them to school to get educated or teach them their own culture.

(Is that not happening?)

That's not happening.

(Why do you think that's not happening?)

The parents are busy drinking alcohol⁴⁵.

The impact of binge drinking on Aboriginal employment in Jabiru was referred to by a number of people, including executives of Ranger Uranium. According to the latter, Ranger at the time this study was being conducted employed 14 Aboriginal people, but only one of these was a 'true local'. The others came from elsewhere in the Northern Territory or from inter-state. The company was said to have made efforts to attract local Aboriginal people as employees. However, this entailed the employees living in town, and in several instances, regardless of the wishes of the employees themselves, their houses had become congregating points for drinking relatives, who would expect support, 'humbug' the employee, and sometimes turn up yelling and fighting in the early hours of the morning. This in turn would antagonise neighbours.

While this is hardly likely to be the only reason why so few Aboriginal people work in the uranium mine, the presence of Aboriginal binge drinkers creates real obstacles for those Aboriginal **people** who do wish to work with the mining company, and for the company itself

5.2. Effects associated with chronic excessive consumption

In Section 4 we showed that apparent per capita consumption of alcohol by Aboriginal drinkers in the region was not only relatively high compared with other populations, but also much higher than the levels recommended in Safe Drinking Guidelines published by the National Health and Medical Research Council. Mean per capita consumption by male drinkers was equivalent to 1151 mls of absolute alcohol per week, more than three times the NH&MRC recommended upper limit, while the mean female consumption of 719 mls of absolute alcohol was around four times the recommended upper limit.

These high levels appear to reflect a combination of two drinking patterns. In Jabiru, it is at least in part a product of drinking binges 'by Aboriginal people who come into Jabiru from outstations and other places and engage in drinking bouts. At Oenpelli, as at other Aboriginal communities with licensed clubs, it is associated with chronic, continuous consumption, as drinkers often engage in two sessions per day, up to six days per week.

It is important to be aware of these two patterns, as they entail distinct consequences. Drinking binges lead to drunkenness and the problems associated with drunkenness fighting, vandalism, social disruption, etc.

⁴⁵ Interview with George Djandjomerr, Jabiru, 27 November 1995

Chronic, high levels of consumption, on the other hand, may tend not to be associated with drunken bouts, and therefore not to have such obviously visible harmful consequences.

At the same time, consumption levels of this kind do have harmful consequences: in terms of kidney failure, liver damage, alcohol related brain damage, hypertension, and other illnesses.

One of the surprising findings of our study is that virtually no regular attempts appear to be made by health personnel to monitor the prevalence of alcohol-related problems associated with chronic high consumption levels. As a result, we are unable to estimate their prevalence.

This is not necessarily a criticism of the practices of health clinic staff, most of whom are already over-extended meeting immediate demands. But we do believe the omission is unfortunate, and later will recommend steps to overcome it.

To some extent, the failure to monitor the consequences of chronic heavy drinking, as distinct from those of drunkenness, reflects the historical perspective of non-Aboriginal concerns about Aboriginal drinking. These tend to be most sharply focused on Aboriginal public drunkenness in places where drunken behaviour is seen as posing a threat to residential amenity and commercial activity. The fact that many Aboriginal drinkers are literally drinking themselves to death and inflicting great pain on their families in the process attracts rather less attention than public drunkenness in the main street.

Chronic high levels of consumption also have effects on family functioning. We were told of sober families in Oenpelli minding up to 12 children, as a result of other families not being able to look after their own children⁴⁶.

5.3. Effects associated with dependence

Dependence upon alcohol is normally portrayed as a problem exhibited by individuals. In Oenpelli, however, its most significant manifestation occurs at the community level. Because so many adults in Oenpelli appear to have made access to alcohol a central priority in their lives, the club that serves that priority has become in many ways the dominant institution in the community. Work routines are subordinated to the opening hours of the club. Because the club sells beer for one hour in the middle of the day, few Aboriginal residents of Oenpelli are available for productive work after midday. This in turn means that many activities are either not performed after midday, or are carried out by non-Aboriginal staff.

Moreover, the high levels of expenditure on beer at the club provide an economic powerbase matched by no other institution in the community. Economic power, as elsewhere, generates political power. Those in control of the club at Oenpelli have extensive patronage power, which they appear to have used skilfully, ploughing a portion of club profits into worthwhile ventures such as a community

⁴⁶ Meeting with staff members, Gunbalanya School, 11 October 1995.

swimming pool. At the same time, there appears to be little close scrutiny over the disposal of the remaining profits.

The result, in our view, is a destructive symbiotic relationship: drinkers are dependent upon the club, which in turn is dependent for its economic prosperity on maintaining high levels of consumption among drinkers. There are many people in Oenpelli - Aboriginal and non Aboriginal - who are deeply concerned about this state of affairs, but the club is able to exercise its considerable political power to effectively disenfranchise its critics. The club committee is made up of drinkers, some of whom also hold authority at other levels in the community.

While we view these aspects of the role of the Gunbalanya Sports and Social Club with concern, we also wish to acknowledge the positive contribution made by the present club management to creating a pleasant, ordered drinking environment . Prior to the present management assuming office, the club had been beset by chronic management problems, high turnover of administrative and other staff, controversies with other groups in the community, and periodic disagreements with the NT Liquor Commission and police officers⁴⁷. These problems appear to have been overcome in recent years.

Our assessment of the club-community relationship was endorsed by many of the people to whom we spoke on outstations surrounding Gunbalanya. Their main reason for leaving Oenpelli had in many cases been a desire to get away from the problems associated with the club, which seemed to have become the central focus of so many people's lives.

We believe that as long as such a situation persists, the Aboriginal people of Oenpelli amongst whom we include, of course, the non-drinkers - have little prospect of taking effective control over their own lives - except by moving to outstations. For that reason, we believe that the situation demands urgent attention, and later we recommend some steps to this end.

5.4. Summary

The West Arnhem region exhibits serious alcohol-related **problems** associated **with** intoxication, chronic heavy drinking, and dependence.

Problems associated with intoxication are to some extent documented in statistics reporting assaults and drunkenness, although much of the violence associated with drunkenness is never reported and consequently never appears in statistics or reports.

Problems associated with chronic high consumption, on the other hand, are virtually undocumented. This is largely because neither of the health clinics in the region undertake regular screenings or maintain other databases. Consequently, while the very high consumption levels in the region suggest that the problems associated with chronic heavy drinking would be widespread, no statistical or other data are currently available.

⁴⁷ These observations are based mainly on NT Liquor Commission files.

The major problem associated with dependence occurs at the community level, in Oenpelli. For many drinkers in Oenpelli, the club has become a focal institution. As a result, the club in turn has become a dominant institution in the community. Working patterns, for example, are governed largely by the club's opening hours. A destructive symbiotic relationship has developed, in which drinkers are dependent upon the club, which in turn is dependent for economic prosperity on maintaining high consumption levels among drinkers. The club is able to use its economic and attendant political power to patronise worthy causes by diverting a proportion of its profits to them, thereby further broadening its political power-base in the community and ensuring protection against criticism or even scrutiny. Those many people in Oenpelli who are concerned about the role of the club are effectively disenfranchised. This situation should not be condoned.

While this situation constitutes grounds for concern, the positive role of the present club management towards creating a pleasant and orderly recreation facility should be recognised, particularly in view of the administrative problems that beset the club prior to the present management assuming office.

6. EXISTING PROGRAMS AND SERVICES FOR ADDRESSING ALCOHOL-

RELATED PROBLEMS IN THE REGION

In Section 1 we pointed out that four types of measures can be used to address problems associated with alcohol misuse. These were :

- Controls on the *availability* of alcohol;
- Programs and services designed to change *drinking practices*;
- Measures designed to reduce risks associated with particular *drinking environments*, and
- Measures to overcome social and economic disadvantages, and to enhance the *social and economic opportunities* available to members of the population to which the drinkers belong.

In this Section we review the programs and services currently in place under the first three of these headings. We do not touch on the fourth - measures to overcome social and economic disadvantages and to enhance opportunities - not because we think such measures unimportant, but because the issue of employment and related opportunities is, we understand, the subject of a separate consultancy. Our focus is on measures and services that directly address problems of alcohol misuse.

6.1. Controls on availability of alcohol

Earlier we showed that a central component of the alcohol strategy proposed by the Fox Commission was a set of measures designed to control access to alcohol, chiefly by attempting to contain consumption within licensed clubs, discourage and strictly limit takeaway sales, and prohibit the issuing of ordinary publicans' licences in the region. From the outset, this strategy posed jurisdictional uncertainty: while the establishment and management of Kakadu National Park has been a Commonwealth responsibility, authority over liquor licensing remains a responsibility of State and Territory governments,

The uncertainty was to some extent resolved, as mentioned above, in August 1983 when a dispute erupted between the NT Liquor Commission and the Australian National Parks and Wildlife Commission over authority to consider liquor licensing applications in Jabiru. The dispute culminated in an amendment to the National Parks and Wildlife Regulations which gave effective authority to the Director of ANPWS, who would consult with the Northern Land Council before reaching decisions⁴⁸.

In reality, however, a rather different system has evolved, in which two sets of licensing controls now govern the activities of liquor outlets in the region. These are (a) formal licence conditions attached to licences issued under the authority of the Northern Territory Liquor Commission, and (b) a series of informal agreements negotiated between individual licensees and the Gagudju Association (sometimes

⁴⁸ The Weekend Australian, August 20-21 1983, p.9; Commonwealth of Australia, National Parks and Wildlife Regulations (Amendment). Statutory Rules 1983 o. 135.

also with the Djabulukgu Association) setting additional conditions on the sale of liquor to Aboriginal residents of the region. There is little evidence of any coordination between the two sets of controls.

In addition, several liquor outlets in the region have utilised provisions of the NT *Trespass Act 1987* to prohibit a handful of troublesome individuals from entering their premises.

The formal licence conditions governing outlets in the region are summarised in Table 6. 1.

Table 6. 1: Current formal licence conditions (as at December 1995 (ie. excluding special conditions that might apply for Christmas Day and Good Frid

Outlet	On-premises	Take-away	Other conditions	Comments
Gunbalanya SSC	Mon-Thur: 1200-1300 1730-2000 Fri-Sat: 1200-1300; 1630-2000	None, since May 1993	Beer sales only, for consumption on premises by club member or visitor(s) in presence of member.	
Jabiru SSC	1100-2300, 7 days Fri-Sat, trading permitted till 0100 following morning in conjunction with entertainment.	Sun-Fri: 1000-2200; Sat and Public Holidays: 0900-2200	Sales to club members only, or visitors in presence of members.	T/a trading hours extended in Nov. 1995; previously Sun-Fri 1200-2100; Sat and Public Holidays 0900-2100.
Jabiru Golf Club	Mon-Thur: 1000-2300 Fri: 1000-2359 Sat 0900-2359. Sun: 0900-2100.	As for on-premise sales.	Sales to club members only, or visitors in presence of members. May trade till 2 am for an organised function, provided 72 hours notice given to NTLC.	T/a hours extended Jan 1995; previously Sun-Fri 1000-2200; Sat: 0900-2200.
Gagadju Lodge Coinda	1000-2300, all days	Sun – Fri 1000-2200 Sat and Public Holidays 0900-2200		Prohibition on t/a sales of fortified wines removed Aug 1995.

Gagudju Crocodile Hotel	<p>a) Courtyard BBQ, Swimming Pool: 0600-0200 following morning 7 days;</p> <p>b) Function Room, Nourlangie Tavern/ Convention Area; Tea House: 1100-0200, 7 days;</p> <p>c) Lobby Bar: 1600-0200, 7 days;</p> <p>d) Restaurant and Cocktail Bar, (i) ancillary to a light meal: 1000-1130, 7 days; 14.30-1800, 7 days; 2200-0200, 7 days; (ii) ancillary to substantial meal: 0600-1000, 7 days and as for (d) (i)</p>	Mon-Fri: 1000-2200; Sat and Public Holidays: 0900-2200.	Takeaway sales to lodgers only.	
Kakadu Frontier Lodge	1200-2200, 7 days	None	Sale of liquor to lodgers only	Prohibition on t/a sales of fortified wines removed Aug 1995
Kakadu Holiday Village*	0700-2300, 7 days	Sun – Fri 1000-2200 Sat & Public Holidays 0900 - 2200		Prohibition on t/a sales of fortified wines removed Aug 1995
Bark Hut Inn*	0700-2300, 7 days	Mon – Fri 1000 – 2200 Sat & Public Holidays 099-2200	“Booking Up” prohibited since Dec 1993	
Mary River Roadhouse	0700-2300, 7 days	Sun – Fri 1000-2200 Sat & Public Holidays 0900-2200	“Booking Up” prohibited since Dec 1993	

Corroboree Park Tavern	1000-2400, 7 days	Sun-Fri 1000-2200; Sat & Public Holidays 0900-2200	“Booking Up” prohibited since Dec 1993	
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* Roadside inn licences, which also permit licensees (a) to sell to lodgers and invited guests at any time for consumption on premises, and (b) after 2300 hours to members of public provided that other services (fuel, food and accommodation) are also available upon request.

A number of significant points emerge from the above table. The first is the *ad hoc* nature of the restrictions. To some extent, this is an inevitable product of a system in which licences are issued and amended on a licence-by-licence basis, and in which individual licensees may seek and be granted trading conditions tailored to their particular circumstances. At the same time, there appears to be room for a more coordinated approach. Why, for example, should 'book ups' be prohibited at three roadside inns, but not at two others (Kakadu Holiday Village and Gagudju Lodge Coinda), and not at other liquor outlets in the region?

A second point to emerge is evidence of a recent, gradual liberalisation of licence conditions, which appears to have occurred without any community consultation. The table shows that both the Jabiru Sports and Social Club and the Jabiru Golf Club were granted extensions of takeaway trading hours during 1995. In the case of the former, the extension was granted *while this consultancy was under way*. In neither case were the amendments of a radical nature. Nonetheless, takeaway sales are a highly contentious issue in the region. Yet we are not aware of any consultative processes in the case of either set of amendments.

Similarly, in two outlets a prohibition on takeaway sales of fortified wines, attached to the licences, was removed in August 1995 - again, as far as we know, without consultation with groups in the community.

We believe that any modifications to licence conditions should only be introduced as part of a coherent regional alcohol strategy, and in consultation with all parties likely to be affected.

The informal agreements negotiated between individual licensees and the Gagudju Association, and applicable to Aboriginal residents of the region only, are summarised in Table 6.2.

Table 6.2: Additional restrictions on people purchases/consumption of alcohol by Aboriginal people

Outlet	On premises beverages	On premises hours	Take-away beverages	Take-away hours	Basis for restrictions
Gunbalanya Sports and Social Club	No additional restrictions	No additional restrictions	No additional restrictions	No additional restrictions	
Gagadju Lodge Cooinda	Light beer only, max 10 cans per person per day – for consumption on premises or take-away	No additional restrictions	See under “ On premises – beverages”	No additional restrictions	Informal arrangement v Gagadju Association applicable to Aboriginal people (ie including non-Aboriginals) living on Gagadju lands.
Kakadu Holiday Village	No additional restrictions	No additional restrictions	House policy of not selling take-away spirits to Aboriginal people. (Also outlet does not sell cask wine take-away at all.)	No additional restrictions	House policy
Jabiru Spots and Social Club	Beer only	Normal club hours as described in Table 6.1	1 carton beer per person per day	300pm – 5.00pm only	Informal agreement with Gagadju Assoc and Djabulugl Assoc.
Jabiru Golf Club	No additional restrictions	No additional restrictions	No additional restrictions	No additional restrictions	
Bark Hut Inn	No additional restrictions	No additional restrictions	No additional restrictions	No additional restrictions	
Gagadju Crocodile Hotel	Sales to Gagadju members restricted to light beers, maximum 10 cans per person per day	11am – 1.00pm to Gagadju members	No additional restrictions	No additional restrictions	Informal agreement with Gagadju Assoc
Mary River Roadhouse	No additional restrictions	No additional restrictions	Sales to Jaoyyn people travelling to Pine Creek	No additional restrictions	Informal agreement with Jaowyn

			restricted to 6 cans per day		Association
Corroboree Park Roadhouse	No additional restrictions	No additional restrictions	No additional restrictions	No additional restrictions	
Kakadu Frontier Lodge	No additional restrictions	No additional restrictions	No additional restrictions	No additional restrictions	

Again, a number of points should be made. Firstly, these measures are even more *ad hoc* in nature than the formal restrictions under the NT Liquor Commission. For **example**, Aboriginal residents of the region are permitted to purchase full-strength takeaway **beer** from the Jabiru Sports and Social Club - up to one carton per day - but at the nearby Gagudju Crocodile Hotel they can purchase light beers only. As in the case of the **formal** licence conditions under the NT Liquor Act, there is no evidence of an underlying regional strategy.

Secondly, at the time we conducted our study, all of these arrangements were based on verbal agreements between the licensees and Gagudju Association. As far as we are aware, no written agreements existed. One obvious consequence of this is that none of the agreements are backed by any enforcement authority, and can be broken at any time. Indeed, the President of the Jabiru Sports and Social Club informed us, in the course of a meeting between ourselves and his Committee, that if local Aboriginal organisations were not prepared to clarify their position on restrictions to Aboriginal people, he would unilaterally abolish all such restrictions so far as the JSSC was concerned⁴⁹.

Thirdly, most of the licensees with whom we spoke cited difficulties in enforcing the restrictions. For example, the restrictions in place at Gagudju Crocodile Hotel are supposed to apply to Gagudju members but, according to the General Manager, staff sometimes find it difficult to determine who is and who is not a Gagudju member⁵⁰. Similarly, the General Manager at Gagudju Lodge Cooinda claimed that some Aboriginal drinkers would deliberately target new bar staff, who could not be expected to know whether **or** not the drinkers were local *Bininj*⁵¹. Cooinda management also claimed that well-intentioned tourists sometimes purchased liquor for Aboriginal people, in contravention of the informal restrictions. (However, we noted that, in the past all rooms at Cooinda carried a notice pointing out that restrictions on service to local Aboriginal people had been put in place at the request of the traditional owners, and asking tourists to support the restrictions. No such notices were present at the time of our study.)

Fourthly, all of the licensees and staff with whom we spoke expressed uncertainty and anxiety as to the status of the informal agreements under the anti-discrimination provisions of the Commonwealth Human Rights and Equal Opportunities Commission, and the Northern Territory Anti-Discrimination Commission. A recent report by the Commonwealth Race Discrimination Commissioner suggests that 'special measures' imposed at the request of Aboriginal organisations are unlikely to be deemed to violate Commonwealth legislation⁵². This question is explored further in Appendix A of this report.

⁴⁹ Meeting with Jabiru Sports and Social Club Committee, 9 October 1995

⁵⁰ Meeting with management, Gagadju Crocodile Hotel, 12 October 1995

⁵¹ Meeting with management, Gagadju Lodge Cooinda, 1 1 October 1995.

⁵² (Race Discrimination Commissioner 1995).

Finally, and most importantly, the high levels of alcohol consumption already documented in this report would suggest that, overall, the restrictions are not working very effectively. We believe that this is primarily because the restrictions currently in place represent a series of well-intentioned, *ad hoc* measures, rather than parts of a coherent regional strategy designed to address issues of both supply and demand. In Section 7 of this report we try to redress this problem.

6.1.1. Gunbalanya and Jabiru Sports and Social Clubs

The two most important facilities so far as alcohol consumption, controls and alcohol-related problems are concerned are, of course, the Gunbalanya and Jabiru Sports and Social Clubs. Both clubs were created as alternatives to hotels or other outlets that serve the general public, in the belief that the limitation of supply to club members would provide a recreational outlet for local residents, while at the same time avoiding the problems associated with conventional hotels and takeaway outlets.

In the early years following its establishment in 1979, the Gunbalanya SSC experienced regular difficulties in maintaining an orderly drinking environment. Claims regarding drunkenness, and serving of alcohol to non-members, were frequently made⁵³. In recent years these problems have, to a considerable extent, been resolved, and the revocation of takeaway sales in 1993 further reduced the impact of drunkenness. The evidence regarding high levels of liquor consumption in the clubs, however, points to a more insidious problem: the cumulative damage to health and social functioning brought about, not so much by episodes of binge drinking, but by regular, heavy consumption.

Moreover, the history of the Jabiru SSC is marked by repeated attempts to *become* a facility authorised to sell takeaway liquor to the general public, attempts being made in 1982, 1985, 1987 and 1990. At various times observers have found the club to be functioning effectively as a hotel. For example, in 1988 the Deputy Registrar of the Northern Territory Liquor Commission noted on file that the "club is currently operating as a public facility both for consumption on and away from the premises"⁵⁴. In the following year an inspector and acting deputy registrar reported entering the club and buying two rounds of drinks and a meal, without either of them being approached about signing in⁵⁵. The situation reached the status of farce during an incident in January 1992, when a Liquor Commission inspector visited the club in order to administer an examination to the man who was to be appointed the new club manager, as part of the appointments procedure. The inspector entered the club without having to produce a club keycard, and was promptly served a can of light beer. A few minutes later, upon inquiring about the whereabouts of the man who was to be examined, he was informed that it was the same man who had just served him the can of beer⁵⁶.

6.2. Programs and services designed to change drinking practices

⁵³ Northern Territory Liquor Commission file 106.

⁵⁴ Northern Territory Liquor Commission file 110.

⁵⁵ Northern Territory Liquor Commission file 110.

⁵⁶ NT Liquor Commission file 110, part 6.

It is useful to distinguish programs and services that target drinkers according to the aims of the programs, using three categories :

- *Primary prevention*: measures to prevent the uptake of alcohol misuse;
- *Secondary prevention* (sometimes called 'early intervention'): measures targeting 'at risk' drinkers, designed to modify their alcohol use before serious harm occurs;
- *Tertiary prevention* (or treatment): measures aimed at people whose alcohol use is already causing harm, designed (a) to reduce their consumption, (b) enable them to maintain a satisfactory level of functioning and/or (c) prevent further damage.

Examples of possible programs in each of these three categories are given in the table below. Some programs - eg. self-help groups - might be located in more than one category, depending on the particular program.

Table 6.3: Levels of prevention, and some examples

Level of prevention	Examples
Primary	<ul style="list-style-type: none"> • Provision of information and education, whether to the general public, particular fgroups, or school-based, and including mass media campaigns. • Publicised Randon breath Testing 'blitzes' (but not routine, non-publicised RBT)
Secondary (early intervention)	<ul style="list-style-type: none"> • Screening programs (esp. in health centres, hospitals) • Individual or group counselling/therapy programs • Employee assistance programs • Lifestyle and skills training programs • Self help groups
Tertiary (treatment)	<ul style="list-style-type: none"> • In-patient hospital treatment programs • Residential treatment programs • Community-based treatment programs • Detoxification facilities • Half-way houses • Rehabilitation programs for people with alcohol-related brain damage

6.2.1. Primary preventive programs

The main vehicles for primary prevention programs in recent years in the Northern Territory have been media campaigns, some of which are aimed at the general population (eg. the NT Government's 'Lighten Up' campaign, urging beer drinkers to switch to low alcohol beer), while others are targeted specifically at Aboriginal people.

Aboriginal people living in West Arnhem region are, of course, exposed to such programs. However, the extent to which these programs have influenced behaviour among Aboriginal drinkers or potential drinkers remains unknown.

A more low key program has been developed by the Aboriginal Living With Alcohol Program (ALWAP). A group of specially trained Aboriginal Community Development Facilitators (ACDF) are available to Aboriginal communities, on request, to go into those communities and discuss options for reducing alcohol-related harm. The ACDFs will not visit communities unless invited, and see their role as facilitating the emergence of locally-based strategies, rather than attempting to generate strategies themselves. Their main vehicle is a 'story board' which was developed and piloted in 1991, and which utilises

Aboriginal artistic conventions and motifs. The latter serve a set of symbolic devices that can be arranged in different configurations on the board, and then become a device for exploring different 'stories', which are then discussed among members of a group.

The ACDFs do not address medical aspects of alcohol misuse. They are also, according to the program manager, unwilling to become embroiled in alcohol-related controversies at the community level⁵⁷. While this is in keeping with their preferred role as facilitators rather than directors of change, it may also mean that the program is unlikely to find a significant role in communities like Oenpelli where alcohol is *inherently* a matter of controversy at the community level - whether we like it or not.

ACDF workers have visited Oenpelli, although apparently not for several months prior to our research. As far as is known, they have not visited other Aboriginal communities or outstations in the region.

A limited amount of school-based education is conducted on an intermittent basis by a community worker employed by the non-government Council for Aboriginal Alcohol Program Services (CAAPS), who on his regular visits to the region from his base in Darwin maintains contacts with schools, and offers to show videos and give talks.

While media campaigns, school-based education and community-based educational programs all have a part to play in helping to shape attitudes towards alcohol misuse, we found no evidence that the programs to which people in the West Arnhem region have been exposed have had any significant impact.

⁵⁷ Interview with Manager, Aboriginal Living With Alcohol Program, 7 December 1995.

6.2.2. Secondary preventive (early intervention) programs

In a recent study of interventions for Aboriginal people with alcohol problems, Brady describes the dearth of secondary prevention, or early intervention, programs for Aboriginal people as one of the most important gaps in the range of services and programs currently available⁵⁸. As she points out, this is despite the fact that both the National Aboriginal Health Strategy and the Royal Commission into Aboriginal Deaths in Custody identified a need for such programs. The RCADIC recommended that:

the possibility of establishing early intervention programs in Aboriginal health services and in hospitals and community health centres with a high proportion of Aboriginal patients be investigated. This would include the training needs of staff in intervention techniques⁵⁹.

The West Amhem region is a striking example of the situation described by Brady : there are primary preventive programs, albeit of unproven effectiveness and, as we show below, there are tertiary treatment services. But there are very few secondary preventive, or early intervention services, are offered to Aboriginal (or other) residents of the region.

CAAPS has for several years employed a Community Worker, based in Darwin, who makes regular visits to the region, where he provides educational and counselling services. CAAPS also employs one Aboriginal man in Oenpelli, also as a Community Worker, and at the time of our research was engaged in developing a program for community-based community development workers⁶⁰. The program was likely to be staffed by three part-time workers.

In Darwin, the Living With Alcohol Program administers an early intervention program at Royal Darwin Hospital which provides a screening and minimal intervention service for patients attending the Orthopaedic ward. In 1994, twelve patients from the West Amhem region were screened under this program.

At the local health clinic level, no regular screening or early intervention programs are in place.

Why is this dearth of secondary preventive programs important? For several reasons. Firstly, such programs represent the most cost-effective means of intervening to alter harmful drinking patterns. In recent years, the professional alcohol and other drug treatment field has been marked by growing criticism of the kind of intensive, residential or inpatient-based treatment approaches that have traditionally formed the main component of treatment strategies. A number of controlled clinical trials have failed to find any evidence that inpatient/residential treatment is any more effective than outpatient-based programs or day patient intervention or that longer treatment programs are superior

⁵⁸ (Brady 1995).

⁵⁹ Royal Commission into Aboriginal Deaths in Custody, Recommendation 283, cited in (Brady 1995).

⁶⁰ Interview with Mr Roger Sigston, 7 December 1995

to shorter programs. These studies are reviewed by Mattick et al⁶¹. Secondly, residential treatment programs tend to be based on the belief that 'alcoholism' is a disease located within the person, whereas modern professional theories of alcohol and other drug problems view such problems as emerging *from the interaction between individuals and their environments*. This being so, it is argued, intervention should be based within drinkers' home environments, and address the person-environment relationship, rather than transporting the drinker away to a completely different, residential community⁶².

Whereas residential treatment programs typically focus on drinkers with severe dependence and/or impairment, early intervention programs are targeted at individuals whose drinking is heavy enough to have led to harmful consequences, but who have not yet reached a state of severe dependence or impairment. Such programs have two components: detection (screening) and a form of brief, therapeutic interventions⁶³.

Brady argues that Aboriginal drinkers are entitled to a comprehensive range of preventive services, and that these entitlements cannot be met while so few early intervention programs are available. We believe that the dearth of early intervention programs in the region is a particularly serious shortcoming, and in Section 7 propose some steps to rectify it.

6.2.3. Tertiary preventive (treatment) programs

The corollary to a dearth of early intervention programs for Aboriginal people is a heavy reliance on residential treatment programs. Again, the West Arnhem region conforms to this pattern, although *none* of these programs are located within the region, and only two are utilised at all by people from the region. These, as Table 6.4 shows, are the CAAPS program at Knuckeyes Lagoon, Darwin and the FORWAARD facility in Stuart Park, also in Darwin.

⁶¹ (Mattick, Baillie, Grenyer, Hall, Jarvis & Webster 1993). Mattick et al add, however, that while the prevailing emphasis on residential treatment programs appears to have more to do with custom than scientific evidence about program effectiveness, residential programs are likely to be needed for specific sub-populations of alcohol dependent individuals, such as those needing supervised detoxification, respite care, or some other form of intensive, supervised interaction.. Heather and Tebbutt, in another review of treatment literature, cite several studies which point to a less pessimistic assessment of residential treatment (Heather & Tebbutt 1989a)

⁶² (Heather & Tebbutt 1989d).

⁶³ The following brief description of early intervention approaches is based on Heather and Tebbutt (Heather & Tebbutt 1989b). Screening is accomplished by one or more of three means: a simple questionnaire, eliciting information on consumption and lifestyle; clinical examination for signs of alcohol misuse, or laboratory tests, such as liver function tests. A number of brief intervention therapies have been developed in recent years, most of which take from 5 to 10 minutes and lend themselves to use in health clinics and general practice. Components typically include:

feedback to client about his/her level of drinking or drug use and associated risks; comparison with norms for appropriate age-sex group; feedback of objective evidence of alcohol or drug-related harm, where this has occurred; establishment of goals for drinking or drug use and/or associated problems; emphasis on personal responsibility for changing drinking or drug use; monitoring of progress by follow-up appointment.

Other techniques often associated with brief interventions include motivational interviewing, where the therapist aims to develop a patient's commitment to change behaviour, and identification of high risk situations, and coping strategies for dealing with them.

Table 6.4: Residential treatment programs for Aboriginal people, accessible from West Arnhem region

Program/service	Service provided	Located in W Arnhem region?	Outside W Arnhem region?	Utilisation by W Arnhem clients in 1994/95	Comments
Council for Aboriginal Alcohol Program Services (CAAPS)	RPT (6 weeks)*	No	Knuckeyes Lagoon Darwin	Not known**	Program includes classes in chemical dependency, culture video and group discussions, family oriented, but single people accepted; maximum 20 clients per 6 week program.
FORWAARD	RPT (12 weeks)*	No	Stuart Park, Darwin	No more than 10 in 1994-95 (all court referrals)	Follows AA principole, advocates abstinence; clients largely drawn from Tiwi Islands; oriented to single people, maximum no of clients – 16 per 12 week program.
Aboriginal and Islander Alcohol Awareness and Familyt recovery (AIAAFR)	RTP (6 weeks)*	No	Five Mile near Daly River	None	Three separate programs, for drinkers, partners and children respectively: follows A A principles.
A New Start	RTP	No	Bees Creek	None	V few

Towards Independence (ANSTI)			near Darwin		Aboriginal clients
Salvation Army Bridge Program	RTP (3 months)*	No	Darwin	None known	V. few Aboriginal clients

* RTP = Residential Treatment Program

** CAAPS were asked to provide numbers of clients from the region in 1994/95, but were unable to do so.

The only one of the above facilities that has strong linkages with the West Amhem region is CAAPS. The AIAAFR facility at Daly River is historically linked to and still oriented to former Catholic missions in the Western half of the Top End, while FORWAARD has similar linkages with the Tiwi Islands.

This situation has a number of implications for the region. As already suggested, residential treatment programs have historically constituted the main component of alcohol treatment strategies, especially in the Aboriginal domain, with most of these programs offering an abstinence-oriented program based more or less on AA principles. In recent years, however, the effectiveness of residential programs has been questioned, and efforts made to redirect intervention strategies towards early and minimal interventions. This, however, has not happened in the West Amhem region, where early intervention programs are minimal, and the core treatment service remains a residential treatment program.

The main disadvantages of residential treatment programs are that they are expensive, can cater for only a limited number of clients, and do not have impressive outcome records. They also by definition individually focused, and do little to address problems at the community level. At the same time, it is generally recognised that some form of intensive, residential treatment is necessary for those people who do decide to try and stop drinking, but who for a variety of reasons find themselves unable to do so within a normal, day-today context.

A question remains as to whether this need is best met by centralised residential treatment facilities, such as the CAAPS facility in Darwin, or by decentralised community-based programs, possibly based on outstations.

At present, the situation can be summarised as follows: neither CAAPS nor any other existing residential treatment facilities could hope to meet the needs that should be being addressed by more preventive services, such as screening and early intervention, even if these facilities were ideally located. But, in any case, CAAPS is not ideally located for West Amhem drinkers; it is far away in Darwin, which places further limits on the extent to which it can fulfill the role for which residential facilities *are* suited - namely, helping severely dependent drinkers.

6.3. Measures to reduce risks associated with drinking environments

The third group of services to be discussed here - measures to reduce risks associated with particular drinking environments - are conspicuous by their absence. There are no sobering up shelters or night patrols in the region. Some old police premises at Oenpelli were being converted for use as a women's shelter at the time we conducted our fieldwork. Apart from that, there are no measures in place at present - except, of course, the two licensed clubs, both of which are designed to create drinking environments conducive to responsible drinking.

We discuss the clubs and their role elsewhere. In Section 7 of this report, we also take up the question of whether there ought to be services such as sobering-up shelters or night patrols - and answer in the negative.

6.4. Summary

The foregoing review of existing programs and services shows the present range of services to be inadequate on a number of counts. Firstly, the system of controls on availability, on which the Fox Commission appeared to put such reliance, has not achieved its objectives. On the one hand, it has not prevented widespread excessive drinking, while on the other it has been unable to prevent expansion in the number of liquor outlets in the region.

Secondly, the present range of services and programs designed to change drinking practices is founded on (a) primary prevention measures of questionable effectiveness, such as media campaigns, some occasional school-based education, and an NT Government Aboriginal Living With Alcohol Program which, to date at least, appears to have had little impact in the region, and (b) limited access to residential treatment facilities located outside the region. The most important gap in present services is a dearth of secondary prevention measures, in particular, regular screening or early intervention programs.

Thirdly, apart from licensed clubs, there are virtually no measures in place to reduce the risks associated with drinking, such as sobering-up shelters or night patrols. (An exception is a women's refuge under preparation at Oenpelli.) However, for reasons explained in Section 7, we do not consider this absence of services to be a problem.

In the next section we propose a strategy to overcome these problems.

7. A STRATEGY FOR KAKADUIWEST ARNHEM REGION

The present system of controls over alcohol misuse in the region is made up of measures put in place in the wake of the Fox Report's recommendations. This system, as it eventuated, consisted of three main elements :

- the establishment of a national park authority that not only had responsibility for developing and managing Kakadu National Park, but also for providing a buffer between Aboriginal people and the potential impact of mining and tourism;
- the creation of employment opportunities through the national park authority, a buffalo eradication program and, to a lesser extent, mining; and
- the containment of consumption of liquor to (mainly) on-premise consumption in licensed clubs (rather than hotels).

This system, we believe, has been shown in this report to be manifestly inadequate as a means of minimising alcohol-related harm, on at least three grounds.

- Firstly, it has failed to curb excessive consumption. On the contrary, alcohol consumption, much of it in or *via* the two main licensed clubs, is relatively high; this in turn has undermined the potential benefits of employment, not only of drinkers but also of members of drinkers' families, who run a risk of being 'humbugged' by their intoxicated relatives.
- Secondly, the range of preventive and treatment services that has been put in place is inadequate. Despite the existence for more than three years of a generously-funded NT Government 'Living With Alcohol' strategy, there are virtually no screening or early intervention programs; instead, people seeking help for their own or another's alcohol problems are forced to rely largely - as in the past - on residential treatment programs located outside the region. While such programs have an important part to play in any system of alcohol services, they have been shown to be of limited effectiveness, especially in the absence of strong, locally-based follow-up programs.
- Thirdly, as previous researchers have pointed out, there is no mechanism in place for regular monitoring of the social impact of tourism and mining, in contrast to the mechanisms established to monitor impacts on the natural environment.

Given these circumstances, we believe that it is necessary, firstly, to formulate a new strategic framework for the reduction of alcohol-related problems in the region and, secondly, to seek a commitment from all relevant parties to supporting the strategy. The strategy would in turn provide a framework for the consideration of specific measures.

In Section 1.2 above, we identified four types of measures that could be utilised as part of an alcohol control strategy. These were :

1. Controls on the *availability* of alcohol;
2. Programs and services designed to change *drinking practices*;
3. Measures designed to reduce risks associated with particular *drinking environments*, and
4. Measures to overcome social and economic disadvantages, and to enhance the *social and economic opportunities* available to members of the population to which the drinkers belong.

In the light of our review of the present system of controls and services, and of consumption levels and the prevalence of alcohol-related problems in the region, we believe that a new strategy must be built up from the following components :

- *effective* controls on availability of alcohol;
- a range of appropriate and genuinely accessible preventive and treatment services;
- suitable 'risk reduction' measures and services, and
- measures and services to enhance economic and social opportunities for Bininj.

In the following sections, we make some recommendations regarding the first three of these components. We do not discuss the fourth, mainly because we are aware that the Djabulukgu Association has commissioned a separate consultancy to consider the development of employment and training opportunities, and is also taking initiatives with respect to education. We would, however, wish to emphasise the importance of such measures as a component of any strategy to reduce alcohol (and other drug) related problems in the region.

The above four components all have to do with the *content* of a regional alcohol strategy. We believe that the *processes* whereby the strategy is developed are no less important than the content. We also believe that the processes adopted must lend themselves to pursuit of the following objectives :

- mobilising and supporting those individuals and groups in the community who wish to reduce alcohol-misuse and the harm it causes, and who are often effectively disenfranchised at present;
- working towards a consensus among the various groups in the community regarding priorities and actions to reduce alcohol problems, and
- recognising, and being able to cope with, irreconcilable differences where these are unavoidable.

These objectives, we believe, call for a *community development* approach towards the implementation of a regional alcohol strategy. Below, we also make recommendations regarding the implementation of such an approach.

7.1. Controls on availability of alcohol

The present ensemble of availability control measures has several key defects. These are :

1. lack of coordination between those responsible for the system of statutory controls presided over by the Northern Territory Liquor Commission on the one hand and, on the other, the informal regulatory measures fostered mainly by the Gagudju Association in negotiation with individual licensees;
2. the ad hoc nature of both groups of regulatory measures - that is, those imposed by the NT Liquor Commission and those negotiated by Gagudju Association;
3. the emergence **in** recent years of a greater number and diversity of liquor outlets in or accessible from the region, underlining the need for a regionally-based strategy for controlling availability.,
4. the failure of existing control measures to ensure that licensed clubs in the region serve the purposes for which club licences (as distinct from hotel and other licence categories) are intended - namely, the provision of alcohol and other services to members and their guests only, on a non-profit basis; we also believe that neither the Gunbalanya nor the Jabiru Sports and Social Clubs are adequately accountable to the broader communities in which they are located.

To overcome these defects, we recommend that the following steps be taken.

- (1) Priority should be given to establishing a mechanism to develop and oversee a *coordinated, formalised* system of controls on availability, based on consultation with all relevant parties - including non-drinkers in communities. This mechanism, in the form of a regional alcohol committee, would include representatives from :
 - Australian Nature Conservation Agency (ANCA);
 - Northern Territory Liquor Commission;
 - Northern Land Council;
 - Gagudju Association;
 - Djabulukgu Association;
 - NT Hotels and Hospitality Association;
 - Council for Aboriginal Alcohol Program Services (CAAPS);
 - Kunbarlanja Community Government Council;
 - Jabiru Town Council;
 - Demed Inc.

The committee's primary task would be to review annually all special conditions and restrictions attached to licences, to consider any submissions that might be made with respect to licences, and to make recommendations both to the Director of ANCA and the Chairman of the NT Liquor Commission.

In reviewing licences, the committee would be mindful of the need to reconcile the needs and wishes of local residents and tourists with the urgent need to reduce excessive drinking and associated problems in the region.

The regional committee could be based upon the existing Gunbang Action Group, or it could be a completely new entity.

- (2) Operating conditions governing Gunbalanya and Jabiru Sports and Social Clubs be amended in order (a) to make them more accountable to the diversity of interests, needs and views of members of the communities in which they are located, and (b) to counteract the concentration of economic and political power that tends to accrue to those individuals or groups who gain effective control over the considerable financial resources of these clubs. Such a concentration of economic and political power increases the likelihood that decisions affecting the clubs' operations will be made on the basis of sectional interests, rather than in the interests of the wellbeing and health of community members,

With respect to (a), we would point out that non-drinkers in communities must live with the consequences of actions taken by drinkers and those who serve them, no less than the drinkers themselves. Club committees, for fairly obvious reasons, tend to be dominated by drinkers. Because a majority of women in most Aboriginal communities are non-drinkers, and most men are drinkers (and also for other reasons bearing on gender equity) we believe that the most effective practical way of increasing the likelihood of persons other than committed drinkers being able to influence club decision-making is to insist upon women being equally represented with men on club committees.

We therefore recommend that the operating conditions of Gunbalanya Sports and Social Club be amended to make it mandatory that at least 50% of elected committee positions, including 50% of executive positions, be held by adult Aboriginal female residents of Oenpelli, and that the operating conditions of Jabiru Sports and Social Club be amended to make it mandatory that at least 2-5% (ie. 50% of 50%) of elected committee positions, including executive positions, be held by adult Aboriginal female residents of Jabiru and/or surrounding town camps. Should either club be unable to meet these conditions, its licence would be reviewed by the Liquor Commission.

With respect to (b) above, we wish to make it clear that we are not imputing improper conduct to any existing groups or individuals. Rather, we believe that the *present conditions and arrangements* under which the clubs operate are conducive to decisions being taken that do not give adequate weight to the health and wellbeing of all members of the communities concerned - including, of course, children and non-drinking adults, as well as drinkers.

This is so for two main reasons: firstly, the magnitude of turnover at the clubs currently in the vicinity of \$4 million a year at the two clubs combined; this creates an attractive incentive for any individual or group that might aspire to gain a controlling interest, and secondly, the dearth of people in the communities concerned with the skills and experience needed to scrutinise and monitor effectively decisions regarding the allocation of resources. Put simply, few people are in

a position genuinely to scrutinise the decisions taken by those controlling the clubs' affairs, and of those who are in a position to do so, even fewer are able to discern what is going on and do anything about it, should they wish to do so.

To counter this situation, we recommend that..

- (a) *Operating conditions of both clubs be amended so as to stipulate that club committees must include at least one nominee of the regional alcohol committee foreshadowed above. Such nominated members would have full voting rights.*
 - (b) *Both clubs be required to submitted submit annual reports, including statements of receipts and expenditure to the regional alcohol committee foreshadowed above, within three months of the end of each financial year. Failure to comply should be brought to the attention of the NT Liquor Commission.*
- (3) Further restrictions be imposed on the availability of take-away alcohol in the region.

We note that the Gunbalanya Sports and Social Club already has a ban on take-away sales, and that the Jabiru Sports and Social Club has imposed a limit of one carton of beer per person per day. The latter limit, however, hardly qualifies as a mechanism to promote moderation, particularly when non-drinkers can be persuaded to purchase cartons on behalf of drinkers.

Our discussions with residents of Manurburdurina Town Camp and other Aboriginal people in the region suggest that there would be widespread support for a daily limit of 12 cans of beer per person. We believe that a limit of 6 cans of full strength beer, or 12 cans of light beer per person per day should be imposed for a 6 months trial period, with the effects being monitored. Should the trial prove beneficial, consideration should be given to making the limitation permanent.

We also believe that, in the light of the beneficial results of comparable measures being imposed in Tennant Creek, consideration be given to banning all take-away sales throughout the region on Thursdays and on 'royalty payment' days. Again, the measure should be imposed initially on a six-month trial basis.

The goals of such a restriction would be as follows :

- (1) to reduce the harm associated with excessive drinking on days traditionally associated with heavy purchasing;
- (2) to encourage expenditure on food and other items, rather than on alcohol.

The limit on take-away sales should apply only to Aboriginal residents of the region, *subject to the prior endorsement in writing of the three associations representing traditional owners (without which agreement the limit would contravene antidiscrimination legislation).*

The ban on takeaway sales on Thursdays and 'royalty payment' days, however, should apply universally throughout the region, otherwise it will almost certainly be ineffective.

Against this proposal, it will inevitably be argued that such a ban imposes unreasonable restrictions on tourists and non-Aboriginal residents of the region. This argument, we believe, should not be supported, for two reasons. Firstly, on premise sales from roadhouses, taverns, hotels and clubs will not be affected; therefore tourists and others will be able to obtain alcohol on Thursdays and royalty payment days. Secondly, the West Arnhem region is not just another geographical region of Australia, but rather a distinctive area in which it has been officially acknowledged - by means of formal agreements and the Kakadu Plan of Management - that mining, tourism and related activities will not be carried out without due regard being paid to the wellbeing of those Aboriginal people to whom the land belongs.

To summarise our proposals regarding takeaway sales, *we recommend that..*

1. *The existing ban on all takeaway sales from Gunbalanya Sports and Social Club, and restrictions on takeaway sales from other outlets in the region be either (a) retained or, (b) in consultation with the Regional Alcohol Committee proposed above, be extended.*
 2. *Takeaway sales from Jabiru Sports and Social Club to Aboriginal club members be restricted to either 6 cans of full-strength beer per person per day, or 12 cans of light beer per person per day, initially for a trial period of six months. with effects being monitored.*
 3. *Notwithstanding (1) and (2) above, consideration be given to permitting no takeaway sales of alcohol throughout the region be permitted on Thursdays or on 'royalty payment'days, again for an initial six month trial period.*
- (4) The present arrangement at Gunbalanya Sports and Social Club, under which the club opens between 12 noon and 1.00 pm, with a further 30 minutes during which patrons can consume drinks purchased during the one hour sales period, is a matter of continuing controversy in the community. Our discussions and observations lead us to the following conclusions :
- (a) most if not all of the regular drinkers at Oenpelli favour the present arrangement;
 - (b) the views of non-drinkers do not appear to have been adequately canvassed;
 - (c) regardless of individual preferences, lunchtime consumption patterns have a severe, deleterious effect upon Aboriginal employment and productive activity in the community. As a result, responsibility for the performance of many essential functions, *and the power and authority that goes with this responsibility*, remains vested largely in non-Aboriginal residents in the community. This in turn contributes to a continuing marginalisation of Aboriginal people in a community that is ostensibly under their own control.

We believe that it would be presumptuous of us, as outside consultants, to call for the cessation of lunchtime trading. However, we hope and expect that, should the operating conditions of the GSSC be amended along the lines we have recommended above, a revamped committee would look closely at the arguments for and against lunchtime trading.

In the meantime, in view of the observed consequences of lunchtime trading, we believe that some steps should be taken forthwith to reduce harmful effects. Specifically, *we recommend that lunchtime sales at Gunbalanya Sports and Social Club ..*

- (a) be restricted to light beer only, and*
- (b) be contingent upon the club providing a meal, for which it should levy a lunchtime entrance fee of approximately three dollars per person.*

- (5) Greater efforts should be made to train bar staff throughout the region in the responsible serving of alcohol. We note that the Northern Territory Government, through the Living With Alcohol Program, has provided a grant to the NT Hotels and Hospitality Association for the express purpose of enabling the NTHHA to appoint someone to train bar staff in remote localities.

However, we did not find any evidence that such training had been provided to staff of licensed premises in the region. Instead, what training that had taken place had been provided by A/ Snr Sergeant Bob Rennie, a senior police officer from Jabiru. We applaud the police officer's initiative in taking such a preventive, community oriented approach to the problem of alcohol misuse in the community, but believe that such initiatives should not serve to excuse other bodies from fulfilling their responsibilities. We also note that the officer concerned has, in any case, since been transferred to another police station.

We therefore recommend that the NTHHA be asked by the Living With Alcohol Program to discharge its responsibilities to train bar staff in the region, under the terms of the grant that the NTHHA has received from the NT Government to enable it to carry out this role. Should the NTHHA be unable or unwilling to perform this role then (a) the L WAP grant should be reviewed, and (b) the proposed Regional Alcohol Committee should approach the Living With Alcohol Program, seeking funds to enable it to engage a trainer on its own behalf.

- (6) Existing laws regarding serving of alcohol to intoxicated and/or underage patrons, and regarding public drunkenness, be rigorously enforced.

(Between the time the research for this project was carried out, and a final report prepared, the law relating to serving intoxicated persons in the NT was amended. On 22 May 1996, under amendments to the Liquor Act, it (a) became a regulatory offence to serve alcohol to intoxicated persons; (b) the onus of proof was henceforth placed on licensees and their staff to establish that customers were NOT intoxicated at the time of being served, and (c) licensees became liable with respect to offences against the Liquor Act committed by their employees, whereas previously only the bar staff directly involved had been liable. In addition, evidence from breathalyser readings became admissible with respect to offences under the Liquor Act, whereas previously it had been admissible only with respect to offences under the Traffic Act.)

7.2. Preventive and treatment services

Measures designed to reduce alcohol-related problems by controlling the supply of alcohol must, if they are to have any chance of success, be complemented by measures to reduce *excessive demand* for alcohol. Earlier, we pointed out that in recent years there has been a shift in emphasis in professional approaches, away from reliance on residential treatment programs, towards outpatient-based programs and non-residential intervention strategies.

Since 1991, the shift from a residential treatment based approach towards more preventive programs has been incorporated into the NT Government's Living With Alcohol Program. However, as we note above, this shift has not resulted in any development of preventive programs or services in the West Arnhem Region, apart from a number of visits by officers of the Aboriginal Living With Alcohol Program to Oenpelli, during which members of the community are invited by facilitators to think and talk about alcohol, its misuse, and possible ways of moderating consumption.

The present array of services comprises :

- a number of residential treatment programs, all of them located outside the West Arnhem region, and none of them focusing on the needs of clients from the region;
- an educational and counselling service, provided by means of regular visits to the region by Mr Keith Williams, an employee of CAAPS.

In addition, CAAPS recently engaged Mr Roger Sigston as a consultant, with a brief to advise CAAPS on the most appropriate program of community-based workers, who would provide both an 'on the ground' educational and preventive resource, and a 'follow up' service for ex-clients of CAAPS residential programs.

The most important gap in the existing range of services is the absence of any locally-based screening and early intervention programs. Moreover, community health centres in Jabiru and Gunbalanya represent potentially valuable components in any preventive strategy for alcohol problems. Testimony from a number of Aboriginal people who have stopped drinking, both from the West Arnhem and from other regions, indicates that advice from doctors and allied health professionals, delivered in the right manner and at the right time, can have a significant influence on decisions regarding drinking⁶⁴.

We recommend that steps be taken to overcome this deficiency. Specifically, we *recommend that screening and early intervention programs be established at both the Jabiru Health Clinic and at Gunbalanya Health Centre.*

The aim of the program would be to utilise existing facilities and expertise in community health clinics, and to enable these facilities and expertise to be directed towards making drinkers aware of the likely consequences of their present levels of consumption, and offering strategies for change.

⁶⁴ Following a general health screening survey conducted recently among residents of outstations in the East Arnhem region, some of those surveyed were advised of potential harmful effects of their drinking and smoking levels. Preliminary analysis of outcomes suggests that, while the 'minimal intervention' had no apparent impact on smoking, it appears to have led to a reduction in drinking. Dr Elizabeth Chalmers, *pers. comm.*

In order to implement the program, we recommend that Dr Elizabeth Chalmers be engaged on a short consultancy basis to establish the program, in consultation with staff at Jabiru Health Clinic, and to train clinic staff in its use. Dr Chalmers has extensive experience in preventive and treatment approaches to alcohol and other drug problems in the Northern Territory. She was largely responsible for setting up the Early Intervention Program at Royal Darwin Hospital in 1986, and for managing the program until 1992, when she moved to Nhulunbuy to work in general practice.

Dr Chalmers has indicated that the consultation time required for meeting with clinic staff and other residents, assessing local needs and facilities, devising a program and training clinic staff in its use would be in the order of 20 days. On this basis, we estimate the cost of setting up the program at both health centres as \$16,500, as set out in the following table.

Estimated costs associated with consultancy to establish screen program for Jabiru and Gunbalanya Health Centres intervention program for Jabiru and Gunbalanya

Item	Estimated cost
Consultancy fees: 20 days @ \$600 per day	12,000
Travel and accommodation	2,000
Preparation of materials	500
Adaptation of program for Gunbalanya (including additional consultation)	2,000
TOTAL	16,500

We recommend that funds to cover establishment of the screening and early intervention program be sought from the NT Living With Alcohol program

The screening and early intervention program should be monitored and evaluated, in both the short and long term. Funds to cover the evaluation should be included in the funds sought from the NT Living With Alcohol Program.

The proposed screening and early intervention program should not be seen as an alternative to either the Aboriginal Living With Alcohol Program - which has a specifically nonmedical focus - or to whatever community-based services CAAPS might put in place. There is a need for all of these, although the benefits accruing from each would undoubtedly be enhanced by mutual co-operation among the respective programs.

We therefore support the current efforts by CAAPS to design a more effective range of community-based counselling, referral and follow-up services, and believe that such services should work in co-operation with the proposed screening and early intervention programs.

7.3. Risk reduction measures

The strategy put forward by the Fox Commission for containing drinking within licensed clubs and discouraging takeaway sales of alcohol was, in itself, a strategy to reduce the risks associated with drinking. 'Risks' here refers both to risks to drinkers themselves, and risks borne by others in the communities, such as drinkers' families or, where drink-driving is prevalent, other road users. Insofar as most alcohol consumption at Oenpelli takes place within a controlled, supervised environment where fighting, for example, is not tolerated, the strategy might be said to have succeeded in at least some of its objectives. Such success, however, has come at the price of high levels of regular drinking at Oenpelli, while the strategy has been ineffective in curbing takeaway sales from an increasing number of outlets elsewhere in the region.

This raises the question of whether other measures to reduce the risks associated with drinking might be put in place. The obvious measures that ought to be considered are :

- night patrols
- sobering up shelters
- women's shelters.

In the course of our consultancy, we discussed all of these options with various individuals and groups, and concluded on the basis of the views expressed, and also on our own assessment of reported experiences elsewhere, that no new services of this kind were warranted in the region, although we note and support the decision to establish a women's shelter at Oenpelli.

Our reasons, in summary, are these. Night patrols these days come in a variety of forms: some are essentially Aboriginal-run services for picking up and taking home drunks; others perform this service but, more importantly, utilise indigenous mechanisms for settling disputes in town camps and other places. Whatever their functions, their success is contingent upon a number of factors: firstly, they need the sponsorship of a strong, cohesive Aboriginal organisation, the authority of which is recognised throughout the town camps or communities in which the night patrol will operate. Secondly, they must have a clearly defined, and mutually accepted role *vis a vis* local police. Thirdly, they must meet a need that cannot be adequately addressed by existing policing services⁶⁵.

We believe that none of these conditions are present in the region under consideration. In Oenpelli most drinkers walk home from the club. In Jabiru, no existing Aboriginal organisations meet the first of the three conditions above, and many drinkers also live (at least while drinking) within walking distance of the Jabiru **Sports** and Social Club. According to local police, those few inebriated drinkers who do require transport, can usually be catered for in the normal course of policing duties.

There may come a time in the future when an Aboriginal organisation sees a need for a night patrol and is willing to establish one. In this case, we believe that the proposal should be viewed in a positive light. In the meantime, however, we do not believe that night patrols are either wanted or warranted.

On several occasions, we invited people to consider the desirability or otherwise of a sobering-up shelter, and found no evidence of support for the idea. There are also sound practical reasons for not

⁶⁵ (Mosey 1994).

establishing a shelter in Jabiru. Firstly, sobering-up shelters are expensive facilities to run which, because they are expensive, tend to draw funds away from other services that might play an effective role in reducing alcohol-related problems. It should be remembered that sobering-up shelters are not designed to alter drinkers' behaviour. Indeed, some critics argue that they have a harmful effect, insofar as they protect heavy drinkers from what might otherwise be the unpleasant consequences of their behaviour. Secondly, in small communities where the number of inebriates at any one time is likely to be small, the existing police facilities are usually adequate to provide 'protective custody' of those apprehended for public drunkenness. This certainly appears to be the case both in Jabiru and Oenpelli.

The third facility we considered, and invited others to consider, were women's shelters. In Oenpelli at the time of our fieldwork, the old police cells were being refurbished for use as a women's shelter. Should a shelter be established in Jabiru? Nobody to whom we spoke seemed to think so. Women informed us that, when women were being threatened with domestic violence, it was normally possible to find alternative accommodation for them - a view that was endorsed by police in Jabiru. We therefore do not recommend the establishment of a shelter. (However, a number of people argued that a women's resource centre, along the lines discussed in the next paragraph, should include crisis accommodation facilities to meet needs that occasionally arose.)

We found widespread support - indeed, probably a consensus - for a facility that would serve, at least in part, a 'risk reduction' role, and that was a women's resource centre. Such a centre existed and was extensively patronised in the old settlement of Jabiru East, that pre-dated the township of Jabiru. Following the closure of Jabiru East, a new centre was subsequently established in Jabiru itself. However, whatever the intentions of those who established the new centre, it became in time a specialised screen printing facility. As a result, local Aboriginal women no longer have a centre in which to engage in the range of activities for which they had used the old centre in Jabiru East.

In view of the expressed wish for a women's resource centre in Jabiru, as well as the evidence from the earlier facility of extensive usage, *we recommend that funds be sought to establish a new women's resource centre in Jabiru, and also to enable a coordinator of the centre to be appointed.*

The women's resource centre in Jabiru is the only new 'risk reduction' measure **for** which we see a need.

7.4. The need for a community development approach

As indicated above, we believe that a key element of any successful strategy must be the use of a community development approach. Unless support is mobilised at the local community level, no measures aimed at reducing alcohol misuse are likely to be sustained for long, particularly in the face of the countervailing pressures that would almost certainly be brought to bear by the more determined drinkers, and those who gain from them.

This is not to suggest that the strategy should be anti-alcohol or anti-drinking. It must be made very clear that the targets of any strategy are alcohol *misuse and alcohol-related harm*.

At the same time, two possible discomfoting truths must be acknowledged. Firstly, current alcohol consumption levels in the region are, as we have shown, too high to be compatible with either health, social functioning or community wellbeing. A precondition of any lasting success in reducing alcohol problems is, therefore, a reduction in per capita consumption.

Secondly, drinking is a political issue - however much we might wish it otherwise. Alcohol is a valued resource, and control over its sale and consumption brings the same rewards that normally accrue to those who control access to valued resources: power, status and/or wealth. Moreover, those who gain power through their control over valued resources such as alcohol will use a wide variety of means of protecting their privileged position. These are simple facts of social life. They have nothing to do with whether particular individuals or organisations are 'good' or 'bad'.

The political dimension of alcohol use is as much a part of the environment in which alcohol is bought and sold as the pharmacological properties of alcohol. Any community-based alcohol strategy that refuses to address the political dimension is, in our view, doomed to irrelevance.

A successful alcohol strategy, therefore, must reconcile three objectives: first, that of bringing about a reduction in per capita consumption; second, that of mobilising community support, and third, that of building and maintaining that support in a politically contested environment.

This is not likely to be an easy task, especially in Oenpelli, which is a self-contained community in which considerable pressures could be brought to bear on any individual deemed to be 'upsetting the applecart' with respect to alcohol. The only approach of which we are aware that is likely to meet these challenges, is a community development approach and even then, the task probably requires a trained, experienced and competent community development worker.

The community development worker's role is essentially that of a catalyst. If she or he succeeds, community-based groups will develop their own commitment to maintaining a responsible drinking environment. If success is not apparent after reasonable time - if, for example, it proves impossible to mobilise sufficient community support for restraint and moderation - there is no point in persisting in the strategy.

We therefore recommend that an experienced community development worker be appointed, initially for a 12 month period, to work in Oenpelli.

The primary roles **of** the worker would be :

- to mobilise those people and groups in the community who are concerned about the current high levels of alcohol consumption and associated harm, but who are effectively disenfranchised at present;
- to identify, through negotiations and consultations with all interested parties, a prioritised set of measures that can be put into effect forthwith to reduce alcohol problems;
- to liaise with other groups and agencies in the community and region, and
- to establish mechanisms for monitoring and evaluating any measures adopted.

The worker would be based in Oenpelli and should, in our view, be attached to the health clinic. *We do not believe that the position should be located within Territory Health Services. It could be located within the (non-government) health clinic, or designated as a position attached to the regional alcohol committee, a sub-committee of which could be appointed as a steering committee for the workers.*

We do not see a need for a similar position in Jabiru. If a coordinator for a women's resource centre is appointed, as we recommend, this person would be able to liaise with Aboriginal women in and around Jabiru on alcohol-related matters, and also with alcohol workers employed by the Council for Aboriginal Alcohol Program Services (CAAPS). Similarly, if a screening and early intervention program is introduced as we recommend, health clinic staff would become even more effective than some of them are already in raising awareness about drinking problems and proposing alternatives.

8. SUMMARY OF RECOMMENDATIONS

1 In view of the shortcomings of the existing system of controls on alcohol misuse in the region, a new strategic framework is needed for the reduction of alcohol-related problems in the region. This should be based on four types of measures :

- (1) *effective* controls on availability of alcohol;
- (2) a range of appropriate and genuinely accessible preventive and treatment services;
- (3) suitable 'risk reduction' measures and services, and
- (4) measures and services to enhance economic and social opportunities for Bininj.

In this report, we make some recommendations regarding the first three of these components. We do not discuss the fourth, mainly because the Djabulukgu Association has commissioned a separate consultancy to consider the development of employment and training opportunities, and is also taking initiatives with respect to education.

8.1. Controls on the availability of alcohol

2. Priority should be given to establishing a mechanism to develop and oversee a *coordinated, formalised* system of controls on availability, based on consultation with all relevant parties - including non-drinkers in communities. This mechanism, in the form of a regional alcohol committee, would include representatives from :

- Australian Nature Conservation Agency (ANCA);
- Northern Territory Liquor Commission;
- Northern Land Council;
- Gagudju Association;
- Djabulukgu Association;
- NT Hotels and Hospitality Association;
- Council for Aboriginal Alcohol Program Services (CAAPS);
- Kunbarlanjnja Community Government Council;
- Jabiru Town Council;
- Demed Inc.

The committee's primary task would be to review annually all special conditions and restrictions attached to licences, to consider any submissions that might be made with respect to licences, and to make recommendations both to the Director of ANCA and the Chairman of the NT Liquor Commission.

In reviewing licences, the committee would be mindful of the need to reconcile the needs and wishes of local residents and tourists with the urgent need to reduce excessive drinking and associated problems in the region.

The regional committee could be based upon the existing Gunbang Action Group, or it could be a completely new entity.

- 3 Operating conditions governing Gunbalanya and Jabiru Sports and Social Clubs should be amended in order (a) to make them more accountable to the diversity of interests, needs and views of members of the communities in which they are located, and (b) to counteract the concentration of economic and political power that tends to accrue to those individuals or groups who gain effective control over the considerable financial resources of these clubs. To promote these goals, we recommend that the operating conditions of Gunbalanya and Jabiru Sports and Social Clubs be amended in three ways:
 - in the case of Gunbalanya SSC, to make it mandatory that at least 50% of elected committee positions, including 50% of executive positions, be held by adult Aboriginal female residents of Oenpelli; in the case of Jabiru SSC, to make it mandatory that at least 25% (ie. 50% of 50%) of elected committee positions, including executive positions, be held by adult Aboriginal female residents of Jabiru and/or surrounding town camps. Should either club be unable to meet these conditions, its licence would be reviewed by the Liquor Commission.
 - to stipulate that club committees must include at least one nominee of the regional alcohol committee foreshadowed in recommendation number 2, above. Such nominated members would have full voting rights.
 - to require both clubs to submit annual reports, including statements of receipts and expenditure, to the regional alcohol committee foreshadowed in recommendation number 2, within three months of the end of each financial year; failure to comply to be brought to the attention of the NT Liquor Commission.
- 4 Further restrictions should be imposed on the availability of take-away alcohol in the region. Specifically, we recommend that:
 - The existing ban on all takeaway sales from Gunbalanya Sports and Social Club, and restrictions on takeaway sales from other outlets in the region be either (a) retained or, (b) in consultation with the Regional Alcohol Committee proposed above, be extended.

- Takeaway sales from Jabiru Sports and Social Club to Aboriginal club members be restricted to either 6 cans of full-strength beer per person per day, or 12 cans of light beer per person per day, initially for a trial period of six months, with effects being monitored.
- Notwithstanding (1) and (2) above, consideration be given to permitting no takeaway sales of alcohol throughout the region on Thursdays or on 'royalty payment' days, again for an initial six month trial period.

5 The present arrangement at Gunbalanya Sports and Social Club, under which the club opens between 12 noon and 1.00 pm, with a further 30 minutes during which patrons can consume drinks purchased during the one hour sales period, is a matter of continuing controversy in the community. We believe that present lunchtime consumption patterns have a severe, deleterious effect upon Aboriginal employment and productive activity in the community. As a result, responsibility for the performance of many essential functions, *and the power and authority that goes with this responsibility*, remains vested largely in non-Aboriginal residents in the community. This in turn contributes to a continuing marginalisation of Aboriginal people in a community that is ostensibly under their own control.

We also believe that (a) most if not all regular drinkers in Oenpelli favour the present arrangement, while the views of non-drinkers do not appear to have been adequately canvassed. Under these circumstances, we do not believe it appropriate to call for a cessation of lunchtime trading. We do, however, recommend that pending any community-based reform of lunchtime trading arrangements, some steps be taken forthwith to reduce harmful effects. Specifically, we recommend that lunchtime sales at Gunbalanya Sports and Social Club :

- (a) be restricted to light beer only, and
- (b) be contingent upon the club providing a meal, for which it should levy a lunchtime entrance fee of approximately three dollars per person.

6 The NTHHA should be asked by the Living With Alcohol Program to discharge its responsibilities to train bar staff in the region, under the terms of the grant that the NTHHA has received from the NT Government to enable it to carry out this role. Should the NTHHA be unable or unwilling to perform this role then (a) the LWAP grant should be reviewed, and (b) the proposed Regional Alcohol Committee should approach the Living With Alcohol Program, seeking funds to enable it to engage a trainer on its own behalf.

7 Existing laws regarding serving of alcohol to intoxicated and/or underage patrons, and regarding public drunkenness, be rigorously enforced⁶⁶.

⁶⁶ Between the time the research for this project was carried out, and a final report prepared, the law relating to serving intoxicated persons in the NT was amended. On 22 May 1996, under amendments to the Liquor Act, it (a) became a regulatory offence to serve alcohol to intoxicated persons; (b) the onus of proof was henceforth placed on licensees and their staff to establish that customers were NOT intoxicated at the time of being served, and (c) licensees became liable with respect to offences against the Liquor Act committed by their employees, whereas previously only the bar staff directly involved had been liable. In addition, evidence from breathalyser readings became admissible with respect to offences under the Liquor Act, whereas previously it had been admissible only with respect to offences under the Traffic Act.

8.2. Preventive and treatment services

Measures designed to reduce alcohol-related problems by controlling the supply of alcohol must, if they are to have any chance of success, be complemented by measures to reduce *excessive demand* for alcohol. The existing range of services and programs is inadequate, in that it is founded on (a) primary prevention measures of questionable effectiveness, such as media campaigns, some occasional school-based education, and an NT Government Aboriginal Living With Alcohol Program which, to date at least, appears to have had little impact in the region, and (b) limited access to residential treatment facilities located outside the region. The most important gap in present services is a dearth of secondary prevention measures, in particular, regular screening or early intervention programs.

8. To overcome these **deficiencies**, it is recommended that screening and early intervention programs be established at **Jabiru** Health Clinic and Gunbalanya Health Centre.

9. We also recommend that Dr Elizabeth Chalmers be engaged on a short consultancy basis to establish the program, in consultation with staff at Jabiru Health Clinic, and to train clinic staff in its use.

10. We recommend that funds to cover establishment of the screening and early intervention program be sought from the NT Living With Alcohol program.

(a) The screening and early intervention program should be monitored and evaluated, in both the short and long term. Funds to cover the evaluation should be included in the funds sought from the NT Living With Alcohol Program.

11. The proposed screening and early intervention program should not be seen as an alternative to either the Aboriginal Living With Alcohol Program - which has a specifically non-medical focus - or to whatever community-based services CAAPS might put in place. There is a need for all of these, although the benefits accruing from each would undoubtedly be enhanced by mutual co-operation among the respective programs.

12. The current efforts by CAAPS to design a more effective range of community-based counselling, referral and follow-up services, should be supported, and such services encouraged to work in co-operation with the proposed screening and early intervention programs.

8.3. Risk reduction measures

13. It is not recommended that additional night patrols, sobering-up shelters or women's shelters be established at this time. However, (a) we support the moves at Oenpelli to convert some old police cells for use as a women's shelter; (b) we anticipate that the proposed new women's resource centre in Jabiru, referred to in Recommendation 14, would include provision for crisis accommodation, and (c) should community groups at

some time in the future wish to set up a night patrol or similar ventures, these initiatives should, in principle, be supported.

- 14 We recommend that funds be sought to establish a new women's resource centre in Jabiru, and also to enable a coordinator of the centre to be appointed.

8.4. The need for a community development approach

A successful alcohol strategy in West Arnhem must reconcile three objectives: first, that of bringing about a reduction **in** per capita consumption; second, that of mobilising community support, and third, that of building and maintaining that support in a politically contested environment. The only approach likely to meet these challenges is a community development approach.

- 15 *We therefore recommend that an experienced community development worker be appointed, initially for a 12 month period, to work in Oenpelli.* The primary roles of the worker would be :

- to mobilise those people and groups in the community who are concerned about the current high levels of alcohol consumption and associated harm, but who are effectively disenfranchised at present; to identify, through negotiations and consultations with all interested parties,
- a prioritised set of measures that can be put into effect forthwith to reduce alcohol problems;
- to liaise with other groups and agencies in the community and region, and
- to establish mechanisms for monitoring and evaluating any measures adopted.

- 16 The worker would be based in Oenpelli and should be located at the health clinic. The position should either be attached to the clinic, or to the recommended regional alcohol committee, a sub-committee of which could be appointed as a steering committee for the worker.

- 17 We do not see a need for a similar position in Jabiru. If a coordinator for a women's resource centre is appointed, as we recommend, this person would be able to liaise with Aboriginal women in and around Jabiru on alcohol-related matters, and also with alcohol workers employed by the Council for Aboriginal Alcohol Program Services (CAAPS). Similarly, if a screening and early intervention program is introduced as we recommend, health clinic staff would become even more effective than some of them are already in raising awareness about drinking problems and proposing alternatives,

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10. Appendix 1: Estimating per capita alcohol consumption

The total amount of liquor purchased into store by outlets in the region in 1994-95 was as follows.

Outlet	Wine FS cask	Wine FS bottled	Wine Fort	Cider FS	Cider LS	Spirits St	Spirits Mixed	Beer FS	Beer LA	Total	% Sales
Clubs	5376.0	4549.7	1085.8	7848.0	0.0	2602.8	2461.8	436111.6	106413.8	566449.5	61.1
Hotel/private hotel	2464.0	7741.7	85.5	1416.6	0.0	2743.3	0.0	37138.6	10385.0	61974.7	6.7
R'houses/taverns	11702.0	6168.2	257.9	4855.7	45.0	4511.6	8280.7	211706.5	50620.8	298148.3	32.2
Total	119542.0	18459.6	1429.2	14120.3	45.0	9857.7	10742.5	684956.7	167419.6	926572.5	100.0

* Source: NT Liquor Commission; strictly speaking, the data refer not to sales but to 'purchases into store by licensees.

10.1. Estimating apparent per capita consumption by persons aged 15 and over

Figures showing purchases into store by the three licensed clubs (Gunbalanya Sports and Social Club, Jabiru Sports and Social Club, Jabiru Golf Club) were obtained for 1994-95 from the Northern Territory Liquor Commission.

From these figures, estimates of the total amount of absolute alcohol sold were obtained by applying conversion factors based on the alcohol content of particular alcoholic beverages. The factors used were as follows :

Full strength beer	.049
Low alcohol beer	.03
Cask wine	.095
Bottled wine	.115
Fortified wine	.18
Spirits	.385
Pre-mixed spirits	.05

This procedure yielded an estimate of 27,308.8 litres of absolute alcohol.

Estimates of the population aged 15 years and over were derived from Australian Bureau of Statistics reports, and from Health Clinic data. The total estimated population aged 15 and over was 1,940 - distributed as shown in the table below

Locality	Total population	Population aged 15+
Gunbalanya	873	545
Gunbalanya outstations	300	195
Jabiru	1356	949
Outstations in Jabiru area	416	251
Total	2945	1940

Apparent per capita consumption of absolute alcohol by persons aged 15 and over was derived by dividing the total amount sold by 1,940, yielding an estimate of 14.1 litres of absolute alcohol.

10.2. Estimating Aboriginal alcohol consumption via the Gunbalanya and Jabiru Sports and Social Clubs

The procedure for estimating per capita consumption by Aboriginal drinkers in or from the Gunbalanya and Jabiru Sports and Social Clubs involved the following steps :

- * estimating total consumption from the two clubs;
- * estimating the number of Aboriginal drinkers;
- * estimating gender-based differences in Aboriginal drinking patterns;
- * adjusting for sales to non-Aboriginal drinkers.

Aboriginal customers at the two clubs are restricted to purchasing beer. Combined beer sales at the two clubs in 1994-95 were as follows :

Beverage	Litres
FS beer	416860.8
LA beer	78203.3
Total absolute alcohol	22772.3

The Aboriginal population from among whom regular drinkers at the two clubs are drawn comprises the population aged 18 and over from Gunbalanya, Manuburdurma and other settlements in the Jabiru area. Some residents of Gunbalanya outstations also make intermittent use of either or both clubs; however, because their use is intermittent, they are not included in the base population for these purposes. And adjustment for their consumption is outlined below.

The population aged 18 and over from Gunbalanya and Aboriginal settlements in the Jabiru area, based on ABS data and data supplied by Jabiru Health Clinic, is as follows :

Locality	Males	Females	Total
Gunbalanya	217	229	446
Jabiru and surrounding settlements	132	166	298
Total	349	395	744

A health screening survey conducted in Gunbalanya in 1994 found that 75% of adult males interviewed, and 25% of adult females, reported that they drank alcohol. Watson, Alexander and Fleming, in their major survey of drug use in Northern Territory Aboriginal communities in 1986-1987, found that in communities with licensed clubs 83.6% of males and 18.5% of females reported drinking⁶⁷. Since that time the proportion of females who drink is widely believed to have risen.

For the purposes of these calculations, the figures of 75% and 25% for males and females respectively are used. The estimated adult Aboriginal drinking population is therefore :

Males 75% of 349 = 262
 Females 25% of 395 = 99
 Total 361

A consistent finding of studies of Aboriginal alcohol use is that male drinkers (like non Aboriginal male drinkers) consume more, and more frequently, than female drinkers⁶⁸. Some studies report consumption levels among male drinkers to be twice those of female drinkers. The 1994 health screening study in Gunbalanya suggests that the difference is not quite as high - in the order of a male drinker/female drinker ratio of 16: 1. This ratio is used in the present calculations.

Finally, adjustments must be made to allow for alcohol consumed at the clubs by persons other than Aboriginal residents of the region. These, based on the assumptions outlined, are as follows :

- Gunbalanya Sports and Social Club: it is assumed that 10% of sales are accounted for by non-Aboriginal residents, visitors, and/or residents of outstations;
- Jabiru Sports and Social Club: it is assumed that 20% of sales are accounted for by non-Aboriginal members and/or visitors.

⁶⁷ (Watson, Fleming & Alexander 1991).

⁶⁸ (d'Abbs, Hunter, Reser & Martin 1994).

Adjusting the totals according to this procedure, beer sales to **local Aboriginal** residents are therefore estimated a t:

Adjusted sales	Litres
FS beer	354715.6
LA beer	66713.0
Abs Alc	19382.51

Applying all of the above,

if f = apparent per capita consumption of full-strength beer by female drinkers,
then m = apparent per capita consumption of full-strength beer by *male* drinkers, $1.6 * f$,
and $262(1.6 * f) + 99f = 354715.6$,
that is, $518.2f = 354715.6$.

Therefore $f = 684.5$ litres per year,
which is equivalent to 13.2 litres per week,
which is equivalent to 35.1 375ml cans per week.
Therefore $m = 1095.2$ litres per year,
which is equivalent to 21.1 litres per week,
which is equivalent to 56.2 375ml cans per week.

Applying the same procedures to LA beer,
if f_{LA} = apparent per capita consumption of low alcohol beer by *female* drinkers,
then m_{LA} = apparent per capita consumption of low alcohol beer by *male* drinkers, $= 1.6 * f_{LA}$,
and $262(1.6 * f_{LA}) + 99f_{LA} = 66713.0$,
that is, $518.2f_{LA} = 66713.0$.

Therefore $f_{LA} = 128.7$ litres per year,
which is equivalent to 6.6 375ml cans per week.
Therefore $m_{LA} = 206.0$ litres per year,
which is equivalent to 10.6 375ml cans per week.

These findings are summarised in the table below :

Apparent per capita consumption of alcohol by drinkers

	FS beer		LA beer		Abs.alcohol
Drinkers	Litres per year	Cans per week	Litres per year	Cans per week	Mls per week
Male	21.1	56.2	4.0	10.6	1150.9
Female	13.2	35.1	2.5	6.6	719.3