

Seeds on Stony Ground – Community Prevention of Alcohol Problems

MARJA HOLMILA (ED.): COMMUNITY PREVENTION OF ALCOHOL PROBLEMS. Macmillan. Basingstoke, Hampshire UK 1997. 251 pp.

● We are now well into the second generation of research-oriented projects in the community prevention of alcohol problems. Though dating the start of this tradition is somewhat a matter of definition, one starting-point might be taken as the California "Winners" project of the late 1970s (Wallack & Barrows 1982/83). Many of the studies of the first generation are discussed in three edited volumes which appeared in the early 1990s (Giesbrecht et al. 1990; Holder & Howard 1992; Greenfield & Zimmerman 1993).

Now the results of the second generation of studies are beginning to appear. In the United States, these notably include two trials in reducing youth drinking in Minnesota (Wagenaar & Perry 1994) and the Prevention Research Center's three-community study in California and South Carolina (Treno & Holder 1997; Holder 1997). The publication of *Community Prevention of Alcohol Problems* puts the Lahti project on the map, as a very substantial Finnish contribution to the tradition.

The Lahti project was con-

ceived and carried out as reflexive "action research", with the specific interventions undertaken in the community determined in the course of the interactions between the project team and the community. Over the main project period of 1992-1995, it came to include seven main intervention elements:

- (1) studying and intervening in the alcohol policy thinking of local key persons;
- (2) implementing brief screening and intervention concerning drinking in primary health care centres;
- (3) setting up a variety of community education events;
- (4) several youth-work projects;
- (5) group consultations with intimate others of heavy drinkers;
- (6) sales surveillance and training in the responsible service of alcohol;
- (7) forming and encouraging new networks among welfare and other professionals and volunteers.

The outcome evaluation of the project was conducted on a shoestring budget. Three telephone surveys of 700 Lahti respondents were carried out, and showed that the project's educational efforts had had

good penetration, although memory of the project tended to fade rather quickly (from 42 % in March to 30 % in December 1994; p. 188). Comparisons between Lahti and three smaller towns on consumption statistics and statistics on alcohol-related harms did not find evidence of a differential change in Lahti. A comparison of results from mail surveys in 1992 and 1995 to residents of Lahti and residents of the three towns "did not show any clear changes in drinking patterns and problem drinking that could have been attributed to the Lahti project", although a non-significant "decline in heavy drinking could be detected" (p. 202).

The survey samples are fairly small (the Ns for the comparisons are not clear, but are no more than 500), so small effects would not be detectable. It should be noted that the brief intervention component was only fully implemented outside the time-horizon of the book.

Despite these equivocal outcome results, the Lahti study is in my view a landmark contribution. Its primary contribution is in the form of the analyses of processes in the community and in the project. It is not unusual for evaluated community action projects to include copious process documentation along the way. Perhaps partly because of the compression required to present results in journal-article form, this qualitative and process material tends to be scanted in the

main reports of these projects, though there are by now a number of published commentaries by project leaders and teams about what has been learned in the course of the project concerning ways and means (e.g., Giesbrecht et al. 1990; Greenfield & Zimmerman 1993). But what is most original in the Lahti project book is the nuanced qualitative analyses of the project's data and experiences.

In studying images of alcohol policy among the local elites, for instance, the Lahti project found three main ideological positions: a welfare-state view emphasizing prevention in the population as a whole; a classical liberal view which sees a need for control of individual behaviour, but believes this control is the role of the family rather than of the state; and a neoliberal position that "everybody should be responsible for him or herself" (p. 209), so that any alcohol controls are an undesirable burden on the general public. Local journalists inclined strongly to the neoliberal position, thinking of themselves as cultural intermediaries offering information on behalf of their consumer-audience's freedom of choice (pp. 66-72).

The book includes an analysis of general trends in Finnish alcohol policy and society which strongly suggests that the neoliberal position has been gaining ground in the society as a whole. The conclusion argues that this trend poses a "particular contradiction

or challenge" to public health efforts to prevent alcohol problems: "consumers in postmodern society on the one hand need protection against health risks, which are being increasingly recognized by experts, [while] they, on the other hand, construct their basic identities as independent decision-makers opposing any outside regulation or manipulation" (p. 208).

In a parallel analysis, the book situates the focus of the project itself in the national and historical context of the fading of state control structures. As the national alcohol control structure has weakened, it "strengthens the role of local political and administrative actors" (p. 38). In the current Finnish context, the experience of the project suggests, it is mostly community professionals who play a key role: "without a push from health advocates and professionals, local civic action around alcohol issues runs the risk of remaining very weak" (p. 208). It is noted that "the North American and the European approaches to community action differ most, perhaps", in the greater emphasis on "citizens' grassroots activities" in North American orientations towards the community and towards community action (p. 4).

On this point, I would agree that there certainly is a greater emphasis in North America on the importance of citizens' grassroots activities in community action. But it would be interesting to do a comparison at the level of actual activity: it is

not clear to me that the big U.S. community prevention demonstration projects have involved more spontaneous grassroots activities than the Lahti project.

Because of the ideological commitment, interest groups in the U.S. – the beverage industries as well as public health activists – go to a great deal of trouble to create the appearance of grassroots action. And genuine grassroots movements do still arise in the alcohol field – e.g., Mothers Against Drunk Driving (MADD). But such movements do not fit easily into evaluated community action demonstration projects, at least in the heroic phase of these movements, before professionalization sets in.

The most striking differences in design and orientation between the Lahti project and the big U.S. projects in the second generation of evaluated community action studies result from the very different modes of financing. The Lahti project was primarily financed by commitments of the time of permanent staff from the collaborating agencies. "The project organization was very light. There was no separate budget, and the funds came from the annual budgets of the different cooperating partners" (p. 10). The big U.S. projects, on the other hand, have all been financed with grant funds, usually from agencies with a primary mandate to support research. Much of the resources of these projects has been devoted to the outcome

evaluation, for several reasons. The projects are primarily led by researchers, usually depending on the specific project for their salary during its duration. The size of the research field-work budget tends to provide a measuring stick for how much research staff support can be justified.

Also, the development of outcome evaluation methodology – a major concern in the U.S. literature (e.g., Holder & Howard 1992; Kaftarian & Hansen 1994) – has tended to push up the size and cost of the evaluation effort. It is unlikely that a project with the limited sample sizes of the Lahti outcome design would have been funded in the U.S. grants process. U.S. designs also increasingly recognize that an intervention in a single community is, from many perspectives, an N of 1, creating pressure for such expanded designs as the 15-community randomized trial of community action on underage drinking (Wagenaar & Perry 1994).

The U.S. grants process would also be unlikely to support a reflexive “action research” orientation in a community trial. Review committees usually want the project to start with a crisp set of hypotheses, set within a fully worked-out theoretical frame. These desiderata are hard to reconcile with an approach which is inductive and recursive, where the theoretical frame is to a considerable extent the result of the project rather than its starting-point.

And with so much at stake, U.S. projects cannot afford to fail to demonstrate positive outcome results – and in this frame of reference, the Lahti project would be viewed as a failure.

This has tended to mean that the big U.S. projects zero in on territory where they have the biggest chances of showing success. This has resulted in a substantial constriction in their targets: primarily they have been focused on underage drinking or on alcohol-related traffic and other injuries. Both of these are areas with a substantial potential for success. This is partly because there are some clear and promising strategies to pursue at the community level; but more importantly, they are both areas in which there is, at least on the surface, a high degree of community consensus and concern.

In the California/South Carolina community trial, 85-90 % of community respondents were “concerned” about both “drinking-and-driving accidents” and “youth drinking”. About 60 % were “concerned” about “alcohol-involved injuries” (Treno & Holder 1997:186); the authors comment that this lower rate of concern may be “perhaps because of the vagueness of the concept” (p. 188). In the U.S. federal grants funding environment, the Lahti project’s component of counseling sessions for the heavy drinker’s intimate others, for instance, would be an unlikely choice in a community action demonstration pro-

ject.

But the Lahti project’s results have much to teach us which could well be applicable also in North America and elsewhere. For instance, the report remarks that adolescents are an almost automatic target in a community prevention project: “their drinking is visible, and everybody worries about the young”. But “in the course of the project, the way of seeing the young people’s drinking changed to some extent. They ceased to be [viewed as] an isolated group, and ... discussion focused more and more on the adults’ role in transferring drinking habits from one generation to another” (p. 150). The project found that there was a great deal of ambiguity below the surface of the apparent consensus: “lots of problems remained unresolved, especially those related to the parents’ action as controllers or their position as role models” (p. 151); “the adults support educational measures for the young without being able to decide what are the norms and attitudes one should teach them” (p. 153).

What are the lessons of the Lahti project and the other second-generation projects concerning the path forward for evaluated community action projects in the alcohol field? However they are funded, serious projects of this nature are labour-intensive and resource-intensive. I suspect that researchers leading them will be unwilling to take on such a project more than twice in a

lifetime. With the meagre results of the largest community intervention trial of them all, the COMMIT anti-smoking project, the attractiveness of such trials may be somewhat tarnished.

One lesson may be that, in terms of most strategies and goals of alcohol problems prevention, it is self-defeating to expect large changes in the short term. Knowledge and awareness can be changed in the short term – as indeed they were in Lahti. Legal and regulatory changes (including taxes) often show short-term effects (often decaying over time). But a precondition for the effectiveness of legal and regulatory changes is popular support for them, and here it is clear that in Finland, as in many industrialized countries, prevention projects are working on stony ground. The main success of the New Zealand Community Action trial, for instance, was to hold back a tide of public opinion flowing toward greater availability for adults (Casswell et al. 1989).

The analyses of the Lahti project suggest how deep-rooted in the zeitgeist and in people's self-definitions and ways of thinking this tide seems to be. In the short term, community prevention efforts can work successfully in the regulatory arena, but mostly at the margins, as in such matters as alcohol controls in municipal halls and spaces (Gliksman et al. 1995), with municipal bodies motivated primarily by liability concerns. Such efforts are

worthwhile and productive, but they do not constitute a full community program in alcohol problems prevention.

Otherwise, community alcohol problems prevention must be seen as work for the long haul. This makes it difficult to fund: funding agencies want results in the short term. It makes it difficult to evaluate: short-term effects are inherently easier to measure than long-term effects. But there is no other choice, if the aspiration is for substantial and lasting effects. In societies like Finland and North America, the easy steps to reduce alcohol-related harm have already been taken, and an insistence on seeing short-term effects points only to strategies with effects which are mostly at the margin or evanescent.

One path forward may be to move away from the model of researcher-initiated community action projects, and to try to improve the evaluation of initiatives coming from professionals or others in the community. To a certain extent, the Lahti project operated on a principle of opportunism about such community initiatives: "one of the working rules during the [Lahti] project was that only when people seemed to enjoy themselves or had passionate views on the issue, was it worth pursuing the idea any further" (p. 216). But the difficulties of moving down this alternate path are considerable. In most circumstances, it would mean abandoning randomization. The efforts of researchers may

prove even harder than the efforts of community activists to turn off and on to someone else's timetable. And flexible funding arrangements for evaluations, operating at times on extremely short notice, would need to be arranged.

Certainly, the Lahti project offers convincing evidence of how much can be learned by sensitive and nuanced qualitative analyses of community action projects. Although funding bodies often seem to think that prestige lies in "hard numbers", good qualitative analysis is even harder to do than good quantitative analysis. The Lahti project report is full of interesting observations and ideas, which offer a fertile seed-bed for future development.

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The Urban Pub

PEKKA SULKUNEN & PERTTI ALASUUTARI & RITVA NÄTKIN & MERJA KINNUNEN: THE URBAN PUB. Stakes, National Research and Development Centre of Welfare and Health. Helsinki 1997, 290 pp.

● The Urban Pub" was originally published in Finland in 1985. It began as a series of separate chapters, written by each of the individual authors, which were then joined together to form a coherent monograph. Given the fact that the research on which the book is based was conducted in the early 1980's, one might justifiably ask: what relevance can a book, based on research in Finland nearly twenty years ago, have for a contemporary English speaking readership? The answer to this question is quite simple – a great deal. However, the reasons for why this should be are many and they in turn illuminate some of the characteristics of the alcohol research field today.

Research on the pub, the bar or the tavern, in spite of their importance, is still sparse. Although research on alcohol problems, especially in the U.S. has increased tremendously since this book was first published, much of that research has concentrated on alcohol problems and has neglected to investigate the culture of drinking and the arenas in which that drinking takes place. For example, if we examine the National Institute on Alcoholism and Alcohol Abuse

data base ETOH¹, we find exactly 6 references on this topic since 1990. Consequently, the English publication of "The Urban Pub" which examines in detail the internal workings of two working class pubs is an important contribution to the field. Portrayed within its pages, we view the activities of the regular pub-goers – their dart playing, their relationships, their jokes, the songs they listen to, and their drinking behaviors.

However, unlike many of the existing studies of the pub, the bar or the tavern, this book not merely provides a detailed account of the inner workings, dynamics, rituals and cultural practices of the regulars, it also situates the pub within a wider social context, and attempts to examine the way in which these practices reflect the norms and values of the social groups which frequent the pub. As the authors note, their aim is "...to discover the way in which ... people's relationship to drinking ... are related to the cultural milieu in which local pubs are set". Even the classic work on the English pub "The Pub and the People" or the ground breaking U.S. study "Liquor License" fail to situate their studies within a wider context.