

CABINET COVER SHEET

1. **TITLE:** City of Adelaide Dry Area
2. **MINISTER:** Hon Jay Weatherill MP
Minister for **Urban Development**
and **Planning**
3. **PURPOSE:** To seek **Cabinet** approval for a 12 month extension of the City of Adelaide dry area.
4. **RESOURCES REQUIRED FOR IMPLEMENTATION** Nil additional resources.
5. **RELATIONSHIP TO GOVERNMENT POLICY** Consistent – a temporary continuation of the City of Adelaide dry area is being sought to enable support services to be put in place.
6. **CONSULTATION** There has been extensive consultation with relevant government and non-government organisations (see para. 3.50). Treasury and Finance has also been consulted.
7. **URGENCY** High – the current dry area expires on 29 October 2003.
8. **RECOMMENDATIONS** It is recommended that **Cabinet** approves:
- 1.1 the continuation of the **Dry Area Steering Committee** and its subordinate committees to coordinate the delivery of services and to address the recommendations of the dry area evaluation.

SIGNATURE OF MINISTER:**PORTFOLIO:****DATE:**
Hon Jay Weatherill MP
Minister for **Urban Development**
and **Planning**

17/10/03

TO: THE PREMIER FOR CABINET

RE: EXTENSION OF THE CITY OF ADELAIDE DRY AREA FOR 12 MONTHS

1. PROPOSAL

It is proposed that Cabinet:

- 1.1. notes the work being done to address the impact of the City of Adelaide dry area trial and related issues.
- 1.2. approves the continuation of the Dry Area Steering Committee and its subordinate committees to coordinate the delivery of services to address issues arising in relation to the dry area.

2. BACKGROUND

- 2.1. The City of Adelaide dry area trial began on 29 October 2001 following the previous government's approval of an application by the Adelaide City Council (ACC) to declare a dry area covering all city public roads and squares but excluding the parklands.
- 2.2. The initial City of Adelaide dry area declaration was for 12 months.
- 2.3. On 28 October 2002 Cabinet approved a 12 month extension of the trial to enable previously agreed services to be put in place (in particular the stabilisation facility – discussed below) and so that a comprehensive evaluation of the effects of the dry area could be carried out.
- 2.4. This submission needs to be read in conjunction with the submission from the Attorney-General seeking an extension of the dry area following an application by the Adelaide City Council, which is also listed for the 27 October 2003 meeting of Cabinet.

3. DISCUSSION

Administrative arrangements

- 3.1. The Premier asked that I, with support from Cabinet Office, oversee all activities related to the extension of the trial dry area.
- 3.2. An over-arching Dry Area Steering Group, chaired by Cabinet Office, has been established to identify and coordinate the delivery of service responses to tackle issues arising in relation to the dry area. The committee has representation from the government and non-government sectors as well as the Aboriginal community.

- 3.3. The Government is working closely with the Adelaide City Council on all aspects of the dry area trial. The:
- ACC has senior representation on the steering committee and the evaluation committee (see para. 5.2)
 - dry area is a standing item on the Capital City Committee agenda
 - Premier and I have regular informal discussions with the Lord Mayor about dry area issues.
- 3.4. In recognition of the over-lap between dry area issues and the work of the Social Inclusion Board, especially with respect to homelessness and implementing the Drugs Summit recommendations, board chair Monsignor David Cappo, board member Mr Roger Thomas and Executive Director of the Social Inclusion Unit, Ms Madeleine Woolley, are on the steering group.
- 3.5. When the dry area trial was established, it was recognised that its impact would be felt particularly by the Aboriginal community. To inform the steering group about these effects so that it can better target service responses, a consultation group of Aboriginal people representing the community and service providers was established. This group is chaired by Mr Roger Thomas who, in addition to being a member of the Social Inclusion Board, is an Aboriginal person and head of Wilto Yerlo at the University of Adelaide.

Dry area initiatives

- 3.6. Described below is the work to date on a range of new and augmented service initiatives to address issues that have arisen as a direct result of the dry area trial or that have been highlighted by it.
- 3.7. As noted above, it was recognised from the outset that the consequences of the dry area would be disproportionately felt by Aboriginal people. The initiatives described below are intended to address the dry area's effects on all disadvantaged and vulnerable groups including the Aboriginal community.

Completed initiatives

3.8. Stabilisation facility

- 3.8.1. After considerable delays in gaining planning approval, construction of the stabilisation facility began on 12 May 2003. The building works were completed in late August and the facility began taking clients in the third week of September.
- 3.8.2. The 22 bed facility is run by the Salvation Army and is adjacent to the Sobering Up Unit in Whitmore Square. It provides an eight week residential program for homeless adults in the inner city with alcohol and drug abuse problems. The program includes assessment, intensive case management and treatment services to assist people back into healthy, sustainable lifestyles. The case management process links clients with health, housing, education and employment services and provides on-going support when clients have completed the residential component of the program.

- 3.8.3. A four bed pioneer stabilisation unit had been operating from the Sobering Up Unit since November 2001.
- 3.8.4. To address the concerns of local residents, DHS set up a Community Liaison Committee that includes representation from DHS, ACC, the Salvation Army, Inner City Administrators Group, City South Association and residents from Gilbert Street and Whitmore Square. The committee is chaired by a senior officer from the ACC, which is a further demonstration of the strong inter-agency collaboration that is occurring in relation to dry area issues.
- 3.8.5. The Salvation Army reports that negative opinion from local residents about the stabilisation facility has lessened since its completion.

3.9. Improved parklands' safety

Pedestrian safety

- 3.9.1. One of the consequences of the dry area has been the displacement of people from the city squares to the parklands, in particular the west parklands. This resulted in several serious pedestrian accidents on West Terrace.
- 3.9.2. I called a meeting of interest groups to find practical measures to prevent further incidents. This resulted in:
- the installation of additional street lighting on West Terrace
 - changes to traffic light sequences to give pedestrians more time to cross West Terrace
 - agreement by the ACC to construct an additional pedestrian crossing on West Terrace
 - increased deployment police officers to the West Terrace area.

Provision of water in the west parklands

- 3.9.3. As a result of issues raised by the Dry Area Steering Group, the ACC has provided running water in the west parklands near the cemetery for people congregating and camping in this area

3.10. SAPOL initiatives with licensed premises

- 3.10.1. SAPOL has instituted a range of measures directed at reducing crime in and around licensed premises. These include:
- operation City Safe and Operation Confidence to address the incidence of serious assault, serious robbery and public disorder
 - establishment of a uniform tactical team whose duties include providing policing presence outside and within licensed premises on Friday and Saturday evenings
 - increased police numbers in the central business district entertainment precincts on Friday and Saturday evenings

- meetings with licensees and night club operators to encourage more responsible management of licensed premises
- formally advising licensees when criminal offences occur within their premises or when an intoxicated person has to be removed by police
- regularly speaking to licensees in the South and West Terrace precincts to reinforce their responsibilities under Liquor Licensing Act, particularly in relation to the sale of alcohol to intoxicated persons and licensees' promotion of inexpensive, bulk take away alcohol.

3.10.2. The Adelaide Local Service Area (LSA) also has a dedicated licensing intelligence and enforcement officer who works with the City of Adelaide, the Metropolitan Fire Service and the Office of the Liquor and Gambling Commissioner to address public safety issues associated with the operation of licensed premises.

3.11. Increased SAPOL patrols to the parklands

3.11.1. Safety concerns have been raised as a result of the increased numbers of people congregating and drinking alcohol in the parklands. To address this, SAPOL has increased the frequency of patrols to the parklands, especially the west parklands.

3.12. Aboriginal Community Constable

3.12.1. In February 2003 SAPOL appointed an Aboriginal Community Constable to the Adelaide Local Service Area's (LSA) Drug Action Team. The Community Constable's role includes:

- Working with the government and non-government sectors to set up an Indigenous Drug Action Team to tackle alcohol and drug problems affecting Aboriginal people in the inner city
- Engaging and building rapport with the inner city Aboriginal community, particularly in and around the parklands, the terraces and the River Torrens
- Membership of interagency forums (including the Dry Area Aboriginal Consultative Committee) to help provide a more coordinated approach to dealing with inner city issues
- Working with agencies to link Aboriginal people in to services and programs
- Liaising with licensed premises to ensure they are complying with the Liquor Licensing Act and not engaging in unsafe alcohol selling practices.

3.12.2. The Aboriginal Community Constable is also a member of the Dry Area Aboriginal Consultation Group.

3.13. Mobile Legal Service

- 3.13.1. To tackle problems identified by the Aboriginal Consultation Group, a mobile legal service has been set up for homeless Aboriginal people in the inner city. The service, which began operation on 21 May 2003, is a partnership between the City Homeless Assessment Support Team, the Aboriginal Legal Rights Movement (ALRM) and the Courts Administration Authority's Aboriginal Justice Officers.
- 3.13.2. It provides a coordinated service response that gives homeless and itinerant Aboriginal people in the city improved access to legal assistance so they are better informed about their legal rights and responsibilities. Services provided include:
- general legal advice and advocacy
 - referrals to ALRM, Women's Legal Service and the Legal Services Commission
 - assistance and advocacy in relation to fines and warrants
 - information about court procedures and links to court services.
- 3.13.3. The service operates on Wednesday mornings from the Salvation Army Sobering Up Unit and the Daughters of Charity in Hutt Street. It had also been operating from the Karpandi Women's Day Centre at West Care but was withdrawn from that site owing to on-going occupational health and safety problems there.
- 3.13.4. The service was set up as a 12 week pilot but owing to its success agencies have agreed to continue it.
- 3.14. Exceptional Needs Group
- 3.14.1. There are approximately 13 itinerant men with mental health, behavioural and alcohol abuse problems who frequent the inner city and who are regularly detained in the city watch house because human services providers will not accept them when they are intoxicated and exhibiting behavioural problems.
- 3.14.2. In 2000 the Coroner conducted an inquest into the death of a homeless Aboriginal man (Kenneth Strangways) who had multiple diagnoses. The Coroner was very critical of government human service providers, concluding that poor coordination and integration of services resulted in service gaps that contributed to Mr Strangway's death. Because of the similarities between this case and the 13 men with multiple diagnoses, the Steering Committee is working on this issue with DHS.
- 3.14.3. With assistance from the Aboriginal Housing Authority, DHS has been able to house three of the men and has provided funding for their intensive supervision, which is being provided by Brain Injury Options Coordination.
- 3.14.4. Funding of \$102k has been recently provided from the Social Inclusion Board's homelessness initiative to DHS' Exceptional

Needs Unit for the employment of a senior social worker to monitor and develop management plans for the 13 men.

3.14.5. The Exceptional Needs Unit has organised training for Adelaide LSA police teams about how to identify and appropriately manage people who are suffering from a mental illness. The training, which is provided by a psychiatrist and Brain Injury Options Coordination, has been well received by operational police because it provides practical strategies for dealing with people who are experiencing psychotic episodes.

3.14.6. The Exceptional Needs Unit has also been running workshops with Aboriginal staff from all the inner city services to assist them to provide more coordinated and collaborative services for the Aboriginal people in the exceptional needs group.

3.15. City Homeless Assessment Support Team (CHAST)

3.15.1. CHAST provides outreach services to homeless and vulnerable people in the inner city, especially those with drug and alcohol problems.

3.15.2. The City Homeless Assessment Support Team (CHAST) has received additional Government funding that has enabled it to increase its full time staff from seven to nine.

3.15.3. The dry area declaration has resulted in the dispersal of CHAST clients from the city centre to the parklands.

3.15.4. As a result of representations made by the Dry Area Steering Group, the ACC has allowed CHAST outreach workers to have vehicular access to the parklands and has provided parking fine exemptions. This has enabled CHAST to deliver its services more effectively to where they are needed.

3.16. Mobile Assistance Patrol

3.16.1. The Aboriginal Sobriety Group's Mobile Assistance Patrol (MAP) transports people under the influence of alcohol or other drugs to places of safety and support.

3.16.2. Since the introduction of the dry area trial MAP has received additional funding and now provides a 24 hour a day, seven days a week service in the city.

3.17. MOU between SAPOL and Aboriginal Sobriety Group

3.17.1. A Memorandum of Understanding has been developed between SAPOL and the Aboriginal Sobriety Group regarding protocols for dealing with intoxicated Aboriginal people in the city.

3.17.2. Under this protocol SAPOL notifies the Aboriginal Sobriety Group's Mobile Assistance Patrol when it is called to a Public Intoxication Act

incident involving an Aboriginal person. MAP then transports the person to a place of safety (e.g., their home or a sobering up centre).

3.18. DHS and Adelaide City Council agreement

- 3.18.1. It was realised soon after the establishment of the dry area trial that there needed to be better coordination and integration of human services in the inner city.
- 3.18.2. To help achieve this, the Department of Human Services and the Adelaide City Council entered into an in principle agreement to work collaboratively to build a more strategic alignment of government-council priorities in relation to human service planning.

3.19. Multi Agency Community Housing Authority (MACHA)

- 3.19.1. MACHA has received additional funding from DHS to employ a community liaison officer to implement strategies that encourage greater community, government, business and media awareness and support for disadvantaged groups in the inner city.

3.20. Youth initiatives

Operation Shut Eye

- 3.20.1. SAPOL has recently reinstated Operation Shut Eye, which is a program targeting at risk young people who are in the city late at night.
- 3.20.2. SAPOL reports that young people are catching public transport into the city late on Friday night and then deliberately missing the last service home. They then roam the streets committing offences (such as underage drinking) and/or putting themselves at risk of victimisation.
- 3.20.3. Under Operation Shut Eye police take at risk young people to the City Youth Service Office and then arrange their safe transportation home. The young persons' parents (or an adult relative or friend) are contacted and notified that their child has been found on the street late at night and the parents/relative or friend are then asked to come and collect the child. If that is not possible, SAPOL arranges for a service provider to take the young person home.
- 3.20.4. The operation is a joint initiative involving the Attorney-General's Department's Crime Prevention Unit, the Metropolitan Aboriginal Youth Team, the Mobile Assistance Patrol and the Adelaide Local Service Area Drug Action Team.
- 3.20.5. Operation Shut Eye was last run in January 2003 and was found to be a particularly effective way of reducing the number of at risk young people on the streets in the inner city.

Kumangka Aboriginal Youth Service

- 3.20.6. Kumangka, which is funded by DHS, runs a street work program in the inner city on Friday and Saturday nights for Aboriginal young people. The program includes crisis intervention, counselling, advocacy, case management and emergency transportation.
- 3.20.7. Kumangka has received additional funding from the Police Drug Diversion Program, which has enabled it to increase the hours of operation of the street work service from 19 to 23 hours a week.

Initiatives that are being finalised

- 3.21. Listed below are long-term dry area initiatives that are in the process of development.

3.22. Visiting health service

- 3.22.1. Advice from inner city service providers and, in particular, the Aboriginal community, is that existing health services are not always meeting the needs of homeless people. It has been reported that current services:

- have service models that fail to engage the homeless
- are difficult to access
- do not provide after hours services (with the exception of the RAH emergency department)
- provide 'middle class' services that exclude homeless people
- refuse to treat people who are intoxicated, affected by drugs or behaviourally difficult, other than in an emergency
- have 'ban lists' that exclude homeless and vulnerable people
- have very long waiting lists that discourage homeless people from trying to access the services.

- 3.22.2. While it is recognised that these perceptions do not apply to all services, they do indicate a need for strategies to improve access to human services by homeless and itinerant people in the city.

- 3.22.3. In July following discussions with Cabinet Office, DHS convened two multi-agency meetings to examine the delivery of health services for the homeless in the inner city. The meetings involved a broad cross-section of government and non-government service providers, including:

- Adelaide Central Community Health Service
- Muna Paendi
- City Homeless Assessment and Support Team
- Eastern Community Mental Health
- Child and Youth Health
- Drug and Alcohol Services Council
- Royal District Nursing Service
- Nunkuwarrin Yunti

- Burdekin Clinic
- Adelaide Central Mission
- Adelaide Central and Eastern Division of General Practice
- Commonwealth Department of Health and Ageing
- Inner City Administrators Group
- Adelaide City Council.

3.22.4. As a result of these meetings, work has commenced on the development of a primary care network model for the inner city homeless.

3.22.5. The key elements of the proposed service model are:

- provision of a tiered approach to case management and intervention
- providing CHAST with general nursing and general practitioner capacity, including outreach to key inner city locations
- expanding the RDNS primary health care service
- investigating ways to fund additional general practitioners to work in the inner city
- providing general practitioner and registered nurse clinics at a range of entry points (e.g., day centres, stabilisation facility and through outreach facilities)
- providing specialist RAH outpatient clinics (e.g., renal, diabetic, hepatic and respiratory) at key inner city locations frequented by homeless people
- increasing services for young adults, including young adults with children.

3.22.6. The proposals outlined above are consistent with the findings of the Generational Health Review, which called for improved services for homeless people.

3.22.7. Further refinement of the service delivery model is occurring and the resource implications of implementation is being examined.

3.23. Aboriginal detoxification facility and family centre

3.23.1. Work is proceeding on the preparation of a proposal for the establishment of a 24 hour medical detoxification and family care facility for Aboriginal people.

3.23.2. A committee chaired by the Department of Aboriginal Affairs and Reconciliation (DAARE) is developing tender documents to engage a consultant to prepare a business case for the facility. Drugs Summit funding of \$100k has been allocated for the business case.

3.23.3. The initiative is a response to recommendation 1 from the Drugs Summit, which asked the Government to provide funding to set up a 24 hour, 7 day a week facility in metropolitan Adelaide for Aboriginal people and their families experiencing substance misuse problems.

- 3.23.4. The need for a facility has been repeatedly highlighted in the work I am overseeing in relation to the City of Adelaide dry area trial. I understand from the Aboriginal Legal Rights Movement that the Royal Commission into Aboriginal Deaths in Custody also called for the establishment of Aboriginal detoxification facilities. At present in South Australia Aboriginal people must use generic services, however these do not adequately address their cultural and language requirements.
- 3.23.5. Pending the outcome of the business case, it is proposed to seek capital works funding from the Alcohol, Education and Rehabilitation Foundation (AERF). The AERF is a Canberra-based organisation set up by the Federal Government in 2001 to fund substance abuse initiatives, especially for vulnerable populations. The Foundation has grant funding of approximately \$115 million.
- 3.23.6. The business case will provide details of possible service models as well as governance and budget arrangements.
- 3.23.7. It is anticipated the proposed centre would be a residential facility providing detoxification from alcohol and poly-drug use as well as assessment, counselling, rehabilitation programs, long term case management and exit links to appropriate support services (e.g., accommodation, education, vocational training). The preparation of the business case will include extensive stakeholder discussions, which will determine the most appropriate operating models.
- 3.23.8. Options to locate the facility near the CBD are being explored and discussions have commenced with the ACC and the Land Management Corporation and Planning SA to identify possible sites.
- 3.23.9. The business case will consider the relative merits of various governance and operating structures, however tenders may be called for the non-government sector to operate the complex. A probity plan has been developed with assistance from the Department of Administrative and Information Services to ensure that discussions with the non-government sector during the preparation of the business case do not prejudice any tendering process that may occur.
- 3.24. Detention facility pursuant to the Public Intoxication Act
- 3.24.1. A key recommendation of the Royal Commission into Aboriginal Deaths in Custody (RCIADIC) was the abolition of the offence of public drunkenness (RCIADIC rec. 79). Linked to this were recommendations that non-custodial facilities should be established for the care and treatment of intoxicated persons and that police should not detain intoxicated persons in police cells (RCIADIC recs 80 and 81).
- 3.24.2. In response to the RCIADIC, public drunkenness was decriminalised in South Australia and sobering up centres established. The *Public Intoxication Act 1984* was also amended to permit police to take

persons under the influence of alcohol in a public place to their home or a sobering up centre.

3.24.3. The sobering up centres currently in operation in Adelaide, which are run by the non-government sector, will not admit or detain intoxicated people against their will. As a result, intoxicated people are frequently detained in police cells in contravention of the RCIADIC.

3.24.4. To address this issue, discussions are occurring with DHS to identify options for establishing a proclaimed facility under the Public Intoxication Act (PIA) for the safe detention of people who are under the influence of a drug or alcohol. (Note: There is currently no facility in South Australia proclaimed pursuant to the PIA.)

3.25. Transitional accommodation

3.25.1. The dry area declaration and its displacement effect has highlighted the issue of people sleeping in the parklands, particularly the west parklands.

3.25.2. Cross-agency strategies are being investigated to tackle this issue. This includes providing transitional accommodation near the parklands for homeless and itinerant people.

3.25.3. The proposed transitional accommodation would be similar to a caravan park. Residents would be actively case managed and linked into support services (e.g., health, drug and alcohol, housing, justice, financial) to address the problems that led to their sleeping rough.

3.25.4. There have been preliminary discussions with the ACC, the Land Management Corporation, Planning SA and the Department of Environment and Heritage to identify potential transitional accommodation sites.

3.25.5. Service models and possible funding sources are also being investigated.

3.26. Exceptional Needs Group

3.26.1. (see para. 3.14 from 'completed initiatives' above for a description of this group.)

3.26.2. DHS' Supported Housing Unit has prepared a proposal to provide long term, supported accommodation for the approximately 13 men with multiple, complex needs who are regularly detained in the city watch house. This proposal has been put forward as a multilateral budget bid.

3.27. Improved procedures for the verification of Aboriginality

3.27.1. The Aboriginal Consultation Group has advised that the current confirmation of Aboriginality procedures used by agencies can delay Aboriginal people's access to human services in the city.

- 3.27.2. Following discussions with the Department of Justice, the Commissioner for Consumer Affairs, CHAST, the Aboriginal Housing Authority and Mr Roger Thomas, a new and simplified procedure for verifying Aboriginality is being developed. A draft verification form has been prepared and is being circulated to relevant agencies for comment. The form asks applicants to provide details of their family, tribal group and country. It is based on the ATSIC-approved procedures used at the University of Adelaide by Mr Thomas.
- 3.27.3. The next step will be to identify appropriate Aboriginal people who can take on the verification role. It is proposed in the first instance to contact ATSIC for nominees. Advice has been received that a formal legislative approach is not required to appoint individuals to verify Aboriginality; endorsement of the nominees by service agencies requiring proof of Aboriginality is sufficient.
- 3.27.4. Work on this initiative is continuing.
- 3.28. Emergency housing – Aboriginal Housing Authority
- 3.28.1. The Aboriginal Housing Authority has prepared a proposal to redevelop a former SA Housing Trust site in Sturt Street in the inner city to provide transitional accommodation for Aboriginal women with children experiencing domestic violence.
- 3.28.2. There will be six dwellings providing unsupported, short term accommodation (i.e., up to nine months). It will be managed by the Aboriginal Housing Authority.
- 3.28.3. The necessary ACC approvals have been received and tenders were called in early September 2003. It is anticipated construction will commence in late 2003.
- 3.29. Dry area-related initiatives from the Inner City Services Strategic Plan
- 3.29.1. DHS is preparing an Inner City Services Strategic Plan, which will form the basis for planning and delivering human services in the inner city over the next three years. The plan up-dates the Towards a Service Coordination Framework for Vulnerable Adults in the Inner City that was released in 2001.
- 3.29.2. A number of specific initiatives that I have outlined above are contained in the plan. In addition, the plan has a range of communication strategies between agencies to address the effects of the dry area on service delivery, particularly in relation to the displacement of people from the city to the parklands and riverfront areas. Strategies include:
- increasing the capacity of agencies to deliver assertive outreach services across the city area, including the parklands (e.g., providing additional resources for CHAST and Day Centre Services)

- developing regular communication pathways between inner city agencies and SAPOL to respond to violent incidents and maintain safe environments for all
- increasing community liaison strategies to promote understanding about homelessness and opportunities for increased community relations initiatives that support the work of inner city agencies
- increasing communication pathways between DHS, inner city agencies and Aboriginal networks, agencies and forums to develop effective responses to drug and alcohol issues affecting Aboriginal people in the inner city
- strengthening liaison between inner city agencies, DHS, ACC and SAPOL regarding the management of camping out and social gatherings in the parklands.

3.29.3. The Inner City Plan also has strategies to improve service delivery for young people. These include improved collaboration between Aboriginal and non-Aboriginal youth workers, increased outreach services for young people at risk, and greater follow-up and support strategies around police activities such as Operation Shut Eye.

3.29.4. The Inner City Services Strategic Plan will be reviewed regularly in relation to service delivery and service outcomes in the inner city. The range of actions relating to the dry area will be re-examined when the dry area evaluation findings become available.

3.30. RAH discharge protocols for intoxicated Aboriginal people

3.30.1. It has been reported that when intoxicated Aboriginal people are discharged from the RAH they are not being referred into the care of appropriate support services such as the Aboriginal Sobriety Group.

3.30.2. DHS is examining this problem and the possibility of establishing a Memorandum of Understanding between the RAH and the ASG so that the ASG's mobile assistance patrol will be called to the RAH when an intoxicated Aboriginal person is being discharged.

3.31. City watch house drug and alcohol referral service

3.31.1. The prevalence of alcohol and drug related problems amongst people in police custody is of major concern.

3.31.2. The Drug and Alcohol Services Council has received Drugs Summit funding to conduct a 12 month pilot examining the effectiveness of placing drug and alcohol workers in the city watch house to assess detainees' level of alcohol and drug use and to make referrals to appropriate service providers.

3.31.3. Funding of approximately \$190 000 has been provided for this initiative.

Continuation of Dry Area Committees

- 3.32. The problems the dry area trial was set up to help address are extremely complex. They need complex solutions that have long lead times and require sustained effort to achieve.
- 3.33. The Dry Area Steering Committee and its subordinate committees have made considerable progress in identifying and coordinating the delivery of service responses to tackle dry area-related issues.
- 3.34. To ensure the momentum, commitment and interagency goodwill that has developed is not lost, it is recommended that irrespective of Cabinet's decision about the future of the dry area, these committees should remain and continue their work.

Evaluation of the dry area trial

- 3.35. One of the reasons for extending the dry area trial was to enable a thorough assessment of its effects. An evaluation was conducted during the first 12 month trial period, however there were methodological problems with it and the results were inconclusive.
- 3.36. A second evaluation has been carried out by Plexus Strategic Solutions, which was selected following a public tendering process.
- 3.37. Funding of \$60 000 was provided for the evaluation, with the Department of the Premier and Cabinet and the ACC each contributing \$30 000.
- 3.38. The evaluation concluded that the dry area:
 - had led to a reduction in the incidence of public drinking in designated dry area locations, particularly Victoria Square, Whitmore Square and North Terrace
 - had reduced the incidence of anti-social and criminal behaviour by public drinkers
 - had resulted in improved perceptions of public safety in the city
 - was supported by the general public, businesses and City of Adelaide residents.
- 3.39. The evaluation found that the dry area had resulted in some displacement of public drinkers to other areas of the City of Adelaide, in particular the west parklands. The greatest displacement effect, however, was to reduce the number of people who had previously travelled daily from the suburbs to the city to drink alcohol in public areas, especially in Victoria Square.
- 3.40. The impact of the dry area on vulnerable groups was examined. It was found to have had a deleterious effect on Aboriginal people, in particular by reducing their ability to congregate in Victoria Square, which it was noted was a historical and culturally significant meeting place. It was found to have had relatively little effect on either young people or the homeless.

- 3.41. The key recommendation of the evaluation was the retention of the City of Adelaide dry area for a further 12 months. It also recommended that the Steering Committee and its subordinate committees continue their work to coordinate the delivery of dry area service responses.
- 3.42. An executive summary of the evaluation is included as attachment A.

Implications

3.43. Economic, financial and budgetary implications

- 3.43.1. The extension of the dry area declaration for a further 12 months has no budgetary implications. Funding for initiatives described above will be sought through the multilateral and bilateral budget process.

3.44. Required resources

- 3.44.1. Nil additional resources are required to extend the dry area for a further 12 months.

3.45. Staffing implications

- 3.45.1. Nil.

3.46. Impact on the community and the environment

- 3.46.1. An extension of the dry area declaration will ensure a continuation of its broad community benefits (see evaluation results above) while work continues on the implementation of support services.

3.47. Risk management strategy

- 3.47.1. The dry area will lapse if a continuation is not approved. This submission is seeking an extension of the declaration.
- 3.47.2. The interagency momentum and goodwill to implement services addressing dry area-related issues that the Dry Area Steering Committee and its subordinate committees have established will be lost if these committees do not continue.

3.48. Consultation

- 3.48.1. Through the Dry Area Steering Committee and its subordinate committees there has been extensive consultation about the City of Adelaide dry area. Groups and individuals consulted include:

- Chair of the Social Inclusion Board
- Premier's Office
- Justice Strategy Unit, Attorney-General's Department
- Liquor and Gaming Commissioner
- SAPOL Operations Manager, Adelaide Local Service Area
- Director, Capital City Project Team
- Department of Aboriginal Affairs and Reconciliation
- Department of Human Services

- Adelaide City Council
- Aboriginal Sobriety Group
- Otherway Centre
- Aboriginal Legal Rights Movement
- South Australian Council of Social Service Inc
- Inner City Administrators Group
- Salvation Army
- Aboriginal Housing Authority
- Kumangka Youth
- Aboriginal community representatives
- City Homeless Assessment Support Team
- Commonwealth Department of Health and Ageing.

3.48.2. The Department of Treasury and Finance has also been consulted.

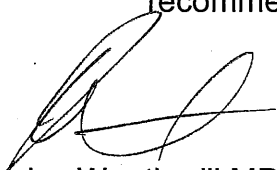
3.49. Implementation plan

- 3.49.1. A 12 month extension of the City of Adelaide dry area is being sought; without an extension the dry area will expire on 29 October 2003.
- 3.49.2. Implementation plans for the initiatives under development (described above) will be subject to the availability of funding, which is being sought through the bilateral and multilateral budget process.
- 3.49.3. Communication strategy
- 3.49.4. A communications strategy is being developed to promulgate the extension of the dry area and the work being done to implement support services.
- 3.49.5. Executive Council
- 3.49.6. Extension of the dry area will require Her Excellency the Governor making a regulation under section 131 of the Liquor Licensing Act.

4. RECOMMENDATIONS

It is recommended that Cabinet approve:

- 4.1. the continuation of the Dry Area Steering Committee and its subordinate committees to coordinate the delivery of services and to address the recommendations of the dry area evaluation.

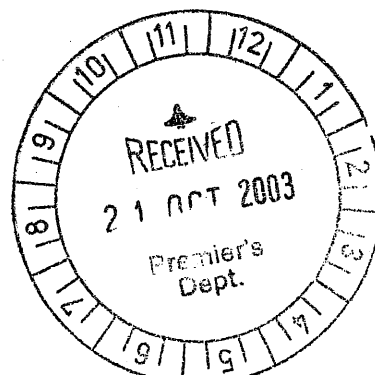
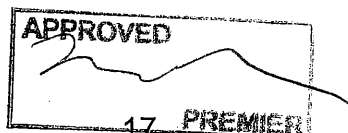

Hon Jay Weatherill MP

MINISTER FOR URBAN DEVELOPMENT AND PLANNING

D/10/2003

In Cabinet

27 OCT 2003



Department of the Premier and Cabinet
in collaboration with the
Attorney-General's Department
and the
Adelaide City Council

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EVALUATION REPORT

City of Adelaide's Dry Area Trial

Pixxon Strategic Solutions
(A Division of Cajebi Nominees Pty Ltd)
ACN 008 051 287/ABN 32 008 051 287

24 October 2003 - October 2003

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1. Executive Summary

Introduction

Plexus Strategic Solutions was appointed by the Department of the Premier and Cabinet, the Attorney General's Department and the Adelaide City Council to evaluate the City of Adelaide dry area trial.

The evaluation commenced in April 2003 and was completed in October with the presentation of this report.

Background

The City of Adelaide dry area trial began on 29 October 2001 following the previous Government's approval of an application by the Adelaide City Council to declare a dry area covering all city public roads and squares but excluding the parklands.

The initial declaration was for 12 months. On 28 October 2002 the Government approved a 12 months extension of the trial.

An evaluation was carried out in 2002 but its findings were inconclusive and the Government and the Adelaide City Council agreed that a further evaluation should be undertaken.

Objectives

The purpose of the evaluation was to assess whether the dry area had achieved its intended objectives:

1. a reduction in the incidence of public drinking in designated dry area locations
2. a reduction in the incidence of anti-social or criminal behaviour by public drinkers
3. an improved perception of safety in the city
4. the implementation of services to support the operation of the dry area
5. the identification of services and strategies required to remove the need for a dry area.

The evaluation also examined:

1. whether the dry area had resulted in the displacement of public drinkers to other areas of the city
2. its effects on service providers
3. its effects on specific population groups, particularly Aboriginal people, young people and the homeless.

Evaluation Method

The evaluation used both qualitative and quantitative data to assess the dry area's effects.

Qualitative data included:

- semi-structured interviews with government and non-government inner city service providers
- semi-structured interviews with key informants from government, local government and non-government agencies with an interest in the dry area trial
- discussions with Aboriginal people, homeless people and itinerant people in the inner city and parklands

- focus groups with young people
- interviews of commercial associations, businesses and traders
- a survey of the general public in the City of Adelaide
- a survey of residents living in the City of Adelaide.

The primary sources of quantitative data were SAPOL and the Drug and Alcohol Services Council. These agencies provided data about offences under the Public Intoxication Act and the Liquor Licensing Act together with information about alcohol related apprehensions and trends in recorded crime in the City of Adelaide.

The evaluation was constrained by the limited availability of relevant quantitative data, especially baseline data for the period prior to the introduction of the dry area.

Results

Overall, each of the objectives of the dry area have been realised to varying degrees, as discussed below.

A reduction in the incidence of public drinking in designated dry area locations

The evaluation found evidence that there has been a reduction in public drinking in the designated dry area locations.

Key informants (e.g., service providers, business operators, the public and residents) reported that the dry area had reduced the incidence of public drinking, particularly in Victoria Square, other squares, the North Terrace area and North Adelaide.

The quantitative data provided some support for these perceptions although it was more ambiguous. The level of apprehensions under the Public Intoxication Act do not seem to have been affected, although there has been a decline in the number of Aboriginal people apprehended under this Act.

The number of expiation notices issued for contravention of the dry area initially increased after the dry area trial commenced, but since June 2003 have declined to the levels seen prior to the trial. Whether this is due to a recent decrease in the number of persons offending or to changes in policing levels has not been determined.

Data pertaining to the number of persons arrested and processed through the Adelaide City Watchhouse indicated that over a six month period, from January 2003 to July 2003, the number of such arrests which were alcohol related decreased from 120 to 80. Again though, care should be exercised when interpreting this information because of the limited time frame surveyed.

The declaration was found to have had little effect on the long standing dry areas of Rundle Mall and the Hindley Street area.

A reduction in anti-social or criminal behaviour by public drinkers

Key informants stated that since the introduction of the dry area there had been a reduction in anti-social and criminal behaviour in designated dry area locations. They reported having observed a reduction in public drunkenness, begging, people congregating in groups, fighting, and disruptive behaviour generally. This reduction was most evident in Victoria Square.

These comments were confirmed by crime statistics data. These showed that following the introduction of the dry area there had been a reduction in the incidence of offences such as hindering or resisting police, indecent or offensive language, loitering and urinating in public

which came to police attention. Again though, these could be impacted by factors such as seasonality, policing activities, and public events.

Has there been an improved perception of public safety in the city?

The public survey found that the introduction of the dry area had increased people's feelings of safety in the city. This increase in perceptions of safety was especially marked in relation to Victoria Square: 40% of respondents said that prior to the introduction of the dry area they had felt unsafe in Victoria Square but since its introduction no respondents said they felt unsafe there.

The only exceptions to these findings were from residents and businesses on South and West Terraces respectively, which mark the borders of the dry area. Respondents at these locations believed that the declaration had improved public safety in the city and squares but had reduced feelings of safety for people on the dry area boundaries. They reported this was due to the displacement of public drinking to the parklands. These respondents raised the issue of extending the dry area's boundary.

Displacement of public drinkers to other areas of the city

It was found that the dry area had resulted in the displacement of public drinkers.

This occurred on two levels. First, itinerants and parklands' campers who came into the city to buy and then consume alcohol were no longer able to do so, with all their drinking now occurring in the parklands, in particular the west parklands.

The main displacement effect, however, was in relation to 'day visitors'. This refers to people who live in the Adelaide suburbs and travel (generally by public transport) to the city to meet friends and drink and then return to their homes in the evening. It was this group that made up the majority of public drinkers in Victoria Square. The evaluation found that this behaviour had ceased as a result of the dry area declaration, with these people no longer travelling to the city to drink. It was concluded that their public drinking had been displaced to the suburbs.

The evaluation found no evidence to support the view that drinkers who had frequented Victoria Square prior to the introduction of the dry area had been displaced to the parklands.

What has been the effect of the dry area on specific population groups, in particular Aboriginal people, young people and the homeless?

Key informants reported that the greatest impact of the dry area was on Aboriginal people, in particular by reducing their ability to congregate in Victoria Square, which was a historical and culturally significant meeting place. There were comments that the dry area was a racist policy that had been put in place expressly to remove Aboriginal people from Victoria Square.

Concerns were also raised that the apparent displacement of Aboriginal drinking to the suburbs had resulted in a concomitant displacement of the behavioural problems associated with public drinking (e.g., fighting/brawling, quarrelling and domestic violence) to the family environment, whereas pre dry area, such problems were visible and managed by service providers when the person was in the city.

Organisations such as the Aboriginal Sobriety Group propose several options to deal with this displacement, including the establishment of an alternative meeting place close to Victoria Square. An effective communication/education strategy was also suggested as a way of conveying the message to Indigenous people that they could still meet in Victoria Square but not consume alcohol there.

The dry area was found to have had relatively little impact on young people. There were anecdotal reports from service providers that as a result of the dry area there were fewer vulnerable young people coming to the city, however this could not be confirmed.

The dry area was also found to have had relatively little impact on homeless people. Service providers commented that it had resulted in the dispersal of homeless people through the parklands, which had affected service provision by making it more difficult to locate and manage clients. There were unsubstantiated reports that displacement to the parklands had been associated with increased violence against homeless people.

The impact of the dry area on service providers

Service providers reported the dry area had increased the demand for their services. These comments came principally from non-government service organisations located in the north west corner of the city. An examination of services' workload records found no supporting data to verify these comments. Some increases in service demand were identified, however these pre-dated the dry area. In particular, an examination of services' client data found no increase in the number of clients with alcohol abuse problems following the introduction of the dry area.

It was concluded that the dry area had a minimal impact on service providers.

Progress on the identification and implementation of services and strategies?

The evaluation found that progress has been made over the previous 12 months to identify and implement dry area service responses and strategies.

Initiatives and their implementation status are listed below:

- stabilisation facility – implemented
- improved pedestrian safety on West Terrace – implemented
- SAPOL strategies to reduce offending in and around licensed premises – implemented
- regular SAPOL meetings with licensees to reinforce responsibilities under the Liquor Licensing Act – implemented
- increased police patrols to the parklands – implemented
- appointment of an Aboriginal Community Constable - implemented
- establishment of a Mobile Legal Service – implemented
- provision of housing and intensive supervision for people with multiple, complex needs – implemented
- increased funding for City Homeless Assessment Support Team – implemented
- increased funding for Mobile Assistance Patrol – implemented
- memorandum of understanding between SAPOL and Aboriginal Sobriety Group – implemented
- in principle agreement between Department of Human Service and the Adelaide City Council about government-council priorities for human service planning – implemented
- additional funding for Multi Agency Housing Support Authority – implemented
- SAPOL implementation of Operation Shut Eye for at risk young people – implemented
- additional funding for Kumangka Aboriginal Youth Service – implemented
- establishment of inner city Visiting Health Service – under development
- Aboriginal detoxification facility and family centre – under development
- detention facility pursuant to the Public Intoxication Act - under development
- establishment of transitional accommodation - under development
- long term, supported accommodation for people with multiple, complex needs - under development
- improved procedures for the verification of Aboriginality - under development
- provision of emergency housing for Aboriginal people - under development
- Inner City Services Strategic Plan - under development
- RAH discharge protocols for intoxicated Aboriginal people - under development

- city watch house drug and alcohol referral service - under development.

The problems the dry area was set up to address are complex and multi-faceted. Therefore it is acknowledged that a number of the key service responses (e.g., visiting health service, transitional accommodation, Aboriginal detoxification and family centre) will have long implementation lead times.

Dry area scenarios

Four scenarios were developed to assist decision making about the future of the dry area. These were that the dry area:

- continue and is re-evaluated in 12 months time
- continue for another 12 months but then be allowed to lapse
- is expanded, to accommodate issues associated with South Terrace; West Terrace and the River Torrens environs
- is allowed to lapse at the end of October 2003.

Based on the evaluation findings, it was concluded that the most appropriate scenario was the continuation of the dry area and its re-evaluation in 12 months time. That re-evaluation should take the following form:

- analysis of offences and apprehensions associated with public drinking
- analysis of the implementation of initiatives and their effectiveness, including performance evaluation of the individual initiatives
- feedback and data from key informants using a planned process that commences at the beginning of the next 12 month period.

A decision should also be made about whether or not to include North Adelaide - this evaluation found public drinking was not a significant issue in this precinct.

Conclusions and Recommendations

Conclusions

These conclusions are based on the evidence provided in the attached evaluation report.

The dry area, having been in operation for nearly 24 months, has been shown to have:

- reduced the incidence of public drinking in designated Dry Area locations
- reduced the incidence of anti-social or criminal behaviour by public drinkers
- Improved the perception of public safety in the City of Adelaide.

The dry area has also:

- displaced some groups of public drinkers, in particular those who frequented Victoria Square, who have now largely stopped travelling from their homes in the suburbs to consume alcohol in public areas in the city
- been a catalyst for the establishment and implementation of programs for facilities and other initiatives to support public drinkers
- impacted differently on target population groups such as Aboriginal people, young people and the homeless

- shown that there is limited public knowledge about the dry area and its relative benefits for the Adelaide community.
- identified that there is an issue with the current boundary of the dry area that needs to be resolved, if it continues
- been regarded as unnecessary by some groups who believe that use of existing provisions in the Public Intoxication Act, the Liquor Licensing Act and the Summary Offences Act can obviate the need for a dry area in the City of Adelaide.

Recommendations

- 1 It is recommended that the Adelaide City Council seek a 12 month extension of the City of Adelaide dry area and that the Government endorse the application and that during this period the dry area be continuously monitored through the Dry Area Steering Committee using a combination of public surveys and data review.
- 2 It is recommended that a structural analysis of service and policy providers be completed to establish more effective funding models that focus on service outcomes and program performance.
- 3 It is recommended that service providers strengthen their communications with peak organisations represented on the Dry Area Steering Committee (i.e. ICAG and SACOSS) to ensure they have their views and opinions considered as part of future planning and strategy development and implementation.
- 4 It is recommended that consideration be given to enlarging the boundaries of the dry area so that it extends north to the River Torrens to include the area between the Morphett Street Bridge and Adelaide Bridge.
- 5 It is recommended that an education (marketing and promotional program) be designed and implemented to better inform stakeholders about the effects of the dry area.
- 6 It is recommended that the Dry Area Steering Committee be recognised for the initiatives achieved to date, given the complexities of achieving common understandings and agreements between providers.
- 7 It is recommended that the Dry Area Steering Committee continues to work on the initiatives it has identified to address the impacts of the dry area.

2. Project Requirements and Methodology

2.1 Objectives and Terms of Reference (Issues)

The objectives of this evaluation are:

- Has the implementation of the Dry Area achieved its intended Stage 1 and Stage 2 objectives?
- Have its effects been sustained over time?
- Have there been any unintended consequences (either positive or negative), and if so, what?

The evaluation also addressed the following:

1. Has there been a reduction in the incidence of public drinking in the Adelaide City Council Dry Area other than in licensed premises?
2. Has there been a reduction in the incidence of anti-social or criminal behaviour (such as assaults, good order offences and property damage) directly attributable to individuals drinking in the Dry Area (excluding as far as possible, criminal behaviour associated with drinking in licensed premises)?
3. Has there been a change in the number of people within the Adelaide City Council area who come into contact with the criminal justice system for alcohol related behaviour (differentiated according to age, gender and Indigenous identity)? If so, to what extent could this be attributed to the operation of the Dry Area, or to the consumption of alcohol in locations outside the auspice of the Dry Area?
4. Has the Dry Area caused displacement of public drinkers and associated groups to other areas? If so,
 - What has been the extent of that displacement?
 - To which areas have the public drinkers and associated groups been displaced?
 - What have been the effects (either positive or negative) of that displacement?
5. Has the Dry Area led to a change in the public's perceptions of safety when frequenting the city and/or to a change in their use of city space?
6. What has been the impact of the Dry Area on those specific groups, such as business people, young people, Indigenous groups, homeless individuals, transport drivers (taxi, bus, tram) and hospitality workers, who may be directly impacted by the Dry Area?
7. Have the new services and safety initiatives intended to support the dry area been implemented and if so, to what extent? Have they helped improve service delivery to individuals who abuse alcohol, and if so, in what ways and with what results?
8. What has been the impact of the Dry Area on those services that supported/interacted with public drinkers before the Dry Area was established?
9. Have the further strategies and services required to remove the need for a Dry Area been appropriately identified and implemented?

Geographical variations in the impact of the Dry Area will also need to be considered: in particular, whether there are different outcomes/patterns of behaviour in:

- the newly declared dry areas, compared with the long standing dry areas of Rundle Mall, Hindley Street and adjacent streets; and
- the North Adelaide Dry Area compared with the central city area.

When considering the questions outlined above, the evaluation should also have regard to the extent to which the Adelaide Dry Area accords with State Cabinet approved guidelines, which stipulate that where a dry area is likely to impact on specific population groups, the Dry Area must:

- Defuse, not exacerbate, tension between different groups in the community;
- Entail demonstrably less involvement in the criminal justice system ... than other potential options and

- Occur only in conjunction with a broad local strategy that addresses the underlying social factors, including, where appropriate, preventing the hazardous use of alcohol and facilitating the use of services, which provide appropriate care and rehabilitation for those using alcohol.

2.2 Approach

The general approach applied in this evaluation was based on a number of steps that are sequential and organised to meet identified requirements. The steps were:

- Project Initiation.
- Identification, collection and consolidation of quantitative data
- Analysis and consultation on quantitative data
- Identification, initiation and conduct of qualitative processes
- Analysis, consolidation and outcomes from qualitative data
- Comprehensive Evaluation and Report

As a result of this approach, the evaluation addresses each step through the techniques provided below, and applies to the data gathered and analysed in this project. Evaluation Technique that provide a comprehensive insight into all relevant outcomes were applied. Two principle evaluation outcomes were focused on. These were.

- Providing clarity to the perceptions, views and expectations of a wide range of interest groups (stakeholders), examples being, public drinkers, business owners, and the public; as well as presentation and analysis of relevant data and
- Responding effectively to the terms of reference.

To meet both requirements has required this evaluation document to be framed in a way that

- Firstly, meets the stakeholders' needs to be recognised, their views acknowledged, and facts given, and data presented and analysed.
- Secondly, provides debate and conclusions on the Objectives and Terms of Reference.

The following table indicates how the various components inform each other in this evaluation.

Stakeholder	Public Drinkers, Youth Homeless	Government Agencies	Service Providers (Indigenous & non- Indigenous)	Residents	Public	Business	Public Transport Providers	SAPOL Data Offences Recorded	Other Data
Term of Reference (as specified and numbered in 2.1 above)									
Issue 1	*	*	*	*	*	*	*	*	*
Issue 2				*	*	*	*	*	
Issue 3								*	*
Issue 4	*	*	*	*	*	*	*	*	
Issue 5				*	*	*	*		
Issue 6	*		*	*	*	*	*		*
Issue 7		*	*						
Issue 8			*						*
Issue 9	*		*	*	*	*	*	*	

2.3 Methodological Processes

To ensure each of the components meets the Terms of Reference and addresses the issues requires the application of specific methodological techniques which are shown in the below table.

Technique	Public Drinkers (Indigenous, non-Indigenous, Youth)	Government Agencies and Units (n=28)	Service Providers non-Indigenous (n=15)	Service Providers Indigenous (n=14)	Residents (n=25)	Public (n=110)	Business (n= 14)	Public Transport Providers/ Drivers (n=20)	SAPOL Data Offences Recorded	Other Data
Survey Instrument						*				
Structured question set – Telephone interview					*					
Structured question set – Face to face interviews	*	*	*	*			*			
Quantitative Data									*	*

Note: The number of individuals, groups or organisations interviewed are shown as 'n'. In regard to organisations, the actual number of people interviewed was significantly higher than the number of organisations, due to interviews being more group based rather than individuals, and in some cases more than one interview was conducted with that organisation or unit.

The above techniques were agreed with the Dry Area Evaluation Steering Committee and applied. However, applying these techniques rigidly was restricted, in some areas, as shown below.

Interviews with public drinkers – This group only sought to respond to general questions, or questions that were of specific interest to them.

Face to face interviews – The structured interview became the basis of discussion, and a prompt for questions and answers, but was not able to be applied rigorously. This often occurred where face to face interviews were conducted. Examples being where:

- Time constraints were placed on the interview by the interviewee(s), and/or
- The number of people present at the interview caused the process of information gathering to become more like focus group discussions rather than a question and answer based interview.

2.4 Chapter Structure

Each chapter is structured around a specific theme. Excluding early chapters of project requirements, methodology and background the remaining chapters address

- The Targets of the Dry Area
- Government Agencies – Policy and Service Providers
- Non-Government Agencies – Policy and Service Providers
- Public
- Residents
- Business Operators
- Impact on Crime Trends
- Strategies, Policies and Actions – Implemented and Proposed
- Responses to the Terms of Reference
- Scenarios and Impacts
- Conclusions and Recommendations

Within each chapter the following general structure applies.

- Purpose and Focus - identifies the main areas explored and evaluated within the chapter.
- Identification, consolidation, and interpretation of views and issues.
- Chapter conclusion.
- Evaluation conclusions.

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3. Background

3.1 Relevant History of the Adelaide Dry Area

3.1.1 General

The current Adelaide Dry Area Trial controls were operational from 29 October 2001 when the first Dry Area Trial was imbedded in regulation. This occurred through the Adelaide City Council seeking approval from the Liquor Licensing Commissioner to declare "all city public roads and squares" a dry area for a trial period of 12 months.

In October 2002 the Government announced that it had approved an application by the Adelaide City Council for the Dry Area to continue for an additional 12 months.

This report is to provide an evaluation of the trial period of the Dry Area and to address the key questions

- Has the implementation of the Dry Area achieved its intended aims?
- Have its effects been sustained over time?
- Have there been any unintended consequences (both positive and negative), and if so, what?

3.1.2 Liquor Licensing Act

The Liquor Licensing Act is the enabling legislation under which the Adelaide Dry Area is regulated. The Liquor Licensing (Dry Areas - Long Term) Regulations 1997 contain the provisions for the Adelaide Dry Area. Schedule 1 of the Regulations prescribes the period for the current trial as "continuous until 29TH October 2003" with the extent of the prohibition being "the consumption and possession of liquor are prohibited" within an area described within the regulation.

3.1.3 Public Intoxication Act

An associated Act, which has implication for the Adelaide Dry Area Trial, is the Public Intoxication Act, 1984. The Public Intoxication Act provides for the apprehension and care of persons found in a public place under the influence of a drug or alcohol; ...and to provide for other incidental matters. Where a person is apprehended under this Act by a member of the police force or an authorised officer, the person apprehended shall be taken as soon as practicable to the person's place of residence, to a place approved by the Minister, a police station, or to a sobering up centre for admission as a patient.

3.2 Previous Reports and Evaluations

The Adelaide Dry Area Trial commenced in October 2001. Prior to the trial, several independent reports were completed and formed a background regarding public feeling¹ towards the Dry Area, as well as a history and an account of recent developments² regarding dry areas in other locations. During the first 12-month trial period, it was expected that an evaluation of the Dry Area would be undertaken and inform stakeholders of the long-term directions that should be considered regarding Adelaide's Dry Area.

The first Dry Area evaluation³ was inconclusive and unable to provide decision makers with sufficient knowledge to form an opinion about the direction that needed to be taken from October 2002. As a result, a 12 month extension to the original trial period was approved until October 2003. This extension was also approved on the basis that an evaluation of the trial period from October 2001 to October 2003 would be completed to inform decision makers of the options available to them regarding the future of the Dry Area beyond October 2003.

¹ McGregor Tan

² Hassell

³ Social Options

3.3 Qualitative Consultations

The evaluation program was focused around a high level of consultation with individuals, groups and organisations to ensure broad representation of the community view. The evaluation process received and took into account the views of:

- State Government Agencies
- Local Government Agencies
- Federal Government Agencies
- Non Government Agencies
- Service Providers (inc Women, Youth and Indigenous)
- Commercial Associations
- Businesses and Traders
- Public Transport Operators (Tram Drivers and Conductors, and Bus Drivers)
- Police Officers
- Clients of Service Agencies
- Residents within CBD and North Adelaide (telephone interviews)
- Public located within CBD and North Adelaide (face-to-face street survey)

It was evident through the process of qualitative consultation that there were two types of organisations; these being

- Policy, strategic development or supervisory organisations and
- Physical service provision organisations.

3.4 Quantitative Data

A key requirement of this evaluation was the inclusion of relevant, accurate, consistent and effective data that provided knowledge and substantiation of the impact and effectiveness of the Dry Area.

Whilst this is an appropriate requirement, the ability to gain access to data that was defined in the above terms was dependent on the type of data collected by relevant organisations. Organisations which collected data on a regular basis have generally done so to meet their own performance reporting and/or funding requirements.

Data provided to this evaluation were generally associated with the other information needs of the organisation and therefore the use of these data for the purposes of evaluating the impact of the Dry Area must be viewed cautiously, recognising the data were collected for other purposes.

Nevertheless, in recognition of this absence of relevant data SAPOL agreed (in conjunction with the Office of Crime Statistics and Research) that supplementary information would be collected from December 2002 to identify the number of arrests in the Adelaide Local Service Area (LSA) where alcohol was a factor.

3.4.1 SAPOL (Apprehension and Ancillary Reports)

SAPOL data made available for this evaluation comprised

- Relevant expiation unit record data for the Adelaide LSA, . Relevant records relate to infringements under the Liquor Licensing Act.
- Specific data on persons arrested and processed by the City Watch House, where alcohol was reported as a factor in the apprehension.
- Offences recorded by SAPOL that informed changes in the level of offending over time within the Adelaide CBD.

3.4.2 Drug and Alcohol Services Council (Public Intoxication Act)

DASC made available for this evaluation data relating to

- Apprehensions under the Public Intoxication Act. Whilst these data are collected by SAPOL, DASC has legislative responsibility for , maintenance and reporting of these data, which it has done so for the past 20 years.

3.4.3 Non-Government Organisations (NGOs)

Primary amongst these organisations are those NGOs that provide direct services to people who are marginalised with the Adelaide CBD generally associated with poverty, homelessness, relationship dysfunction, various forms of substance abuse and mental illness. A limited number of organisations have not been able to provide data (at any level) due to inadequate resourcing, and data collection not being a core activity. Some data were provided through the organisation's annual reports; some provided data verbally, and rarely, some data was provided at a detailed level. Many NGOs may collect data for other service areas but little was considered relevant to inform this evaluation.

- DASC was able to provide program information, outcomes, trends and resource information associated with several NGOs that were required to provide such data to enable DASC (DHS) funding to continue.

3.4.4 Other Data Sources

Data were also obtained from the SA Ambulance Service, the Adelaide Hilton, the Adelaide Convention Centre and the Royal Adelaide Hospital.

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4. Target Groups

4.1 Purpose and focus of this chapter

The purpose and focus of this chapter is to identify, assess and evaluate the experiences of a sample of public drinkers (Indigenous and non-Indigenous) and vulnerable youth, who may or may not be homeless. Their views were obtained through interviews and evaluated in relation to the project Terms of Reference. The main areas explored and evaluated were:

- The impact of the Dry Area on their drinking patterns.
- Whether there were any shifts in location as a result of the Dry Area.
- Whether Indigenous and non-Indigenous drinkers see the Dry Area as being discriminatory and/or racist.
- Whether the Dry Area has impacted on their mobility (ease of moving around or accessing the Adelaide Dry Area) in the Adelaide CBD.
- Whether the impact on youth has caused them to change their mobility and behaviours.
- Whether homeless people (which may include youth and/or public drinkers) have been impacted by the Dry Area in ways that have caused them to change their mobility and their behaviours in Adelaide.

4.2 Indigenous Drinkers

This evaluation of the Adelaide Dry Area Trial recognises the concerns that have been raised by Indigenous people over the past two years, regarding the Dry Area and the effect that it has had on Indigenous people.

The impact of the Dry Area on Indigenous people has been a major point of debate since the Dry Area was implemented. This evaluation will identify the changes that have occurred for Indigenous people over the past two years, in respect of the Dry Area.

To gain knowledge of the impact of the Dry Area on Indigenous people required interviews to be completed with identified Indigenous people who were able to provide details on what was happening in Adelaide and the Parklands prior to the imposition of the Dry Area, and the changes that have occurred up to now. People who provided input into this evaluation are registered as interviewees in the next section.

4.2.1 Methodology

The planned methodology was to consult with groups and individuals that were recognised as being mainly in Victoria Square, West Tee, North Tee, Hindley St and South Tee before the Dry Area was established. Face-to-face interviews were held with each interviewee but was dependent on the time that they had available and the depth of discussion that he/she wished to undertake.

4.2.2 Indigenous Drinkers' Interviews

Information regarding Indigenous drinkers was obtained from

Group/Representation	Function
Annie Kollmatie (formerly Allen Bell) House	Indigenous Women's Accommodation
West Parklands Group	Meeting of West Parkland Group Representatives and Service Providers at West Care
Cyril Lindsay Hostel	Services for Indigenous Men
Leader of Camp Group	Meeting at Karpandi Women's Centre
West Parklands and Group/Individual Alcohol and other Substance Users	Several visits and meetings with individuals and groups at Karpandi and in the West Parklands
Kauma Elders	Viewpoint regarding the Dry Area and future directions

Approximately 35 Indigenous people were contacted .

Indigenous groups and individuals at several locations provided the principal commentary regarding the Dry Area and how it impacts now.

A description of each group interviewed is provided below

- Drinkers Group 1 – West Parklands. This group comprised 5 Anangu Pitjantjatjara males, 1 female.
- Drinkers Group 2 – West Parklands. This group comprised 6 Anangu Pitjantjatjara males
- Cyril Lindsay House – (South Terrace) – 2 males
- Annie Kollmatrie House – (Richmond – Women's shelter) 2 females
- Kauma Elders – 2 (1 female, 1 male)
- Leader of Camp Groups – 1 female
- Members of Camp Groups – Karpandi/Westcare 16 comprising 13 Indigenous; 13 non-Indigenous

It should also be recognised that managers and staff from Indigenous organisations provided views and comments regarding Indigenous drinkers. Where appropriate their comments have been used to provide additional input into this chapter.

4.2.3 The Environment for indigenous Drinkers before the Dry Area

Where did the Indigenous drinkers reside?

Before the Dry Area was imposed, the majority of Indigenous drinkers came from camps located in the West Parklands, or from the suburban areas of Adelaide.

The camps in the West Parklands were divided into groups of campers, with 1-2 groups being Indigenous and 1-2 being non-Indigenous (discussed separately). From time to time individuals would mix between the groups. Over time the membership within each group would change.

- Temporary changes would occur when people travelled from rural and remote locations to Adelaide for medical attention, or they joined a group for a short stay as they moved through Adelaide as part of their journey. (Those who were in Adelaide for medical or similar purposes may or may not have had access to temporary accommodation through the Aboriginal Hostels Association).
- Permanent changes would occur when a person lost their access to housing, were escaping from domestic/family based problems, or had a desire to join other members of the camp who were there to make a political statement regarding the need for appropriate services and housing for Indigenous people. Some of these campers have stated directly, or advice was provided, that indicated they had accommodation elsewhere and had made a choice to be in the camps. People may have left the camps as a result of permanent resettlement to suburban accommodation (through the SA Housing Trust, The Aboriginal Housing Authority or Aboriginal Hostels), or to rural or remote locations. The overall number of campers would also be affected by police and Adelaide City Council activities.

Indigenous membership to these camps varied depending on the time of year but essentially, 20-40 Indigenous people were regular campers with others there temporarily.

The Indigenous people who came to Adelaide from suburban areas generally would travel by public transport (predominantly train) to the Adelaide Railway Station. Some may have travelled from suburban areas by private transport, through family and friends. A total of 20-40 Indigenous drinkers would visit Adelaide from suburban locations.

Where in Adelaide did public drinking occur?

The principal locations for drinking were Victoria Square, West Parklands (in the camps and separately), South Parklands and locations along North Tee.

However, during the day some drinkers would change locations and move to other squares of Adelaide, with their preferences dependent on the relationships between group members and the need for them to access welfare and other services located around the City.

Of all the locations, the main two were Victoria Square and the West Parklands. Victoria Square was popular for several reasons. It was recognised historically as a meeting place for Kurna people, it was the centre of Adelaide and attractive for that reason, and it was adjacent to facilities such as toilets, shops, a liquor outlet and service providers. The West Parklands was a key location because of the camps and also proximity to other facilities such as welfare providers and a liquor outlet.

Who drank in the locations identified?

Victoria Square - Public drinkers in Victoria Square generally arrived by public transport from the Adelaide Railway Station and were largely the people who came from suburban areas. Public transport drivers confirmed this mobility. The drinkers would divide into 2-3 groups in the Square based on friendships and cultural ties.

West Parklands - The West Parklands was a major drinking venue mainly for those who lived in the camps. Additional people would, from time to time, join these drinkers during the day from shelters or squats but this was limited. Drinking would occur in the camps themselves or in adjacent locations such as along West Terrace. Whilst it was suggested many campers from the West Parklands would frequent Victoria Square, there is no evidence of this occurring other than at a minor level.

South Terrace - Drinkers at this location (approximately 6) arrived predominantly from the camps on West Tee. They were either in this location to access welfare services in Hutt St during the day or to meet friends who were staying in temporary accommodation facilities (eg Cyril Lindsay Hostel). They also had access to a liquor outlet during the day whilst in this location.

North Terrace - Drinkers at this location (Government House and the War Memorial) were generally members of the Victoria Square group and were in this location during the day, principally to make political statements on a range of Indigenous issues.

When did they drink in these locations?

Victoria Square - Reports from drinkers and observations offered by service organisations suggest that the drinkers would arrive on a daily basis and return to their homes in the evening.

West Parklands - Drinking occurred in this location continuously as it was part of the camp environment.

South Tee and North Tee - These were daytime drinking venues and they returned to the camps or to their home at night (except for those who were making political statements at the time).

How did they return to their homes?

Indigenous people who were campers were already located in the proximity of the camps or they returned from the South Parklands.

The Victoria Square groups would at night use the Beeline bus to return to North Tee and from there obtain transportation by accessing the Mobile Assistance Patrol (MAP) provided by the Aboriginal Sobriety Group or seek assistance through friends or use a train. The most popular means of returning home was MAP.

What issues occurred in the Drinking Groups?

As drinkers became more intoxicated, incidents of arguments, fighting, swearing and poor behaviour became more pronounced. Whilst this tended to remain within the group or between groups there would be a spillit over into the wider public and issues of begging and harassment would occur. For those groups that were not visible, such as those in the West Parklands, the level of fighting was suggested to be much the same as in other groups, but was largely unreported, along with other behaviours including rapes.

Temporary increases in Indigenous drinkers - Pension Week and Group Barbecues

Whenever pension week occurred (particularly on the Thursday of that week) the number of people located in Victoria Square would double to 40-80 as more people would travel from suburban areas to join the regular drinkers.

In addition this number would also be affected by frequent barbecues provided by the Aboriginal Sobriety Group in Victoria Square and by the Aboriginal Drug and Alcohol Council in the West Parklands. Barbecues in Victoria Square would increase the number of Indigenous people to approximately 60 whereas the number attending the barbecue in the West Parklands would regularly be 40-50 but at times reached 100.

The additional people who attended the barbecues in either Victoria Square or West Tee were not drinkers but more often family members of the drinker (wife, and children).

Summary – The Pre Dry Area Environment for Indigenous Drinkers

Indigenous drinkers in the City of Adelaide were essentially two different groups: those who travelled from suburban areas of Adelaide and located themselves mainly in Victoria Square, and those who lived in camps in the West Parklands and generally remained in that environment for daily living and drinking.

The number of drinkers before the Dry Area was imposed was generally 20-40 people in Victoria Square with this number changing whenever Pension week occurred, particularly the Thursday of that week, and whenever a barbecue was provided which would increase family membership to the groups to approximately 60. The West Parklands Indigenous campers, who generally numbered 20-40, would increase to 40-50 and sometimes up to 100 whenever a barbecue occurred. The number of campers would also be affected by the impact of winter.

4.2.4 Impact of the Dry Area on Indigenous Drinkers

Who are the drinkers interviewed?

They comprise drinkers who reside in camps in the West Parklands and drinkers who travel into Adelaide from suburban areas.

What impact has the Dry Area had on their mobility?

Indigenous drinkers have stated that they were unable to drink within the City of Adelaide, because of the Dry Area rules and the possibility of being identified by the police and subsequently being held by the police or taken to the Sobering Up Unit.

Whilst the Dry Area is in place, the drinkers have no option but to drink outside of the Dry Area, now mainly in the West Parklands.

How many drinkers are now involved?

Before the Dry Area the number of drinkers was 20-40 in the West Parklands and 20-40 in Victoria Square, subject to the variations discussed earlier. The number of people who are drinkers in the camps has remained at 20-40 (subject to environmental factors), but the number of people travelling to Adelaide from suburban areas has reduced to less than 10.⁴

What is the impact and abuse of other substances?

Drinkers who are members of the camp and several service providers have commented on the impact of other substances abuse. It has been suggested that the composition of the drinkers has changed for both the Indigenous and non-Indigenous camp members. These changes have been due to the introduction of drugs other than alcohol. This has caused people to be more aggressive and in turn has led to more hostility within the camp environment, that this has led with fights between camp groups and significant levels of both reported and unreported injuries. Personal safety has been raised as an issue within the camps. Some of

⁴ It is recognised that discussions with service providers have provided a wide range of estimates of the number of people involved.

this abuse and violence has spilled over into locations where welfare providers offer their services.

What are the attitudes now towards the Dry Area?

Whilst interviewees commented that on the West Parklands was a pleasant place to drink and it was close to a liquor outlet, some members of the groups were also keen to re-access Victoria Square.

Comments regarding Victoria Square tended to be from those drinkers who had identified themselves as now having to travel to the West Parklands from suburban areas. That is, they had once been drinkers in Victoria Square but now they have no choice but to drink in the West Parklands. The same suburban group members were generally those who also commented on the difficulty of crossing West Tee to make additional drink purchases.

Some drinkers (particularly those interviewed at Karpandi) from the West Tee camps were more assertive in their views about not being able to drink in the City. Some were keen to see the Dry Area removed because it interfered with their mobility, whilst others stated that the Dry Area had no impact on them as they will (and do) drink where and when they like.

What views have been offered?

Indigenous drinkers, who were members of the West Parkland camps, offered two points summarised below.

1. There was a strong view that Whitmore Square should not be within the Dry Area. This was suggested on several occasions. The main reason given was it was close to a range of service providers which the drinkers would like to access during the day.
2. They were disappointed that they couldn't meet in Victoria Square, as it was the centre or hub for Indigenous people to exchange names and addresses and find family and friends through this exchange.

Whilst point 1. above is understandable from the viewpoint of the drinker who is accessing services and still wants to drink point 2 is a contradiction. Based on the activities of camp drinkers prior to the Dry Area there was no strong desire to frequent Victoria Square.

Summary – The Post Dry Area Environment for Indigenous Drinkers

The Dry Area has impacted on the number and location of Indigenous drinkers who frequent the City of Adelaide, but only to the extent discussed below.

The drinkers who frequented Victoria Square have reduced in number (by remaining in suburban areas) and have moved the location in which they drink. The limited number who now visit the West Tee area are satisfied with their location but are also keen to return to Victoria Square.

The drinkers who are campers in the West Parklands have not changed in their number or their activities since the Dry Area was implemented (except where policing and Adelaide City Council activities impact on the camp environment).

4.3 Non-Indigenous Drinkers

To gain knowledge of the impact of the Dry Area on non-Indigenous people required interviews to be completed with non-Indigenous people who were able to provide details on what was happening in Adelaide and the parklands, prior to the imposition of the Dry Area, and the changes that have occurred up to now. People who provided input into this evaluation are registered as interviewees in the next section.

4.3.1 Non-Indigenous Drinkers' Interviews

Information regarding non-Indigenous drinkers was obtained from

Group/Representation	Function
West Parklands Group	Meeting of West Parkland Group Representatives and Service Providers at West Care
West Parklands and Group/Individual Alcohol and other Substance Users	Visit and meeting with individuals and groups at West Care

Approximately 10 non-Indigenous males were contacted within this group.

It should be recognised that managers and staff from support organisations provided views and comments regarding non-Indigenous drinkers. Where appropriate their comments have been used to provide additional input into this chapter.

4.3.2 The Environment for Non-Indigenous Drinkers before the Dry Area

General

Non-Indigenous drinkers and Indigenous drinkers, particularly those in the West Parklands, shared similar experiences and issues. To this extent the details in this section relate to those areas where a variance occurs, or expands on the information provided in the Indigenous drinkers section.

Where did the non-Indigenous drinkers reside?

Before the Dry Area was imposed, the majority of non-Indigenous drinkers came from camps located in the West Parklands. The camps in the West Parklands were divided into groups of campers, with 1-2 groups being non-Indigenous and 1-2 being Indigenous (discussed separately). From time to time individuals would mix between the groups. Over time the membership within each group would change, with itinerants joining the group as circumstances required. That is, many itinerants found that moving into the West Parklands and possibly joining the camp environment was a simple way of joining a group without a financial impost.

In addition to the camp drinkers there were numerous individuals (solo drinkers) who were not involved in group activities and may not have been involved in the West Tee camps. These solo drinkers had no fixed place of stay and were often those found on park benches and in building recesses in the CBD. Many of these solo drinkers were also users of night shelters and other places to enable them to sleep safely from other, more aggressive public drinkers. They also used West Terrace Cemetery shelters and other recesses as a place to sleep.

At another level there were non-Indigenous public drinkers who may live in low cost accommodation, boarding houses and similar forms of accommodation. Providers of this form of accommodation would often have rules that would limit or ban drinking on the premises. As a result these people would elect to drink publicly.

The number of non-Indigenous drinkers in the camps and solo drinkers roaming Adelaide are difficult to estimate. There have been wide ranging estimates of up to 50 in the West Parklands camps and similar numbers of solo drinkers on the streets or living rough. These variations appear to reflect the focus that service providers, with the numbers their views of service provision levels.

Where did they drink?

Camp-based non-Indigenous drinkers would drink in the West Parklands in proximity to the camps or wander the streets of Adelaide, generally moving between welfare provider locations. Whilst interviewees did not identify clearly other locations, Whitmore Square was cited on occasions as a place of interest for drinkers. Views expressed were not clear but it would seem their focus on Whitmore Square was due to the range of welfare services in proximity to the Square. Certainly, comments from other sources (public, residents and businesses)

viewed (on balance) Whitmore Square as an unsafe area because of the perceived high levels of public drinkers and intoxicated people.

Solo public drinkers generally would drink wherever the circumstances suited them.

There was a high presence of public drinkers in the Adelaide Central Market and associated Plaza. They created significant difficulty (fighting, swearing, urinating, stealing, harassing and begging) for businesses and customers in the market and plazas. There was a combination of public drinking and the more obvious drunkenness.

The circumstances surrounding these drinkers is unclear to the extent that there were non-Indigenous drinkers who were solo and also from the camps on West Tee. The comments received indicate a mix of the two but probably focused more on the solo non-Indigenous drinker. It should also be recognised that many of the incidents in the market environment were also the result of public drinkers who were using Victoria Square as their drinking venue.

What was happening in the Camps?

At one level the camp environment was seen by non-Indigenous and Indigenous people located in the camps as a group of like-minded and like positioned people. That is, it is claimed there was a strong affinity between the groups in the camps. However, as the level of alcohol consumption increased over a day, the level of animosity between groups (often based on gender, relationships or ethnicity) would increase, culminating in fighting, stealing and abuse. It is claimed that non-Indigenous people living in the camp environment were often the catalysts for abuse and fights in the Parklands. Whilst this has been reported anecdotally, there is no strong evidence to support or refute this view.

Summary – The Pre Dry Area Environment for Non-Indigenous Drinkers

Non-Indigenous drinkers in the City of Adelaide were comprised of groups within the West Parklands camps, individuals who may be in low cost accommodation and solo drinkers who were living rough.

The number of drinkers before the Dry Area was imposed is difficult to define but from comments offered could have been in the proximity of 50 people in the West Parklands, with a further 50 roaming the streets of Adelaide as largely solo drinkers.

Solo drinkers were vulnerable to abuse from other drinkers because they were alone and therefore easier to prey on for material items. Solo drinkers would tend to keep away from the camp environment because of their vulnerability and move around Adelaide and North Adelaide to escape the potential harm to them. Access to shelters and low cost accommodation was sought if available. Drinkers in the camps generally stayed in the camps or would walk to the Whitmore Square area to access the various welfare services (most of which are on the western side of Adelaide CBD).

4.3.4 Impact of the Dry Area on Non-Indigenous Drinkers

Who are the drinkers interviewed?

They comprise drinkers who reside in camps in the West Parklands or accessing low cost accommodation.

What impact has the Dry Area had on their mobility?

Non-Indigenous drinkers have stated that they were unable to drink within the City of Adelaide, because of the Dry Area rules and the possibility of being identified by the Police and subsequently being held by them or taken to the Sobering Up Unit.

Whilst they recognised the intent of the Dry Area, there is a level of angst regarding the Dry Area as it stopped them from freely accessing areas of Adelaide where they prefer to drink publicly.

How many drinkers are now involved?

This is a difficult estimate to provide due to the wide range of views expressed by the drinkers and the service/welfare providers. Generally it could be likened to an amorphous mass that

continually changes shape and composition. Nevertheless, discussions have suggested that there has been little change in general levels in the camps since the imposition of the Dry Area. This number does vary over the course of a year, based on the level of itinerants who are passing through, and the level of policing by SAPOL and the Adelaide City Council.

Those who were solo drinkers before the Dry Area was imposed still exist in the Adelaide CBD. Comments received from service agencies and businesses have stated that there are a "small number" roaming the street of Adelaide and generally sleeping at night in office buildings and hotel alcoves. One accommodation provider stated that they move a small number of people out of their alcoves most mornings. It was also suggested that the overall numbers are less now than before the Dry Area. This was attributed to lifestyle impacts (that is, they have died through a combination of age, health and climate).

What was the impact and abuse of other substances?

Comments for this item are similar to those shown for the same item in the Indigenous drinkers section.

However, an additional comment is also offered. It was evident through discussions with interviewees that alcohol was a base substance of abuse and was being used as a mask for personal issues, such as mental health, relationships, finance and employment. It was also evident that alcohol was a substance of choice but that for many non-Indigenous (and Indigenous) people other substances had a higher priority for them in terms of access and consumption. Several interviewees were more concerned about access to illicit drugs of choice rather than the Dry Area and its restrictions on alcohol consumption. The impression gained through discussions with interviewees and other welfare and service agencies was that illicit drug access and use was a more significant issue to be concerned about than issues associated with the Dry Area.

What are the attitudes now towards the Dry Area?

Interviewees provided contradictory and polarised views about the Dry Area. Some wanted to see the Dry Area expanded to embrace all of the Adelaide LGA. Those who wanted it expanded, however, also wanted to see Whitmore Square excluded to allow public drinking. Others (as stated in the Indigenous section) wanted it abandoned because it interfered with their mobility, whilst others stated that the Dry Area had no impact on them as they would (and do) drink where and when they like.

Generally there was no consistency in the views expressed or the reasons for those views.

What views have been offered?

Non-Indigenous drinkers offered two points (in addition to the views cited above) that were not necessarily a comment on the Dry Area but more about their desires and expectations.

1. Access and acceptance into low cost accommodation was identified on several occasions as an outcome being sought.
2. To support low cost accommodation and to lift self-esteem, there was also a desire to earn an income through regular employment.

Summary – The Post Dry Area Environment for non-Indigenous Drinkers

The Dry Area has not had a significant impact on the number and location of non-Indigenous drinkers who frequent the City of Adelaide.

Those drinkers who stay in camps have not been affected as they have continued to drink in that environment. The most obvious impact has been their inability (as suggested by drinkers) to access Whitmore Square for drinking.

Solo drinkers have reduced in numbers, but still roam across Adelaide, avoiding detection wherever possible.

4.4 Youth

To gain knowledge of the impact of the Dry Area on youth required interviews to be completed with young people who were able to provide details on what was happening in Adelaide prior to the imposition of the Dry Area, and the changes that have occurred up to now. People who provided input into this evaluation are registered as interviewees in the next section. It should also be recognised that the focus was on vulnerable youth; that is, on youth who are at risk through breakdown in family/relationships, drug and/or alcohol abuse, and/or who are involved in challenging behaviours.

4.4.1 Youth Interviews

Information regarding young people was obtained from

Group/Representation	Function
Young people	Meeting at St Stephens Church Hall with youth involved in JET program through the Service to Youth Council
Young person	Karpandi Women's Centre

It should be noted that managers and staff from support organisations (eg Hindmarsh Centre, Kumangka Aboriginal Youth, St John's Youth Service and Inner City Youth Service) also provided views and comments regarding youth drinkers. Where appropriate their comments have been used to provide additional input into this chapter.

4.4.2 The Environment for Vulnerable Youth before the Dry Area

Where did they live

Vulnerable youth were located both within the Adelaide CBD and living in suburban areas. Those who lived in Adelaide generally were in squats, in low cost accommodation or in emergency short term accommodation to provide them with a safe place.

A significant number of vulnerable youth living in suburban locations would use public transport to access Adelaide to meet up with peer groups.

How many were there

The number of vulnerable youth in Adelaide prior to the Dry Area has been difficult to identify. Discussions with the primary youth service providers have only been able to reveal that there are fewer now than before the Dry Area impositions on youth service levels. (Additional comments are included in the Service provider section of this document). Statistics are not maintained on a consistent and purposeful basis.

Where did they meet

The most dominant meeting location for youth was Hindley St and areas associated with that locale.

Rundle Mall was also important as a meeting place.

What did they do

Youth generally enjoyed the company of their peers. The groups would generally have a well defined view of themselves and peer group pressures would dominate what individuals could do. Life generally revolved around the street scene.

Alcohol was commonly used, with vulnerable youth preferring to buy their drinks and not stay in the vicinity of licensed premises. Many were aware of their own vulnerability and kept well away from adults who may prey on them.

Whilst alcohol was common it was not exclusive. It was mixed with other drugs.

Where did they go after drinking

Many vulnerable youth may have accessed youth welfare services, either via the intervention of youth workers/street workers or by seeking out the services themselves. These services

would include detoxification/sobering up, crisis intervention and and safe place provision that helped them to escape harassment, abuse and exploitation.

Other young people would return to their squats or to family/friend's accommodation.

4.4.3 Impact of the Dry Area on Vulnerable Youth

Who were the youth interviewed

They comprised a combination of young people who were accessing a Job Placement Employment and Training Program through the Services to Youth Council and were also located at Karpandi / West Care.

How did the Dry Area impact on Young People when the Dry Area was announced

Many young people who came to Adelaide before the Dry Area and located themselves in Hindley St or Rundle Mall were pushed to the fringe areas of Adelaide. Youth service organisations indicated that youth immediately re-located to areas such as the Torrens Parade Ground and the West Parklands.

It has been suggested that this was a highly volatile change, particularly for youth who elected to move into the West Parklands environment (either during the day only or to stay as a camp member). It is claimed that some camp members saw them as vulnerable and easy victims for abuse, whereas other camp members took a protective stance towards these young people. As a contrary viewpoint some young people were also the perpetrators of abuse as they were seen as having the strength individually (or in numbers) to harass older camp members for alcohol and drugs.

How does the Dry Area impact now?

The above location changes still remain and have been validated by young people and those involved in camps in the West Parklands. Nevertheless, young people also claim that the Dry Area has not impacted on their drinking behaviours and their desire to be in Adelaide to meet up with friends.

It is claimed by service providers and young people that there is very little interaction between vulnerable young people in Adelaide and adult public drinkers, irrespective of whether they are Indigenous or non-Indigenous. Whilst interviewees provided evidence of this, there was also evidence that young people remain within the West Parklands camps and may still be vulnerable to the behaviours mentioned in the above section.

What do Youth do now in the Dry Area?

Vulnerable young people either live in the camps or squats, or travel into Adelaide from suburban areas to meet up with their friends and "hang out". These are young people who access substances (including alcohol), generally drink within the Dry Area (and state they are prepared to take their chances being caught by the Police), locate themselves to areas adjacent to the Dry Area (eg River Torrens embankment), or remove themselves and go back into the suburbs to their squats, family house or to friend's accommodation.

It is also suggested that vulnerable youth avoid Adelaide and that the Dry Area is a cause for the change in behaviour. There are a number of contradictions in what is being said and what is taking place, as shown by the following points.

- A welfare provider stated – that youth are not venturing into Adelaide because of the Dry Area.
- A youth stated – that they venture into Adelaide but then move to the perimeter of the Dry Area to drink.
- A service provider stated that youth were limiting the number of times they came into Adelaide, because the Dry Area had created barriers.
- Youth state they are drinking within the Dry Area and are often disguising alcoholic drinks in soft drink bottles and cans in an attempt to avoid detection.

At another level, some Indigenous and non-Indigenous youth service providers have indicated that they have not seen a reduction in the number of incidents or the number of young people

seeking services. However, other youth service providers have noted a reduction in the number of young people accessing services since the Dry Area was imposed. This may be a commentary on the types of services provided, not the number of youth venturing into Adelaide.

Based on the observations and comments provided there would appear to be a stronger need for services associated with drug use and detoxification, and that this factor may be a major contributor to the inconsistency of views expressed by youth and providers.

Where do youth go now when they have finished drinking?

Circumstances have not changed substantially for youth from those circumstances that occurred before the Dry Area. Many vulnerable youth may have accessed youth welfare services, either via intervention of youth workers/street workers or by seeking out the services themselves. These services would include detoxification/sobering up, crisis intervention and safe place provision, to escape harassment, abuse, exploitation.

Other young people would return to their squats or to family/friend's accommodation.

It has been suggested that the number of squats has reduced within the City of Adelaide which may have impacted on the number of young people in Adelaide. It has also been pointed out that the number of services being provided for clean needle exchange, drug use and detoxification and alcohol/drug use are significantly greater issues for youth and service providers than the single factor of alcohol.

Summary – The Post Dry Area Environment for Vulnerable Youth

The Dry Area has not had a significant impact on the mobility of vulnerable youth. Young people who come to Adelaide to meet with their peers and become drinkers either continue to drink in the Dry Area or go to the perimeter of the Dry Area depending on their level of risk taking.

It is argued that there has been a behavioural change in that there are less vulnerable young people being detected within Adelaide. This behaviour is purported to be a direct result of the Dry Area because of the barriers it generates. This may affect some young people, but the issues may be more about the changing service requirements of youth. That is, they are involved in behaviours that require different interventions to those being provided by some organisations now.

4.5 Homeless People

The above sections focus on

- Indigenous drinkers
- Non-Indigenous drinkers
- Vulnerable Youth

Homeless people have also been suggested as a category of people who should be considered as part of this evaluation. Whilst not ignoring homeless people, there are other classifications such as poverty and vulnerability which are defined in different ways depending on the perspective of those who set the definitions.

Considering the categories of drinkers (shown above) involved in this evaluation, it is argued that those who may also be defined as homeless have been appropriately embraced within the target group over which the Dry Area was designed to have influence. That is, homeless is an umbrella categorisation of people and from within it relevant Indigenous, non-Indigenous and young persons have been identified.

4.6 Evaluation Conclusion

The Dry Area has had a range of impacts on public drinkers from Indigenous and non-Indigenous groups and youth.

Indigenous drinkers who frequented Victoria Square have been displaced. The majority have returned to their suburban homes. Some are now publicly drinking outside of the Dry Area adjacent to West Tee in the West Parklands. There has been a significant level of displacement for this group.

Indigenous drinkers who stayed in camps in the West Parklands have remained within the camp environment. They generally drink within the camp environment but claimed they would frequent Adelaide CBD and Victoria Square as it suited them. There has been no observed displacement.

Non-Indigenous drinkers who stayed in camps in the West Parklands have remained within the camp environment. They generally drink within the camp environment and near Whitmore Square but claimed they would frequent Adelaide CBD as it suited them. There has been no observed displacement.

Solo drinkers who live in low cost accommodation or are roaming the streets remain in the City but in reduced numbers from two years ago. There has been no observed displacement.

In regard to the expected Dry Area Trial impacts, the following summary is provided.

Impact Area	Public drinkers and Youth Outcomes	Evaluation Outcomes*		
		Agree	Partly Agree	Disagree
The impact of the Dry Area on their drinking patterns.	Will continue to drink alcohol, as they desire.	*4 non-Indigenous		*4 Indigenous
Whether there were any shifts in location as a result of the Dry Area.	Generally, moved to outside of Dry Area but will drink inside Dry Area as need fits		*4 Indigenous	*4 non-Indigenous
Whether Indigenous and non-Indigenous drinkers see the Dry Area as being discriminatory and/or racist.	Each group felt that the Dry Area was discriminatory but there was a limited view of it being racist	*4 Indigenous *4 non-Indigenous		
Whether the Dry Area has impacted on their mobility (ease of moving around or accessing the Adelaide Dry Area), in the Adelaide CBD	These groups have been unable to drink openly in Adelaide CBD	*4 Indigenous *4 non-Indigenous		
Whether the impact on youth has caused them to change their mobility and behaviours.	Youth have not been affected by the Dry Area in terms of their mobility and behaviours	*4 Youth Mobility	*4 Youth Behaviours	

* Evaluation Outcome is an assessment by the consultants, taking into account the qualitative and quantitative evidence and collected data, and comparing this with the outcomes (column 2 above) of the respondents and interviewed groups/individuals.

5. Government Agencies – Policy and Service Providers

5.1 Purpose and focus of this chapter

In order to assess the views of the government agencies involved in policy and service provision to disadvantaged people (with a focus on alcohol) in the City of Adelaide, individual interviews were conducted with a broad range of Government organisations.

The following areas were evaluated in relation to the project *Terms of Reference*. The main areas explored and evaluated were:

- The impact of the Dry Area Trial on service provision, particularly special needs clients.
- The impact of the Dry Area trial on the ability of agencies to provide services and other levels of assistance.
- The extent to which Agencies have put in place relevant programs, strategies structures to address the impact of the Dry Area Trial.

5.2 General

Government agency interviewees comprise two categories of organisations, these being policy based/advisory organisations and service based organisations.

Some organisations, because of their structure and objectives, are focused on Indigenous policy and services whereas others are focused on a wider range of policy and service areas.

The services provided by these agencies and organisations range from

- Case management of individuals who are homeless,
- Co-ordination of service providers to enhance the management of people's needs through better provider networking,
- Drug and alcohol counselling,
- Assessment and case management,
- Rehabilitation,
- Accommodation,
- Policy development,
- Strategy development and implementation.

5.2.1 Government Service Providers and Policy Organisations

What services are available to disadvantaged and vulnerable people within the City of Adelaide

The following organisations represent major government policy and coordination bodies and providers of services within the City of Adelaide that have relevance to the evaluation. Other organisations were contacted but were not available for input into this evaluation. All organisations listed were interviewed in relation to the evaluation of the Dry Area.

The profiling information of the Policy and Service Providers is summarised below.

Agencies	Function	Client Focus	Impact on Dry Area
ATSIC	Policy and Indigenous Community Representatives	Indigenous culture and policy	No direct impact
Attorney Generals Department	Justice Strategy Unit	Justice Policy	No direct impact
Adelaide City Council	<ul style="list-style-type: none"> Community Services City Safe and Crime Prevention Liquor Licensing City Precinct Management Reconciliation Committee 	Policy and advisory and development services, some direct service provision	General oversight and coordination of relevant services. Link with other service providers
Commissioner for Liquor Licensing and Gaming	Liquor Licensing	Application of Liquor Licensing Legislation	Dry Area Regulations are determined and promulgated
Department of Human Services	Research and Evaluation	Human Services Research and Evaluation	No direct impact
	RAH – City Homelessness Assistance Support Team (CHAST)	Service provision to homeless people including Campers in West Parklands	Direct impact in the identification and provision of services to Indigenous and non-Indigenous people
	Drug and Alcohol Services Council	Policy and service case management of people with alcohol or drug issues	Identification of strategies to minimise harm to people in unsupervised environments (West Tce Camps) and management of the Public Intoxication Act
	Aboriginal Housing Authority	Provision of housing to Indigenous people	No direct impact now, but future strategies may involve AHA in assisting people who are in camps.
	Forensic Mental Health	Policy and Research advice	No direct impact
	FAYS – Adelaide Metropolitan Office - Youth Services	Services to homeless, disadvantaged, vulnerable youth	No direct impact
	RAH – Accident and Emergency	Alcohol based injury management	No direct impact but receive people affected by alcohol from within the Dry Area.
	Aboriginal Services Division	Policy, Workforce Development and Advisory	No direct impact
	Exceptional Needs Unit	Application of harm minimisation strategies and support programs for people with exceptional needs	No direct impact, but involved in service need identification for people with needs who regularly come to police attention
	Inner City Strategy Social Justice and Country	Development of strategies for adults, Indigenous and youth who are vulnerable including homeless.	Impact through the adoption of strategies through network of agencies and direct service providers

	South Australian Housing Trust Inner Adelaide SA	People requiring access to public housing	No direct impact prioritise housing for people who may be homeless and may be public drinkers
	Ageing and Community Care – Indigenous Unit	Kinship Program with Indigenous people	Direct contact with Indigenous people in the West Parklands and in other welfare service organisations
	RAH – Aboriginal Liaison	Link between patient and nursing/medical care providers	No direct impact
	Community Services	Policy and strategy management	No direct impact
Department of the Premier and Cabinet	Social Inclusion Unit	Human services, homeless, vulnerable	No direct impact other than through policy and strategy
	Cabinet Office – Cabinet Office Projects	Management and administration of Dry Area Steering Committee	Development and implementation of strategies and actions
Legislative Council	Chair, Social Development Standing Committee	State Parliament	No direct impact
SA Police	<ul style="list-style-type: none"> Adelaide LSA Adelaide LSA (Police Officer Interviews) Transit Police 	Public	Polling of Dry Area Regulations

The following sections provide comments by government agencies and interpretation of their views under key headings relevant to this evaluation. The comments may have been provided from several units within an Agency and there may be conflicting views.

5.3 Government agencies involved in program management, legal and advisory activities

5.3.1 Knowledge of the Dry Area impacts

Agencies provided a range of comments that are discussed below.

Who was affected by the Dry Area?

A number of interviewees noted that, whilst the Dry Area was established to cover a wider boundary (i.e. essentially the area between the terraces of Adelaide and the residential zone of North Adelaide), the primary target was Victoria Square. Nevertheless, there were other impacts. The larger area impacted on both Indigenous and non-Indigenous people who were publicly drinking elsewhere in the declared Dry Area. The people who were affected were displaced from Victoria Square and elsewhere in the City, to other locations.

How many people were affected?

Those agencies that were able to comment provided a wide range of views regarding the number of people affected. Estimates included the following:

- That there are approximately 1,000 -1,200 vulnerable adults in Adelaide, of which 200 have been displaced from Victoria Square and other Squares, with up to 300 people passing through the West Tee parkland area annually.
- That there are 40 people living in camps in the West Parklands.
- That 20-40 public drinkers used to visit Victoria Square regularly, and that there are 30-40 people living in the West Parklands.
- That 20-30 drinkers from Victoria Square and 2-3 from West Tee have been the main drinkers of concern.
- That there were approximately 150 itinerant people in Adelaide in June 2003.

The above numbers range widely and may indicate that agencies are viewing people who are affected by the Dry Area in different ways. This could result from agencies defining groups in different ways.

Has there been displacement?

Agencies provided responses that relate to public drinkers and also to drinkers who are associated with the nightclub district of the Adelaide CBD.

Several agencies stated that the Dry Area has caused displacement of people to the West Parklands where there is increased violence and hidden needs. It is also claimed that the Dry Area has displaced people to the South Parklands where they engage in abuse of other substances whilst affected by alcohol. Some of these people are also affected by mental illness and psychiatric disorders. It is also stated that there is a level of confusion between displacing people because of alcohol related matters and then labelling them homeless, which may not be the case.

Drinkers associated with the night club district are being affected by the Dry Area through behavioural changes. For example, the carrying of alcohol between licensed premises has almost disappeared as has the behaviour that occurred before the Dry Area where people attending night clubs kept coolers in a car from which they would consume alcohol before going into the nightclubs.

5.3.2 What has been the impact of the Dry Area?

Comments suggest that the Dry Area has led to a significant decrease in fighting and assaults using bottles as a weapon. The Dry Area is claimed to have removed glass as a weapon because alcoholic beverages (in bottles) have been removed from the streets. However, intoxicated people are still being located in Hindley St and there are isolated cases being detected around the Adelaide CBD. The change in Hindley St towards more Arts and Alfresco dining has also increased the potential for Dry Area infringements to occur as people spill out on to footpaths. Nevertheless, the police often provide education and advice.

5.3.3 Are there alternatives to the Dry Area?

Comments provided indicate there are provisions available under the Public Intoxication Act and Summary Offences Act that could be utilised to overcome some of the issues associated with public drinking and drunkenness. Consideration of using existing legislation requires the strengthening of administrative practices in facilities where an intoxicated person is required to stay and participate in a management program rather than volunteer to stay.

5.3.4 Should the Dry Area be retained?

A range of views were offered regarding the Dry Area and its retention. Comments include

- The Dry Area is a simple solution to a complex set of issues.
- The Dry Area has caused displacement and hence an "out of sight, out of mind" mentality.
- There has been no real change in people drinking in the City.
- Issues around licensed premises and drug abuse are more significant than public drinking for Adelaide.
- The Dry Area is inappropriate but for it to be abandoned, services need to be relevant, timely and effective, and delivered in a co-ordinated way.

The issues of the Dry Area and displacement are not simple. There is a significant cycle of poverty, homelessness, unemployment, mental illness, and drug/alcohol abuse that needs to be serviced through relevant agencies and providers. This wider range of issues (homelessness, poverty etc) are presumably being addressed through other strategies and actions, all of which may affect public drinkers.

The development of the recently opened Stabilisation Unit is viewed by some agencies as providing a better chance to achieve engagement, stabilisation and intensive assessment and case management of vulnerable adults experiencing homelessness and alcohol and drug

issues. Whether the Stabilisation Unit provides the depth of support required to obviate the need for the Dry Area is yet to be determined.

5.3.5 How should services be provided in the future?

Comments have been provided that suggest a link between the nature of services that are to be delivered to people affected by alcohol and whether they are homeless, vulnerable or mentally ill. Agencies have stated that it is important to develop effective service provision, not just case management.

Assertive outreach programs are seen as essential to meet the needs of affected people. It is also recognised that there are programs and strategies being implemented through the Inner City Strategy in the Department of Human Services, and activities being implemented through the Dry Area Steering Committee, that are focused on agencies networking directly and providing resources to meet issues of homelessness, vulnerability and mental illness. It has also been claimed that current attempts to provide across agency service provision are not effective due to relationship concerns between service providers.

Until the strategies mentioned above are implemented and available for all agencies to observe, the criticisms of poor relationships between providers may continue. Clear leadership should ameliorate the impact of currently perceived poor relationships between agencies. This may be partly addressed by having a Steering Committee that includes all relevant stakeholder agencies.

5.3.6 What else needs to be done to achieve effective service provision?

Agencies were able to identify a range of issues or topical areas where actions need to be taken. Imbedded in some of the issues were ideas for solutions, some of which are currently being evaluated. Nevertheless, the main views expressed included statements such as

- Indigenous people should have a detoxification centre managed by an Indigenous organisation and that current service delivery practices are not effectively removing Indigenous people from the homelessness/poverty cycle.
- The Dry Area has been instrumental in the issues (homelessness, poverty, mental health, substance abuse) and forcing the State Government to make decisions that lead to resolving these issues.
- Leadership and co-ordination of service responses is key to addressing the issues exposed through the imposition of the Dry Area.
- There is a growing need for agencies to increase their communication capacity within Adelaide.

The key strategic directions being volunteered are a detoxification centre focused on Aboriginal needs, leadership, co-ordination and communication. A range of strategies implemented through the Dry Area Steering Committee focus on these concerns.

5.4 Government agencies involved in service provision

Service providers have expressed a range of concerns associated with public drinkers and, in particular, the West Parkland campers.

Access to clients

Service providers have suggested that they have difficulty providing services to vulnerable adults, particularly in the Parklands, where the locations are unsupervised and uncontrolled, causing a heightened sense of it being an unsafe environment for service provider staff. This has meant a number of service providers have restricted their mobility in seeking out their clients.

Other agencies stated that assertive outreach services are required to identify and meet the needs of people requiring services, and that protective behaviours need to be embraced more seriously to ensure unsafe situations are minimised for the service provider.

From a youth service provision view point there has not been a difference in the demand for youth services as a result of the Dry Area being imposed. Nor has it changed the behaviours of young people.

Future Service Provision

Most agencies are strategically planning future activities. Currently, it is claimed that very few government agencies are actually in direct contact with those people who have multiple needs, including alcohol related issues. It has been stated that the service model which will meet the needs of the vulnerable adults who have a range of issues (and who may be public drinkers) is the "exceptional needs approach". That is a model focused on the identification of people with exceptional needs and developing actions that stabilise their social and medical requirements and introduce harm minimisation strategies.

Several providers also commented on the impact of focusing on daytime service provision. This comment was raised by agencies that recognised a gap in night time services when people were more vulnerable. There is a need for strategies in future to ensure that service provision is available 24 hours a day to ensure vulnerable adults are being managed effectively on a full time basis, which in turn may provide a better outcome for that person.

Agencies have also stated that the significant issue is not alcohol. It is part of the problem, but when it is used in combination with other substances, it produces a more significant health issue for the user.

Summary

Government service providers that have a direct service involvement with public drinkers or vulnerable adults are limited, compared to providers listed as non-government organisations. Government service providers rely on building strong relationships with other organisations to assist in aspects of case management. Nevertheless, it is these service providers who have identified a need to develop alternative models of service delivery such as those offered through CHAST and co-ordinated through the Exceptional Needs Unit.

5.5 Evaluation Conclusion

Direct service providers are reacting to the needs of individuals. Many of these issues may have been caused or exacerbated by the use of alcohol or through mixing alcohol and drugs. Some may have been caused through long-term mental health issues. What is certain is the Dry Area is not the catalyst for people having a range of issues that have recently become evident. Many vulnerable people have been in need of specific services for some time. The Dry Area may have focused attention on them through infringements under the Dry Area Regulations or under provisions of the Public Intoxication Act.

There are also significant strategy developments that work towards integrated and co-ordinate service delivery not only between government service providers but also with non-government service providers. The combination of effective integrated strategies and strong leadership aimed at achieving these strategies will ensure opportunities to provide quality services to the homeless and vulnerable.

The impact of the Dry Area on the above actions is problematic. Possibly the Dry Area has brought to the attention of service agencies and policy makers the needs of a range of homeless and vulnerable people, but it is highly likely that those issues and needs were present before the Dry Area was imposed.

Impact Area	Government Agency Outcome	Evaluation Outcome*		
		Agree	Partly Agree	Disagree
The impact of the Dry Area Trial on service provision, particularly special needs clients.	Special needs clients have been identified and services provided		*4	
The impact of the Dry Area trial on the ability of agencies to provide services and other	The Dry Area Trail has allowed agencies to provide a greater range of services			*4

levels of assistance.				
The extent to which Agencies have put in place relevant programs, strategies, structures to address the impact of the Dry Area Trial.	Comprehensive strategies are in place for implementation	*4		

** Evaluation Outcome is an assessment by the consultants, taking into account the qualitative and quantitative evidence and collected data, and comparing this with the outcomes (column 2 above) of the responses of interviewed groups/individuals.*

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6. Non-Government Organisations – Policy and Service Providers.

6.1 Purpose and Focus of this Chapter

In order to assess the views of the providers of support services to disadvantaged people (with a focus on alcohol) in the City of Adelaide, individual interviews were conducted with a broad range of non government organisations.

The main areas explored and evaluated in relation to the Project *Terms of Reference* were:

- The impact of the Dry Area Trial on clients of service providers, particularly Indigenous clients.
- The impact of the Dry Area Trial on the ability of organisations and agencies to service their client groups.
- The extent to which service providers have put in place relevant programs and structures to address the impact of the Dry Area Trial on their clients.

6.2 Types of Non Government Organisations

Interviewees generally comprised two key categories of organisations, these being:

- Service Based Organisations
- Policy Based and Advisory Organisations

Organisations and service providers were also divided into those that provide services exclusively to an Indigenous client group and other organisations providing services to groups of disadvantaged and vulnerable people within the City of Adelaide, which may include Indigenous people to a small or significant degree.

The services provided by these agencies and organisations range from sobering up facilities, drug and alcohol counselling, assessment and case management, rehabilitation, emergency accommodation, food and material goods, washing facilities and medical treatment.

6.3 Non-government, non-Indigenous organisations

6.3.1 Service Providers and Policy Organisations

What services are available to disadvantaged and vulnerable people within the City of Adelaide

The following organisations represent all the major policy and coordination bodies and providers of services to disadvantaged and vulnerable youths and adults within the City of Adelaide. All of these organisations except for SACOSS (South Australian Council of Social Services) were interviewed in relation to the evaluation of the Dry Area.

While some organisations provide a range of services to meet the needs of homeless and disadvantaged people in the City, some focus their service provision in one or more specific areas such as:

- Youth, women or men,
- Accommodation,
- Counselling, rehabilitation, needs management, health management,
- Immediate impacts of substance abuse
- Meals, material support
- Mental illness.

The services provided by these agencies and organisation range from sobering up facilities, drug and alcohol counselling assessment and case management, rehabilitation, emergency accommodation, food, washing facilities and medical treatment.

The profiling information of the Policy and Service Providers is summarised information below.

Service Provider	Function	Client Focus	Impact of Dry Area
Adelaide Day Centre for Homeless People	Services for the homeless, Soup kitchen. Alcohol and some drug and rehabilitation	Vulnerable men	Indirect impact on clients. No increase in numbers
Byron Place	Services for the homeless, drug and alcohol rehabilitation Medical services.	Disadvantaged and vulnerable men women and families includes Indigenous	Increase in drinkers adjacent to premises No increase in client Numbers.
West Care	Services for the homeless, meals, drug and alcohol rehabilitation	Disadvantaged and vulnerable men women and families.	Displacement of clients Increase in demand for services
Salvation Army –Sobering Up Unit Pioneer Stabilisation Unit.	Services for Intoxicated people Indigenous field worker Rehabilitation Program	Men and some women including Indigenous Men	Direct impact on clients. Increase in service demand over last 3 years.
Hutt St Centre	Services for the Homeless, meals material support, counselling, referral.	Men and Women	No direct impact on clients. No increase in demand for services.
Magdalene Centre	Services for the Homeless and disadvantaged/ living skills, practical support / Saturday evening meal.	Men and women	Indirect impact. No increase in demand for services
Anglicare Inner City frail Aged Program	Support with daily living.	Vulnerable men including chronic alcoholics	Impact on vulnerable chronic alcoholic men (mainly non Indigenous) No increase in numbers serviced.
Offenders Aid and Rehabilitation Service	Services for Offenders Material support accommodation rehabilitation.	Men and Women	Impact on clients. Increase in demand for services.
Society of St Vincent de Paul	Night Shelter/emergency accommodation/meals/material support	Homeless and needy men	No impact on client group. No increase in numbers serviced (few Indigenous).
St Johns Youth Shelter	Emergency Accommodation/complex needs/challenging behaviours	Youth 12-25	Increased demand for services
Inner City Administrators Group	Advisory Group	Disadvantaged, vulnerable and needy	N/A
MACHA	Community Housing Authority	Homeless men, women and families	No direct impact on the client group
Catherine House	Services for Women longer term and emergency accommodation, crisis care, domestic violence poverty complex needs	Homeless, disadvantaged and vulnerable women	No Impact on the client group
Inner City Youth Service	Services to Youth outreach, outreach worker, crisis support	Youth	
Hindmarsh Centre	Youth Emergency Accommodation and Clean Needle Exchange, drug and alcohol rehabilitation Sobering Up Unit	Homeless, vulnerable, and substance abusing Youth.	Increase in demand for services but no proportional increase in demand alcohol rehabilitation.
SACOSS	NGO Peak Body- Policy	Disadvantaged,	N/A.

		vulnerable and needy	
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6.3.2 Summary of Services Provided

The following table indicates the number of non-government agencies involved in the provision of each type of service delivery to disadvantaged people, including drinkers, in the City of Adelaide.

Nature of the Services Provided	
Number of organisations that provide sobering up facilities.	2
Outreach services to drug and alcohol effected clients	3
Drug and alcohol rehabilitation services/counselling.	6
Meals and/ or material assistance	12
Emergency accommodation	6
Additional services to support the introduction of the Dry Area.	1
In receipt of additional funding to support the introduction of the Dry Area	1

6.4.1 The environment for public drinkers prior to the introduction of the Dry Area Trial

Where in Adelaide did public drinking occur

Service providers reported that, prior to the introduction of the Dry Area Trial, their clients had been attracted to specific locations in the City, particularly Victoria Square and Whitmore Square.

There were several reasons advanced for this including historical and cultural factors:

- Indigenous people see Victoria Square as a traditional meeting place.
- Victoria Square is central and convenient. Drinkers are attracted to areas that are convenient to services e.g. meals, medical treatment, material support as well as shops.
- Drinkers seek association in the City because it is a well-lit area and therefore is better for personal safety.
- There are larger numbers of outlets to obtain alcohol.
- Patterns of affiliation between adult single people attract them to the City Centre.

How many drinkers were there

Service providers expressed a range of estimates of the number of drinkers they thought had been displaced from Victoria Square and the extent of incidents that may have been perpetrated by public drinkers. Most interviewees were not able to distinguish between groups of Indigenous people that may have included some public drinkers and/or those who might share some alcohol from time to time, and those who were "hard core". Organisations that work directly with alcohol affected clients appeared to be better informed.

Estimates by those organisations is represented by the following:

- The maximum number of people who gathered in Victoria Square was about thirty. This was not every day but varied with the season, the weather, pension day etc.
- Prior to the introduction of the Dry Area there was a hard-core group of about six drinkers in Victoria Square and more in Whitmore Square. Now there are many more in the West Parklands and wherever the Dry Area is not enforced.
- The number of incidents in Victoria Square never exceeded 15 per month.

What is the relationship of alcohol to inappropriate public behaviour

The organisations that have direct contact with drinkers considered that, prior to the introduction the Dry Area Trial, there were some problems with inappropriate public behaviour, particularly in Victoria Square. However the majority felt that these had been overstated. In fact, when asked how they would rate public drinking as an issue affecting inappropriate public behaviour, the majority regarded it as either of 'low significance' or 'insignificant'.

Several organisations that do not provide intervention services suggested that there were no problems.

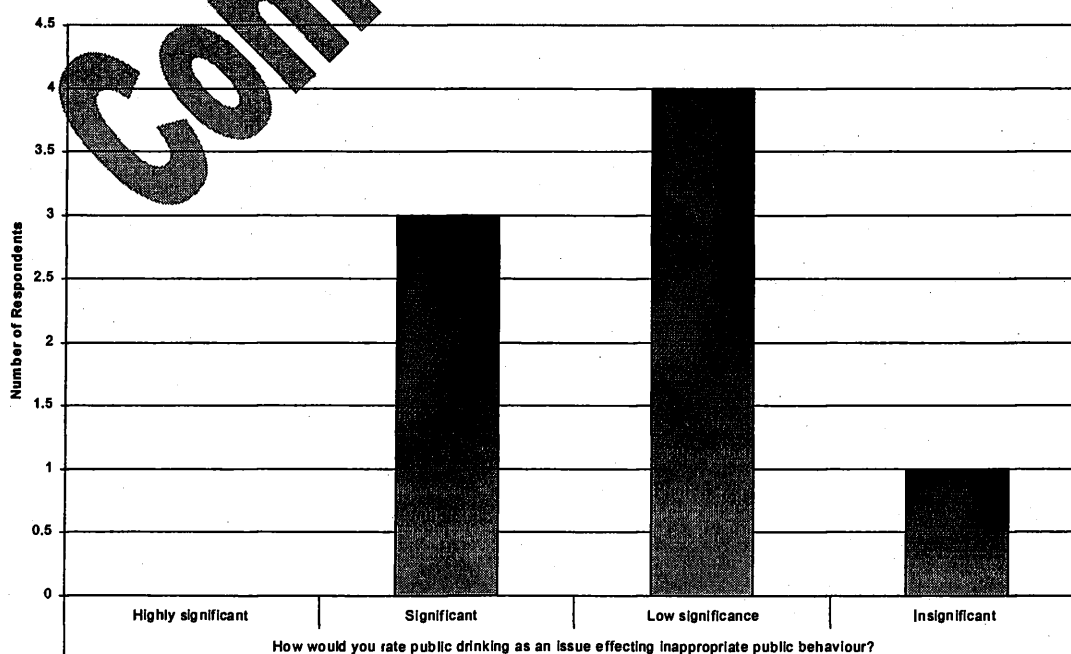
Those organisations that work on the front line with alcohol abusers tended to consider alcohol of more significance in influencing the inappropriate public behaviour of their clients than those organisations that provide more generic assistance to disadvantaged people or are involved with those referred to them for assistance with rehabilitation.

The following are typical of the majority of the views expressed.

- *Alcohol consumption was not a big problem. The real situation was more complicated than simply drinking alcohol.*
- *Nuisance behaviour in Victoria Square was on the margins of acceptability. It was very public. There was some begging but it was generalised. A few individuals targeted the Adelaide Hilton.*
- *It is a community myth that public drinking in Victoria Square was a major problem. It was an important problem but could have been solved by other means.*

Interviewees were generally of the view that alcohol is a factor affecting inappropriate public behavior of their clients but not as a stand-alone causal factor. It was the view of those who work directly with drug and alcohol abusers that many mix drugs and that non-intravenous drugs are often associated with alcohol. They referred to these clients as "poly drug users".

It was a commonly held view that significant numbers accessing services have high and complex needs and that many of their clients who have problems with drugs and alcohol also have mental health issues and personality disorders. Those with mental health issues often display similar behaviours to alcohol-affected people. They considered mental health issues and drug abuse (other than alcohol) to be more significant in relation to public safety. Several interviewees considered that alcohol affected patrons of pubs and clubs (licensed premises) pose as big a (if not bigger) problem to public safety than public drinkers.



6.4.2 Impact of the Dry Area on Client Groups

What has been the impact of the Dry Area Trial on their clients, particularly Indigenous clients

A number of organisations (approximately 75%) did not report any direct impact on their client groups and have not experienced any change in the demand for services as a result of the introduction of the Dry Area Trial. In the main these were organisations, which provide services to specific groups that did not include public drinkers or provide services to clients in various stages of alcohol rehabilitation. That is, their clients are no longer or never were public drinkers.

A significant number (approximately 50%) reported some degree of indirect impact on their clients ranging from a disruption to their patterns of association and social contact, to increased feelings of alienation and marginalisation as a result of the introduction of the policy and the public debate that accompanied it.

Of those service providers who deal directly with public drinkers or indirectly through drug and alcohol rehabilitation programs, most considered that their clients have been adversely affected by the introduction of the Dry Area Trial.

- A service provider that provides rehabilitation for alcohol abusers considered that the Dry Area has had an enormous effect on the mental health of its clients and their ability to cope with other issues. The provider reported that the Dry Area has increased feelings of despair and hopelessness as clients feel that they are not wanted in the City. In terms of those participating in rehabilitation they are all at different stages and the Dry Area affects where they can go and where they find their mates, if their mates are still drinking. Maintaining their social life was considered an important part of their rehabilitation and personal well-being.
- A Service Provider of generic services reported that people who have been displaced from the Squares have increased the numbers drinking outside the premises of service providers in the South West quarter of the City.
- Service providers involved in alcohol counselling and rehabilitation reported a number of negative impacts on their clients. Comments included:
 - *They have nowhere else to drink. They cannot drink at home as they are homeless. Clients rely on finding some secure contact with peers. They have the increased insecurity of not being able to find some secure place to sleep.*
 - *Clients have moved to West Tee and the West Parklands. There are serious concerns for their safety in crossing a five-lane highway. Injuries and deaths on West Tee have received little publicity.*
 - *Clients accumulate fines, are imprisoned and lose their housing as a result of this. We are referring to a small number of habitual drinkers.*

The majority of service providers and policy organisations considered that there had been increased violence in the West Park lands as a result of drinkers gathering there away from public scrutiny. It was suspected that many of these incidents were not reported.

Several service providers also reported that when the Dry Area was first introduced there was a move by public drinkers to methylated spirits and white wine, as these were considered difficult to detect. This practice no longer seem to be in vogue. This could be because of the change in the manner of policing of the Dry Area.

Impact on Chronic Alcoholics

One organisation identified two groups of their clients who are affected by the Dry Area.

1. *Long term alcohol damaged clients with cognitive difficulties* - They cannot respond to the Dry Area and change their habitual behaviour or practices. They don't mean to transgress. They receive expiation notices they cannot pay. They already live in poverty. Service providers have advocated to the police on their behalf.

2. *Indigenous clients* - Their behaviour in relation to the Dry Area can be described as counter intuitive - even though they know about the Dry Area they are unable or unwilling to change their habitual practices.⁵

Impact on Youth

Because the youth client group is not primarily located in the City, knowledge of the Dry Area and its implications is not a high priority for these service providers. However service providers to young people echoed the concerns of other service providers regarding the effect of The Dry Area Trial on the ability of their clients to access services (e.g. crisis support, case management, outreach services).

Youth Service Providers made the following comments:

- Risk taking behaviour occurs in 60% of clients (sniffing, drugs, alcohol).
- Because the client group comprises young homeless people, they would tend to ignore the Dry Area and merely push the problem away.
- Many young people used to come to the City to access networks and services. Less come to the City now, and it is believed the Dry Area has impacted on this. Clients and other young people have been pushed to the outer suburbs and rural areas. They are now living more remotely and are not accessing services, which they need. They only venture to the City for short periods, then retreat again. There are now long periods of disengagement.
- Young people are in crisis situations and the service provider must go and locate them. Although the service provider provides a safe place in the City, it is used less frequently.
- The Dry Area has not been effective in preventing young people from carrying open alcoholic containers or drinking publicly. The providers' street workers observe this regularly.
- Crisis intervention is the key issue for young people. Most have access to squats, which are not in the City and are therefore more difficult to locate. This isolation in the suburbs made clients, particularly women, more subject to assaults.

It is interesting to note that many service providers made certain assumptions about the profile of public drinkers, particularly those drinking in Victoria Square and Whitmore Square. Presumptions included that they were largely city homeless, that they have relocated to the West Park lands and that they now have difficulty locating and accessing support services. There was also a presumption by some service providers that the numbers of Indigenous people who have been displaced by the Dry Area Trial is quite large.

There is no evidence to support the commonly expressed view that the majority of drinkers who frequented Victoria Square prior to the introduction of the Dry Area are now drinking in the West Parklands or that they are City homeless.

Reports from the Bee Line and City Loop Bus drivers suggest that many of the drinkers came into Adelaide by train from the northern suburbs, using the Bee Line Bus to Victoria Square and to return to the railway station in the late afternoon.

Service providers who have outreach services or who deal on a daily basis with intoxicated people rate habitual public drinking and resulting public intoxication as a significant problem influencing inappropriate behavior of their client group but do not think that the numbers directly affected by the Dry Area Trial would be more than 30.

It is acknowledged that because of patterns of acquaintanceship and family relations the numbers indirectly displaced could be much greater and patterns of regular social contact affected.

⁵ Evidence gathered from a variety of sources suggests that Indigenous drinkers have modified their habitual practices to avoid those parts of the Dry Area which are actively policed.

6.4.3 Impact of the Dry Area Trial on the ability of Organisations and Agencies to service their client groups

Services targeting the needs of public drinkers

Only a few of the non-Indigenous service organisations interviewed provide services aimed directly at public drinkers in the City. The Salvation Army, through its "Sobering Up" Unit, is one of these. Others include the Inner City Frail Aged Program operated by Anglicare, which provides welfare services to chronic drinkers. (The term "frail aged" can apply from age 50 plus for chronic drinkers who often suffer premature physical deterioration).

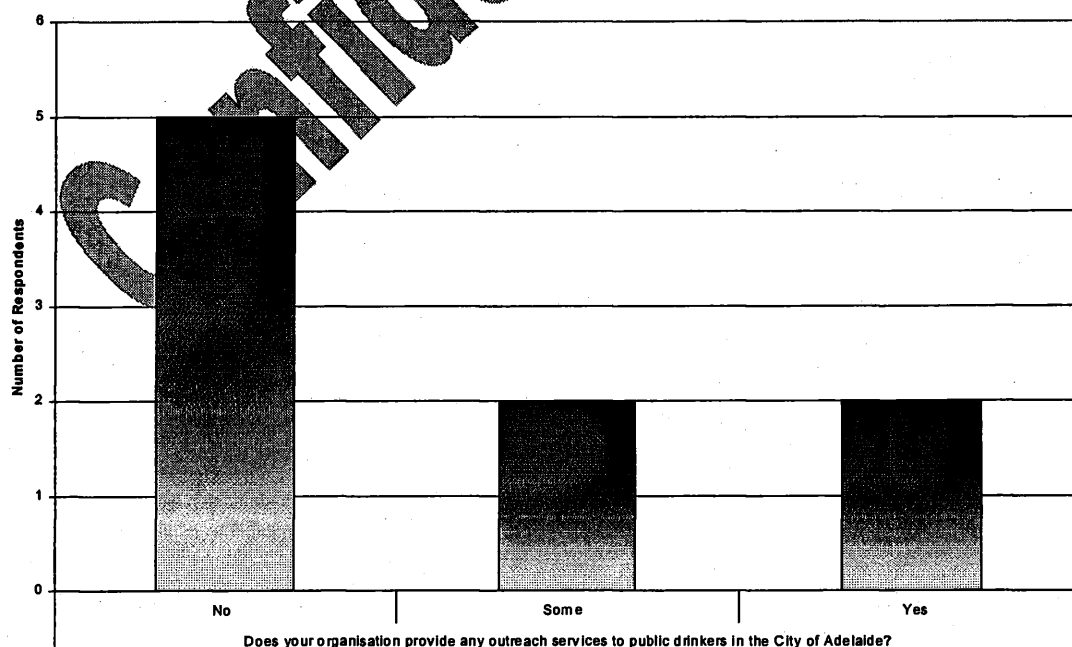
Information supplied by the Salvation Army Sobering Up Unit revealed the following:

- The demographic analysis of drinkers shows consistently high levels of Indigenous people (estimated at between 55-66%).
- There is a small group using the Sobering Up Unit on a regular basis.
- The Sobering Up Unit also admits Indigenous women who may be at risk because of lack of other services.
- Approximately 10% of admissions to the Sobering Up Centre are brought in by police. Others are referred by the Mobile Assistance Patrol (MAP), ambulances or are voluntarily self-admitted.
- Clients must be considered to be intoxicated to be admitted.

Other organisations provide services to disadvantaged groups in the City, including public drinkers, by providing meals, washing facilities, material goods assistance, assistance with accommodation placement and some medical assistance and various forms of drug and alcohol counselling and rehabilitation.

Some provide drug and alcohol counselling to those who show a willingness to participate in rehabilitation. Very few organisations provide outreach services or field officers who seek out clients but respond to clients who attend, are referred or are delivered to their premises for assistance.

Some organisations, such as the Vincentian Centre (Saint Vincent De Paul) which provide meals and emergency accommodation and The Magdalene Centre which provides a Saturday night meal, do not admit clients who appear to be affected by alcohol. However the Magdalene Centre will allow the meal to be eaten outside.



It is important to acknowledge that while non-Indigenous service providers do not specifically target Indigenous people, many Indigenous people choose to use these mainstream services. A number of reasons were advanced for this:

- they consider the service is good;
- they don't feel comfortable with the clan based nature of Indigenous service delivery
- there is concern about issues of confidentiality.

6.4.4 Assessment of the impact on demand for services as a result of the introduction of the Dry Area Trial

Those service providers on the west side of the city that provide a range of services to diverse groups of clients, including a significant proportion of Indigenous clients, reported a strong increase in the demand for services in recent years. The extent to which this is directly attributable to the introduction of the Dry Area is not quantifiable. However an analysis of the data shows that the number of clients assessed with significant alcohol abuse issues has not increased⁶. Homelessness, poverty, mental health issues and drug abuse are all significant issues in assessing the complex needs of their client groups.

Organisations that provide intervention support for public drinkers (for example, sobering up facilities) reported a marked increase in demand. The Salvation Army provides services to drug and alcohol abusers in the form of the Sobering Up Unit, Stabilisation Unit, Supported Accommodation, Drug and Alcohol Outreach Services (including an Indigenous Field Officer). They also provide services to clients referred to them by the Drug Court and the Police Drug Diversion Initiative. These services have assisted an increased number of clients in excess of 1,000 people a year over the last three years. It is important to note that this trend predates the introduction of the Dry Area Trial.

Service providers involved in alcohol rehabilitation reported that more time and resources were required to assist clients with bureaucracy, e.g. dealing with fines, and police matters as a result of Dry Area policing. Service providers reported that it was now harder to locate clients as the drinkers had "gone to ground" to avoid detection in the Dry Area. However only a few of these organisations had provided direct outreach services to drinkers in the past. The majority have worked with clients who presented at their premises or were referred from other agencies

Those service providers on the west side of the City that provide a range of services to a diverse group of clients, including a significant proportion of Indigenous clients, reported a strong increase demand for services in recent years. The extent to which this is directly attributable to the introduction of the Dry Area is not quantifiable. However an analysis of the data shows that the number of clients assessed with significant alcohol abuse issues has not increased⁷.

Several service providers reported an increased negative response towards service providers from residents in the South West corner of the City where public behaviour of clients adjacent to their premises had deteriorated and numbers increased since the introduction of the Dry Area. A typical comment from residents was "Why can't you control the behaviour of these people?"

Approximately a third of the organisations reported no change in demand for services since the introduction of the Dry Area.

It was proposed by one service provider that a clear public relations program was needed to inform the community that service providers actually keep people off the streets and that, without their intervention, the situation would be worse.

6.4.5 Supporting data from a cross section of non government organisations

Data from non government organisations have been variable and inconsistent. Nevertheless, some data have been collected on an annual basis that provides a capacity to undertake a broadly based evaluation of the impact of the Dry Area on these organisations.

⁶ Refer to data analysis later in this Chapter

NGO data have been selectively extracted and commented on in this document. Data relating to only those NGOs where a consultation was completed have been applied within this evaluation. The following data from 5 organisations represents a sample of service providers drawn from (1) those that provide indirect services to public drinkers through alcohol rehabilitation and counselling programs (2) those providing generic services to disadvantaged and vulnerable groups that may include public drinkers and (3) those which provide frontline intervention services directly targeting public drinkers in the City of Adelaide.

The data shows that only those that are providing front line intervention services (eg sobering up facilities), appear to have experienced an increase in services to drinkers during the period of the Dry Area Trail. It is acknowledged that lack of increase in the numbers serviced in rehabilitation and counselling programs may not be an accurate measure of demand, as unmet demand may exist because of limited resources.

Adelaide Day Centre (Rehabilitation)

Outcomes Objectives

1. To reduce the substance abuse of participants.
2. To improve the quality of life of participants by maximising level of health, living skills, self-esteem and dignity.
3. To increase participants' access opportunities to appropriate counselling, referral and advocacy.
4. To assist participants in developing appropriate support networks, links to mainstream services and meaningful activity programs, in order to prevent relapse into substance abuse.

Based on these objectives the Adelaide Day Centre has, in four reporting years, achieved the following levels of intervention for clients. Clients have been identified with alcohol problems wherever possible.

Item	1998/99		1999/00		2000/01		2001/02	
	Persons	Contacts	Persons	Contacts	Persons	Contacts	Persons	Contacts
Informal Contact/Brief Intervention Clients*								
No of 1:1 interventions	750	888	800	909	820	940	890	1,020
Indigenous	130		140		140		150	
Non Indigenous	570		590		615		665	
Source of Referral - DASC, ASG, SUU	80 (out of 750)		93 (out of 800)		97 (out of 820)		105 (out of 890)	
Accommodation status (1st visit)								
Homeless	105 (out of 750)		110 (out of 800)		140 (out of 820)		150 (out of 890)	

* 'Informal Contacts' refers to people who receive counselling / advice from ADC staff

The following table provides details on those participants who move from the brief intervention service to the rehabilitation program (which is specifically targeted for isolated males over 25).

Item	1998/99	1999/00	2000/01	2001/02
Rehabilitation Clients				
- Indigenous	1	2	14	13
- Non Indigenous	17	19	57	67
Principal Drug of Concern - Alcohol			60 (out of 71)	67 (out of 80)
Main Treatment Type - Rehabilitation			61 (out of 71)	70 (out of 80)
Services Provided -	1,026	1,039	1,072 (out of	1,098 (out of

Counselling/Group meetings	(out of 1,351 services for 55 persons)	(out of 1,380 services for 59 persons)	1,462 services for 71 persons)	1,680 services for 80 persons)
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Item	1998/99		1999/00		2000/01		2001/02	
	Persons	Contacts	Persons	Contacts	Persons	Contacts	Persons	Contacts
Fred's Soup Van	395#	6,813*	395#	7,010*	401#	7,015*	430#	7,020*

No of soup van runs made during the period.

* No of contacts / beneficiaries during the period (estimated).

The majority of clients supported by this agency are non-Indigenous males over 25. Over the past four years the level of service demand has increased in terms of the number of clients requiring service and the number of services per client. Of those clients who are undertaking rehabilitation programs, 84% are recorded as having alcohol as their "principal drug of concern". This level did not change between 2000/01 and 2001/02 (the first year of the Dry Area Trial).

Byron Place (generic and drug and alcohol specific services)

Byron Place Community Centre, operated by the Adelaide Central Mission, offers services to alcohol and drug affected homeless people who may be long-term unemployed.

Outcomes

- To have people who are affected by alcohol and other drugs develop self-image and overall well-being, with an understanding of the effects of alcohol and drugs on their lives.
- To have clients develop an understanding of their own competency and to build on this to make changes in their lives.
- To ensure that inner city vulnerable adults who are experiencing alcohol and other drug related problems have access to practical services, which will improve their quality of life and meet crisis and other needs.
- To ensure that assessment services are conducted for people wishing to enter Treatment Programs for their alcohol abuse.

Item	1998/99	1999/00	2000/01	2001/02
Summary of First Attendance				
Reasons for attendance for Alcohol and Drugs	86 (out of 1,041 or 8.2%)	58 (out of 832 or 7.0%)	34 (out of 765 or 4.4.%)	69 (out of 1,818 or 4.0%)
Total Number attending - accommodation previous night				
Homeless	29 [3 months] (out of 181)	54 [3 months] (out of 169)	69 [3 months] (out of 194)	125 [9 months] (out of 424)
Detoxification/SOU	12 [3 months] (out of 181)	9 [3 months] (out of 169)	4 [3 months] (out of 194)	10 [9 months] (out of 424)

Item	1998/99		1999/00		2000/01		2001/02	
	Persons	Contacts	Persons	Contacts	Persons	Contacts	Persons	Contacts
Case Worker Workload								
Attendances due to drug/alcohol issues		461 (out of 1,939)		243 (out of 1,029)		187 (out of 710)		185 (out of 855)
No of 1:1 attendances during the period		1,533		1,685		1,116		1,107

Of those clients attending the service for the first time the numbers have shown a general increase in 2000/1 and 2001/2002. However the percentage presenting for assistance with

drug and alcohol issues has declined. Over the past four years the level of service demand for those voluntarily attending treatment programs has decreased as a proportion of the total involved in treatment programs, from 8% (1998/99) to 4% (2001/02) of clients. Of those clients who are undertaking rehabilitation programs 84% are recorded as having alcohol as their "principal drug of concern". Twenty one percent of caseworker load in 2001/02 relates to clients who have a drug/alcohol issue which was a reduction from 2000/01 when the workload was 26%. This represents a fall of 6% in the first year of the *Dry Area Trial*.

Hindmarsh Centre (Sobering Up , Emergency Accommodation, Drug and Alcohol rehabilitation for Youth)

This service provides shelter, support and non-medical detoxification for homeless young people (and those in danger of becoming homeless) who are 12-24 years of age. The Centre caters for both males and females.

Outcome Objectives

1. To provide a safe, caring environment for young people in which to sober up. Where necessary, medical service needs should be assessed, and food and hygiene needs met while in care.
2. To target homeless and at risk young people and present the service in ways that will facilitate disadvantaged young people using the service.
3. To use the opportunity of staying in the Sobering-Up Unit to provide preventative interventions to young people with developing drug and alcohol problems.
4. To provide up-to-date information about services available to homeless young people, both drug and alcohol specific, and other services relevant to their needs.
5. To attempt to make effective referrals to relevant service providers and, where possible, follow up.

Item	1998/99		1999/00		2000/01		2001/02	
	Persons	Admissions	Persons	Admissions	Persons	Admissions	Persons	Admissions
Assessments and Admissions								
Indigenous	71	243	39	243	41	159	26	137
Non Indigenous	421	1,924	227	1,599	195	800	207	738
Accommodation Status								
Homeless		1,682		1,462		596		566
Source of Referral								
Police (PIA)				60		40		35
ASG				18		14		8
Other SUU				15		22		33
User Characteristics								
Poly drug		1,083		909	153	451	108	400
Alcohol only		183		111	30	74	53	129
Services Provided								
Sobering Up		1,625 (out of 3,804)		1,422 (out of 3,174)		677 (out of 1,509)		503 (out of 1,386)
Lifestyle Assessment		1,057 (out of 3,804)		1,309 (out of 3,174)		567 (out of 1,509)		459 (out of 1,386)
Counselling		186 (out of 3,804)		104 (out of 3,174)		43 (out of 1,509)		44 (out of 1,386)

Item	1998/99		1999/00		2000/01		2001/02	
	Persons	Contacts	Persons	Contacts	Persons	Admissions	Persons	Admissions
Client Contact (excluding Assessments, Admissions and Clean Needle Clients)								
Indigenous	52		61		102		104	
Non Indigenous	1,178		279		579		939	
Accommodation Status								
Homeless	68		126		60		105	
Source of Referral								
Police (PIA)	4		3		4		8	
ASG	2		3		0		2	
Other SUU	1		5		3		5	

Over the past four years the level of service demand for admissions has decreased. However the client contact levels have increased particularly for non-Indigenous persons (excluding 1998/99), a 62% increase from the first year of the Dry Area. The number of admissions for issues related to alcohol only, as distinguished from poly drug use or other issues, has also increased from 2000/01 to 2001/02. In addition the number of homeless youth who have made contact has also increased over the four years, by 54%.

Salvation Army Sobering Up Unit (including Indigenous Outreach)

The role of the service is to assess client levels of intoxication, monitor the clients while they are sobering up, arrange medical intervention as necessary and provide basic physical needs such as a bed, an appropriate meal, essential clothing and personal hygiene requisites.

Outcome Objectives

1. To provide a safe environment where intoxicated people, at risk of harm to themselves or others, may sober up from the effects of alcohol and/or other drugs.
2. To provide information and to encourage clients to consider the risks and harm associated with using alcohol and/or drugs, and to inform them of medical detoxification and rehabilitation services.
3. To refer clients to other appropriate services.
4. To provide case management and case work in collaboration with other agencies.
5. To provide culturally appropriate assessment, counselling, liaison, advocacy and assistance to Indigenous clients and to link them with relevant Indigenous services.

Sobering Up Unit

Item	1999/00		2000/01		2001/02		2002/03	
	Persons	Admissions	Persons	Admissions	Persons	Admissions	Persons	Admissions
Admissions								
Total	1,013	5,933	1,112	7,409	1,246	8,824	1,260	9,481
Indigenous		3,650		4,817		4,648		5,500
Non Indigenous		2,283		2,792		4,176		3,904
Principal Drug of Concern								
Alcohol								9,242
Source of Referrals								
Self		3,486		4,862		6,562		8,264
PIA		552		601		897		537
ASG*		133		984*		790*		
Other Community Based Agencies								365
Reason for Discharge								
Self* End of episode		4,143		4,833*		7,677*		8,021
Ceased to participate – non compliance								1,115
Alcohol Unit		101		111		90		N/a
ASG		49		36		211		N/a
Hospital/GP		200		289		192		N/a
Removed by Police		26		33		44		N/a

Indigenous Workers' Data

Item	1999/00		2000/01		2001/02		2002/03	
	Persons	Admissions	Persons	Admissions	Persons	Admissions	Persons	Admissions
Admissions								
Total			399	2,962	326	3,184	412	596
Indigenous				2,532		2,724		5,500
Non Indigenous				424		459		3,904
Source of Referrals								
Self				19		16		148
Alcohol and Drug Treatment Units				1,817		1,978		81
Principal Drug of Concern								
Alcohol				2,736		2,906		191

Number of Contacts for the Period								
Total								2,389
Reason for Discharge								
End of episode								209
Ceased to participate – non compliance								1

The level of service demand for admissions has increased by 7% in 2000/01 to 2001/02 and 54% over the past 4 years. In 2001/02, 58% of admissions were Indigenous, while 87% of admissions were by self-referral.

WestCare (generic services plus drug and alcohol counselling).

Self-Help Project - a tertiary prevention program for adults, involving individual and group contexts, that supports participants as they work through the issues surrounding substance dependency. The program provides drug and alcohol counselling, help and support in crisis situations, community support, and recreation and adventure programs.

Outcome Objectives

The main aims are:

1. To reduce the incidence of drug and alcohol misuse amongst target persons.
2. To provide information, advice and counsel to clients in order to reduce the harmful affects of the misuse of alcohol and other drugs.
3. To enable clients to make changes in their living which will lead to a safer, healthier and more fulfilling lifestyle.
4. To provide support and help in crisis situations.

Self Help Program

Item	1998/99		1999/00		2000/01		2001/02	
	Persons	Attendance	Persons	Attendance	Persons	Attendance	Persons	Attendance
Admissions								
Total	105	661	122	492	130	590	180	795
Indigenous	7		7		115		155	
Non-Indigenous	98		116		15		25	
Principal Drug of Concern								
Alcohol	10		29		39		69	
Poly drug use	64		65		N/a		N/a	
Source of Referrals								
Self	68		123		123		145	
Other Community Based Agencies	5		0		7		34	
Main Service Provider								
Counselling							137	

This targeted program relates to reducing the incidence of drug and alcohol misuse. The program has increased in the number of persons attending and the overall number of attendances. A 35% increase in attendances to this program occurred between 2000/01 and 2001/02 the first year of the Dry Area.

In addition WestCare provides the following secondary program.

Adventure Services - an adventure based counselling program for young people who are subject to substance use.

Key aims:

1. To provide a secondary prevention program for marginalised young people who are subject to substance use, through an adventure based methodology.
2. To provide brief and ongoing intervention through peer support programs and drug and alcohol counselling.

Outcome Objectives

1. To provide an adventure camping program for marginalised young people (for reasons such as family breakdown, homelessness, unemployment) to challenge lifestyle and drug use issues.

2. To promote self-development & harm minimisation through activity based experiential learning.
3. To train and develop peer leaders for the purpose of peer education and support on camping programs.
4. To reduce the harm associated with drug use through counselling and peer support programs.
5. To provide expertise and knowledge to youth and community organisations by contracting services when required

Adventure Service Program

Item	1998/99		1999/00		2000/01		2001/02	
	Persons	Attendance	Persons	Attendance	Persons	Attendance	Persons	Attendance
Admissions								
Total	126	848	152	1,370	108	812	182	1352
Indigenous	2		10		5		18	
Non Indigenous	124		142		103		164	
Principal Drug of Concern								
Alcohol	0		4		10		25	
Poly drug use	149		139		2		N/a	

6.4.6 New, additional or expanded services to public drinkers to support the Dry Area Trial

The majority of organisations have not changed the level or nature of services delivery since the introduction of the Dry Area Trial.

Only one organisation, the Salvation Army, reported an increase in funding to assist in addressing the issues resulting from displacement of drinkers and impact of the Dry Area Trial. Some of these services (for example the Salvation Army Pioneer Stabilisation Unit) has only just been fully implemented (September 2003) because of delays in the redevelopment of the Whitmore Square site as result of the planning appeals process. It is important to note that the Stabilisation Unit is a rehabilitation program and does not cater for the immediate problems and needs of public drinkers or those at risk of being charged under the Public Intoxication Act. This service can never be used as the first line of contact for those affected by the Dry Area. It is part of an overall strategy to effect a lasting response.

The concept of the Stabilisation Unit was identified in the Vulnerable Adults Strategy, which predated the Dry area Trial. When the Dry Area was introduced, DHS asked that the Stabilisation Unit concept be implemented as quickly as possible. It was therefore established in temporary accommodation for four months. However it continued to operate for over 24 months, offering a service to four people at a time. The process usually extends over eight weeks and includes health stabilisation, case management, exit planning and placement. DHS is conducting regular evaluations of the program. The accommodation, although not ideal, has produced some good outcomes to date.⁸

The Sobering Up Unit has been operating since 1984. It operates under the Public Intoxication Act but there is no compulsion for those referred or delivered to stay. (Refer to data tables in this Chapter).

Generally organisations were disappointed so far in the level of additional funding and program expansion to support the Dry Area Trial.

Views expressed included:

- The Stabilisation Unit concept was one point in a ten-point strategy developed by DHS before the introduction of the Dry Area Trial.

⁸ Protests from residents and traders adjacent to Whitmore Square (and ensuing legal action injunction to the Supreme Court) held up the redevelopment of the Whitmore Square site, to incorporate the Stabilisation Unit. Centenary House had been used for this purpose but the bridging program was closed in 1998 and the building converted to administration. Residents objected to the proposed change of use (even though it was reverting to a former use), as it did not fit with the Adelaide City Development Plan. Work on the site is now nearing completion and is expected to be ready for use in late 2003.

- The support plan (DHS Vulnerable Adults Framework) was already in existence before the Dry Area Trial. The strategy was seconded for political purposes to meet the requirement to address unintended consequences of the Dry Area Trial.
- MAP has received some additional funding and the Salvation Army has received some funding for the Stabilisation Unit but there hasn't been very much else.
- Various "small fund sources" were pulled out of the Vulnerable Adults Framework by DHS. This strategy pre-dated the Dry Area Trial. Some of these initiatives have been commenced but are not yet fully implemented.

In summary, only one organisation reported an increase in funding to assist in addressing the issues resulting from the displacement of drinkers and the impact of the Dry Area Trial. Some of the planned services have not yet been fully implemented or have taken considerable time to be implemented (for example the Salvation Army Stabilisation Unit). As noted earlier, the Stabilisation Unit is an early stage rehabilitation program and does not cater for the immediate problems associated with public drinkers or those exhibiting signs of public intoxication.

6.4.7 Views and Perceptions of the Dry Area Trial

What is the level of understanding regarding the Dry Area and its operation

All organisations had a good knowledge of the Dry Area and its operation. However the point was made that, as the Dry Area is not specifically sign posted, visitors to the city would not be aware of the existence of the Dry Area or its boundaries. This would also apply to some client groups.

What was the attitude of Service Providers and organisations towards the introduction of the Dry Area Trial

A majority of service providers interviewed were cynical concerning the reason for the introduction of the Dry Area. The following is representative of the comments made.

- Initially the arguments for the introduction of the Dry Area were developed around the City Safe Program – keeping people safe. This argument is not sustainable, as public drinkers have not been identified as a threat to public safety. We need to be honest about the real drivers and wear the consequences (i.e. dealing with the racist and exclusivity arguments).

A strongly held view was that the Dry Area was introduced in response to economic and social pressure on Government and the Council to address social problems emanating from Indigenous drinkers in Victoria Square and drug and alcohol issues in the northwest corner. The following views were commonly expressed:

- The Dry Area was introduced because of a perceived need to clean up Victoria Square based on manufactured outrage about the behavior of a small group of people.
- A few isolated incidents were exploited for political purposes during the City Council election.

Other views included:

- The Dry Area has given the police a lot of power to further marginalize people.
- The Dry Area trial was more about gentrification of the City than controlling the undesirable impact of alcohol consumption.
- The introduction the Dry Area was a blatantly racist policy as it is targeted at Indigenous people.

The majority of organisations (eight of the nine who responded to this question) were strongly opposed to the introduction of the Dry Area Trial.

None of the organisations interviewed had altered their attitude towards the Dry Area since its introduction. Most reported that the negative impacts on their clients, which they had anticipated, had been fulfilled. Several organisations commented that there were groups and individuals, other than their clients, whose behaviours resulted from excessive consumption of alcohol and who were a greater risk to public safety. They referred to these people as "night time revellers" or the frequenters of pubs and clubs. Several organisations also felt that those suppliers who contravened the responsible sale of liquor have got off very lightly and the supply issue has not been tackled, with pubs and liquor outlets are selling alcohol to intoxicated people.

A commonly expressed view was that the Dry Area had further marginalised people who have retreated into the West Parklands. Several interviewees expressed concern about the injuries and deaths from road accidents on West Tee which they attributed to the displacement of drinkers from the Dry Area.

What is the view of service providers and organisations on the impact of the Dry Area Trial

It was generally considered that, although the drinkers were less visible in the City of Adelaide since the introduction of the Dry Area Trial, the number of drinkers and public drunkenness in the City had not reduced.

Commonly expressed views included:

- The number of public drinkers has not reduced in the City (as witnessed by numbers of drinkers who come to the soup kitchen) –they have just moved to back streets to avoid detection.
- They have moved to the back streets and West Parklands.
- There is still a problem with public drinkers and intoxication around pubs and clubs in the North West corner of the City. These people are not homeless.

It was generally considered that the Dry Area concept is not well suited to people with high and complex needs and that the cycle of expiation notice, non-payment, community service order is a farce for homeless, poverty stricken and dysfunctional people. Service providers that have frontline contact with clients with chronic alcohol problems observed that the behavior of the police to the Dry Area has changed since the first few months of its introduction. Initially they seem to have been actively policing the Dry Area, especially Victoria Square. However it soon became evident that apprehending chronic alcoholics is pointless as they eventually end up in jail as a result of non-payment of fines and lose their housing. Service providers say that they have advocated on behalf of clients and as a result the police are now, where possible, employing other means rather than expiation notices (for example calling MAP or delivering clients to Sobering Up facilities).

The existence of the Dry Area legislation now provides an effective deterrent to public drinking in areas such as Victoria Square. However because the Dry Area is so large, it is difficult to police effectively and consistently.

What is the attitude of service providers and organisations to the lifting of the Dry Area
The overwhelming majority of interviewees wanted to see the Dry Area Trial abandoned.

A minority of organisations considered that the Dry Area should remain at least until support services were in place to prevent a re-emergence of those problems, that were causing social conflict in areas such as Victoria Square.

Although several other organisations were concerned that, without effective support services in place, the social tensions would remerge, they remained strongly opposed to the continuation of the Dry Area for social justice reasons.

The contradictory view, that a Dry Area should be retained and enforced only around all the venues where young people gather, was also put forward by two service providers.

A view expressed by some service providers was that there is sufficient strength in the existing legislation (Public Intoxication Act and Summary Offences Act) to manage those who were behaving badly including drug induced and psychotic behaviour. Emphasis should be on managing all behaviours which compromise public safety – not just those relating to alcohol consumption.

What will happen if the Dry Area is Lifted

It was generally considered that, if the Dry Area is abandoned, drinkers will move back into the centre of the City unless there is a change in the ability of agencies to support people differently.

As the drivers for the introduction of the Dry Area were tourism and business and those elements still exist, tensions would be likely to resurface unless other measures for managing inappropriate behaviour are put in place. These tensions would be exacerbated by the proposed redevelopment of the Victoria Square.

6.4.8 Summary of Views Expressed

Although not unanimous, the majority views of the service providers can be summarised thus:

- Some public drinkers, primarily Indigenous, were harassing a minority of people in Victoria Square. However the problem was not large and could have been addressed in more appropriate ways. Mental illness and poly drug use were and still are as significant a cause of inappropriate public behaviour as alcohol.
- The drivers for the introduction of the Dry Area were tourism and business. These tensions will still be there and are likely to resurface unless they are addressed by providing an appropriate level of support for disadvantaged people in the City.
- The majority of agencies would like to see the Dry Area abandoned for social justice reasons.
- If the Dry Area is abandoned, drinkers will move back into the centre of the City unless there is a change in the ability of agencies to support people differently.
- Initiatives required to support the introduction of the Dry Area are not yet in place.
- The number of disadvantaged and homeless people in the City has increased over the last two years since the introduction of the Dry Area Trial and service providers are having difficulties coping with the demand.
- Drinkers displaced from Victoria Square are drinking in back streets and the West Park lands.
- The situation in the West Parklands has deteriorated to the extent that field workers are too afraid to go there to locate clients. Drinkers are now out of the public scrutiny, which acted as a restraint on their behaviour. Violent assaults, particularly against women have increased. Much of this is not reported to police.
- Organisations on the east side of the City have not experienced an increased demand for services. Nor have they observed negative impacts on their clients since the introduction of the Dry Area. For them it is business as usual.

6.4.9 Evaluation Conclusion

The NGOs reported an increase in recent years in the numbers of homeless, vulnerable and drug affected clients needing assistance. There is no evidence to support the view that this has been as a result of the Dry Area Trial.

It is acknowledged that problems are complex and that drinkers often have a range of other issues that must be addressed, such as homelessness, health issues and poverty. However, the increase in the numbers of homeless in the West Parklands and the reported increases in violence and road accidents on West Tee cannot be attributed to a displacement of drinkers from public areas such as Victoria Square.

Drinking was occurring in the West Parklands prior to the Dry Area Trial. There is no evidence to support the commonly expressed view that the majority of drinkers who frequented Victoria Square prior to the introduction of the Dry Area are now drinking in the West Parklands or that they are City homeless. Reports from the City Loop and Bee Line Bus drivers (see Public Transport Providers) suggest that many of the drinkers came into Adelaide by train from the northern suburbs, used the Bee Line Bus to get to Victoria Square and to return to the railway station in the late afternoon. It would appear that since the introduction of the Dry Area this group is no longer coming into the City. The City Loop Bus Drivers do not report taking Indigenous passengers to West Tee.

Although Indigenous people comprised the main group of public drinkers and, to a large extent, the Dry Area Trial was put in place in response to their perceived inappropriate public behaviour, there is no evidence to suggest that they have experienced undue hardship as a result of their displacement. Except for no longer frequenting Victoria Square, many drinkers

have not changed their patterns of behaviour and seem to still drink in the City. The level of active policing, involving the issuing of expiation notices and 'harassment' of drinkers by police has diminished since the early days of the introduction of the Dry Area.

The introduction of the Dry Area Trial has had minimal impact on the majority of non-government non-Indigenous service organisations. Those providing services directly to drinkers have experienced a strong increase in demand for services. However it is important to note that this trend predated the introduction of the Dry Area Trial. Some referral and rehabilitation programs have actually shown a decrease in the percentage of people presenting for assistance with problems that are primarily associated with alcohol. This could be because some groups of drinkers are no longer coming into the City to drink.

As most organisations do not operate field services in the City but respond to clients who attend their premises, it is difficult to find evidence that the Dry Area has made it difficult for them to locate their clients and for their clients to access services. Clients who live or camp in the City regularly attend these organisations for meals and material assistance and so can be located at meal times or in the West Parklands. It is acknowledged that some clients who used to come into the City to drink may no longer be coming.

It is important to note that prior to the introduction of the Dry Area Trial, only a small number of drinkers gathered in public areas like Victoria Square on a daily basis. Others came in on pension day or at other times depending on the weather. It is acknowledged that Victoria Square is no longer used as a gathering place or point of social contact by groups of Indigenous people which included drinkers.

To date only one NGO has put additional services in place in response to the needs created by the Dry Area Trial.

Impact Area	Non Government Service Providers Outcome	Evaluation Outcome*		
		Agree	Partly Agree	Disagree
The impact of the Dry Area Trial on clients of Service Providers, particularly Indigenous clients	The Dry Area Trial is shown to be discriminatory against Indigenous people.		*	
The impact of the Dry Area trial on the ability of Organisations and Agencies to service their client groups	The Dry Area Trial has caused greater difficulty for service providers to gain access to clients, eg homeless people, marginalised people, and people with health problems.			*
The extent to which service providers have put in place relevant programs and structures to address the impact of the Dry Area Trial on their clients	Agencies with service provider responsibilities and functions have not yet put in place relevant structures to meet Dry Area requirements.	*		

* Evaluation Outcome is an assessment by the consultants, taking into account the qualitative and quantitative evidence and collected data, and comparing this with the outcomes (column 2 above) of the responses of interviewed groups/individuals.

6.5 Indigenous Service Providers

6.5.1 Services available to Indigenous Drinkers from Indigenous Service Providers and Policy Organisations

What services are available to disadvantaged and vulnerable people including drinkers in the City of Adelaide

A broad section of Indigenous service organisations and those involved in alcohol and drug policy development were interviewed.

These included Sobering Up facilities and front line services to Indigenous drinkers such as the Mobile Assistance Program (MAP), accommodation providers and crisis care for vulnerable women and children. Legal service providers, policy bodies and cultural advisory groups were also interviewed.

The Indigenous Service Providers and Policy Organisations interviewed is listed below. The methodology used is the same as that used for the non government non Indigenous organisations and service providers.

Indigenous Service Providers and Policy Organisations

Service Provider	Function	Client Group	Impact of the D.A.
Aboriginal Sobriety Group	Alcohol Management Program	Indigenous Drinkers	Increase in services MAP Some increase in No of Drinkers assisted
Kumangka Aboriginal Youth Service	Services to Indigenous Youth Street Worker and intervention and Rehab.	Indigenous Youth	Some indirect No change on services or nos assisted
Aboriginal Health Council of SA	Health Policy	Indigenous	N/A
Annie Kollmatrie (formerly Allen Bell) House	Indigenous Women's Accommodation	Vulnerable Women and Children Domestic violence Shelter	Some indirect No increase in Nos.
Aboriginal Legal Rights Movement	Indigenous Legal Support	Legal Services to Indigenous	Some increase in demand for legal services
Aboriginal Hpstels Ltd	Short Term Accommodation	Homeless Indigenous including drinkers	Minimal Impact
Aboriginal Prisoners and Offenders Support	Support Services for Prisoners, Offenders and their families		No direct impact
Adelaide University	Willo Yerrla	Cultural/ Policy	No direct impact
Nunga Miminis	Services for Indigenous Women and Children	Secure shelter for women and children Refuge from violence perpetrated by drinkers.	Indirect impact
Cyril Lindsay Hostel	Service for Indigenous Men	Hostel / Rehab and detox facilities	Some impact / No increase in Nos.
Karpandi Westcare	A Services provided by West Care	Day Centre Support for women children	indirect No increase in numbers
Aboriginal Drug and Alcohol Council	Education about Substance Misuse	Policy	N/A
Kaurna Elders	Indigenous Representatives	Cultural/ Advisory	N/A

Summary of profiling information collected from non-government organisations servicing Indigenous clients.

Number of organisations which provide outreach services to drug and alcohol effected clients	3
Number of organisations that provide sobering up facilities	1
Number of Agencies which provide meals and/ or material assistance	5
Number of agencies which provide drug and alcohol rehabilitation services.	4
Number of agencies that provide emergency accommodation.	3
Number which have received additional funding to support the introduction of the D.A.	2

6.5.2 The environment for indigenous public drinkers prior to the introduction of the Dry Area Trial

Indigenous service providers reported that prior to the introduction of the Dry Area Trial drinkers were evident in various locations in the City.

The most visible locations were Victoria Square, Whitmore Square and the areas adjacent to the premises of service providers in the South West quarter of the City, as well North Tee and the West and South Parklands.

Indigenous drinkers and their families and associates used Victoria Square as a social meeting place particularly on pension day and when the AGS provided barbeques.

There were some incidents that were on the margins of acceptable public behaviour. However these have been blown out of proportion.

6.5.3 Impact of the Dry Area on Service Providers and Various Client Groups

Accommodation – Emergency and Short Term

Service providers reported that the Dry Area has had little or no impact on the women who seek assistance in Indigenous women's shelters. Women are generally seeking escape from violence or other home /family based issues. Alcohol is not the primary cause of people moving into shelters or other forms of accommodation. It is more commonly linked to drug abuse or as a result of domestic violence. One women's facility has assisted (in 1 year) in the housing of 680 women (536 Indigenous, 144 non-Indigenous plus 521 Indigenous and 25 non-Indigenous children). These women clients are assessed as having multiple problems, 511 women assessed as having drug and alcohol problems. 75 have been housed, however, within private housing and 196 in Indigenous Hostels or general Indigenous Housing. Another Women's Shelter that provides emergency accommodation for women in stress or harm reported that it was not affected by the Dry Area but was more affected by other family issues eg domestic violence, poverty and homelessness. Nevertheless, it was recognised that some of these issues arising in the home could be exacerbated due to drinkers being displaced from the CBD.

A men's accommodation facility, capable of assisting up to 12 Indigenous men, was interviewed. Whilst men, who are often chronic drinkers, come to the facility to regain health, many stay only until they have recuperated sufficiently to leave and continue the cycle of drinking and then return for recuperation again. While they are living in the facility, the Dry Area would not impact adversely on them in fact it could be argued that the Dry Area has a beneficial effect on their rehabilitation by helping to break the patterns of behaviour associated with drinking.

Youth Services

For young Indigenous people the Dry Area has not stopped drinking in the City or the carrying of alcohol in disguised containers. However, they have been displaced from Victoria Square, which is considered detrimental, as it is the cultural centre for Indigenous people. Youth clients are apprehended for minor offences but these are not often related to alcohol. The youth service provider reported that their clients were now being harassed in the West Parklands by other drinkers and campers. This was seen as a result of the Dry Area.

Substance Management Program (ASG-MAP)

These services provide intervention and rehabilitation programs and activities associated with substance misuse. The Mobile Assistance Patrol (MAP), a service funded by ASG, provides a link with police and a basis of picking up and transporting people to safe accommodation. MAP has reacted to the Dry Area Trial by accessing clients during the day and transporting them to detoxification centres and other facilities such as hospitals, Aboriginal Housing Authority etc.

The service provider expressed the following views:

- The provision of an appropriate intervention program (for substance misuse) similar to the Stabilisation Centre is required for Indigenous people.
- The Dry Area will not prevent drinking; it will only shift it elsewhere unless appropriate services are provided.

- The ASG would prefer the establishment of facilities that meet the needs of Indigenous drinkers in a culturally appropriate way.

Drug and Alcohol Advisory- Policy Focus

Indigenous Drug and Alcohol policy bodies were adamant that the legislation was not necessary to manage the few incidents of inappropriate public behaviour that occurred mainly in Victoria Square. They stressed that the issues were complex social ones and that alcohol could not be considered as the main "stand-alone" problem. The following points were made:

- If the Dry Area is extended then facilities and services need to be put in place through upgrading existing programs.
- The services required to address the problems need to be flexible and mobile.
- The use of an expiation notice for Dry Area infringement is inappropriate where as a drug and alcohol assessment program may lead to a better outcome.

Legal Services – Service Focus

This organisation was concerned that prior to the Dry Area, Victoria Square was a significant meeting place for Indigenous people in the City. This has led to a cultural loss and drinkers have been displaced to the parklands. They also questioned the relevance of the Salvation Army's Stabilisation Unit to Indigenous people as it was not seen as being culturally appropriate.

The need for Dry Area legislation was also questioned, given the provisions of the Public Intoxication Act which were seen as quite adequate to address issues arising from public drinking.

6.5.4 New or expanded services to public drinkers to support the Dry Area Trial

The principal strategy implemented in response to the introduction of the Dry Area Trial has been an expansion of the Mobile Assistance Patrol which provides an on call, day and night intervention service to collect and deliver intoxicated or public drinkers to Sobering Up facilities (Salvation Army), the RAH, or their homes. The MAP service collects not only drinkers but also family groups and is used to some extent as a taxi service for Indigenous people who live outside the City. The MAP service is well regarded by Indigenous and other service providers as it provides effective intervention before clients get to the stage of being apprehended or charged. However, it is considered to be under resourced.

MAP still needs to seek police intervention to manage difficult clients and could not function without their support. MAP workers operate mainly in Hindley, Rundle, Festival Centre and Hotel (North Tee) precincts.

There is no Indigenous treatment or detoxification centre in the City. Indigenous service providers consider that the establishment of one would provide the cultural appropriateness, seen as essential in managing Indigenous drinkers. This is being addressed as part of the initiatives being coordinated by Cabinet Office.

There has been some increased demand for legal services from charges arising out of Dry Area violations. This demand seems to have peaked in the first six months after the introduction of the Dry Area Trial. A mobile legal service is being piloted to respond to the needs of drinkers arising from the Dry Area infringements and related matters.

6.5.5 Views and Perceptions of the Dry Area Trial

It was generally held that the number of drinkers in the City has not reduced as a result of the Dry Area Trial. Drinkers are now in different locations and as a result there are unreported assaults and rapes occurring in the West Parklands/South Parklands.

Service Providers pointed out that, for Indigenous families, the first social issue is poverty. This leads to drug and alcohol abuse, violence and then into the Justice System.

It was strongly believed that the Dry Area issues are linked to homelessness. The lack of accommodation options and the activities of the Aboriginal Sobriety Group's MAP program (transporting people to facilities and homes) highlight this need.

It was felt that there was an urgent need to stabilise alcohol dependent clients then move them to effective housing. It was suggested that the provision of a "Town Camp" Caravan Park could be used to address the homeless situation for Indigenous people in the City. Currently accommodation options were very limited and there have been few accommodation outcomes

for people camped in the West Parklands. Transitional accommodation is one of the initiatives being developed by the Dry Zone Steering Committee.

While stabilising accommodation at Cyril Lindsay House was free, a charge was made for accommodation at the Aboriginal Hostel. Some clients cannot or did not wish to pay for accommodation and prefer to camp out.

Service providers who work on the front line with drinkers suggested that currently, the localities where public drinking is most common are at Karpandi Women's Centre and the Parklands and that police activity is not as consistent in these areas as it should be.

It was strongly believed that the Dry Area was not necessary to manage the small number of incidents of inappropriate behaviour and that it should not continue.

The ACC Reconciliation Committee has deliberated on the Dry Area and developed a number of publicly recognised recommendations. Whilst these recommendations were prepared 12 months ago the Committee believes they still reflect their views in September 2003.

This summary of recommendations is included as it represents the considered position of representative Indigenous organisations and other stakeholders in the City.

"The Adelaide City Council Reconciliation Committee wishes to state very clearly that it is opposed to a dry zone. A dry zone does not address social issues, is discriminatory and has dislocated homeless and Indigenous people."

Recommendation 1: The reconciliation Committee recommends that the trial dry zone be discontinued.

Recommendation 2: In the event that Recommendation 1 is not supported by a majority of Council and the State Government of SA, we recommend that the dry zone only continue as a trial, with further more rigorous evaluation with an emphasis on adequate data collection and implementation of support services.

Recommendation 3: ...We recommend that Adelaide City Council and the State Government of SA explore innovative ways to implement existing legislation that can better safeguard the community against dangerous and offensive behaviour in the public realm without denying citizens the choice to enjoy a social drink in public space, which exists in most metropolitan Adelaide.

Recommendation 4: We recommend that Adelaide City Council participate in the development of a crime prevention strategy aimed at reducing the irrational public fear of Indigenous people and their cultural gatherings in the public realm.

Recommendation 5: We recommend that the Adelaide City Council develop a strategy to encourage more positive media perceptions and projections of Indigenous people in our community by highlighting the achievements of individual Indigenous people in our community through the Adelaide City Council Website and through the publication About Adelaide.

Recommendation 6: We recommend that Adelaide City Council liaises with Attorney General... and Police Minister... to ensure that better quality and objective statistical information is collected and presented to the public regarding offences in the city.

Recommendation 7: The Reconciliation Committee recommends that Adelaide city Council engage with the State Government and other agencies to explore alternative strategies for public safety. These strategies should be developed on the premise that there are many causes of behaviour problems and offences in the public realm not related to public drinking, and which do not further contribute to the perpetuation and reinforcement of racial stereotypes in our community.

6.5.6 Summary of views expressed

A range of views were expressed strongly by Indigenous service providers and can be summarised thus:

- The presence of a Dry Area was abhorrent to Indigenous people as it sent inappropriate signals to the general public about relatively small number of drinkers who were not necessarily representative of the broader Indigenous community.
- There is a strong desire to ensure the services provided to Indigenous people are provided in a culturally appropriate way and that this is best achieved through relevant Indigenous organisations. An example of this is an Indigenous Stabilisation Facility.
- Indigenous service providers consider that the ASG's MAP activity is a successful program focused on working with police to transport Indigenous drinkers and other people to safe places (generally their home or the Sobering Up Unit) and that this service is under resourced.
- There is concern within Indigenous organisations regarding the capacity and appropriateness of some rehabilitation programs provided to Indigenous drinkers. There is an expectation that some refocusing will be required to ensure rehabilitation does occur and people re-enter the general community.

6.6 Evaluation Conclusion

Indigenous NGOs expressed very similar views to the non Indigenous NGOs in that they reported an increase in recent years in the numbers of homeless, vulnerable, and drug affected clients needing assistance. There is no evidence to support the view that this has been as a result of the Dry Area Trial.

The Indigenous NGOs drew a strong relationship between homelessness, the increased violence in the West Parklands and the Dry Area Trial. As discussed earlier, there is no evidence to support this view.

Although Indigenous people comprised the main group of public drinkers and, to a large extent, the Dry Area Trial was put in place in response to their perceived inappropriate public behaviour, there is no evidence to suggest that they have experienced undue hardship as a result of their displacement. The main adverse consequences are the displacement of all Indigenous people from Victoria Square. Even though they may not be drinkers themselves, they no longer feel comfortable in Victoria Square and their traditional patterns of social interaction have been disrupted.

Except for no longer frequenting Victoria Square, many drinkers have not changed their patterns of behaviour and seem to still be drinking in the City. The level of active policing, i.e. issuing of expiation notices and the policing of public drinkers, has diminished since the early days of the introduction of the Dry Area.

The introduction of the Dry Area Trial has had minimal or no impact on the majority of non-government Indigenous service organisations.

Those providing services directly to drinkers have experienced strong demand for services. One such organization is the MAP Program, which has been expanded in response to the introduction of the Dry Area and is meeting its objectives of early intervention.

There has been some increased demand for legal services from charges arising out of Dry Area violations. This demand seems to have peaked in the first six months after the introduction of the Dry Area Trial.

A mobile legal service is being piloted to respond to the needs of drinkers arising from the Dry Area infringements and related matters.

Impact Area	Non Government Service Providers Outcome	Agree	Partly Agree	Disagree
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<ul style="list-style-type: none"> The impact of the Dry Area Trial on clients of Service Providers, particularly Indigenous clients. 	<ul style="list-style-type: none"> The Dry Area Trial is shown to be discriminatory against Indigenous people. 		*	
<ul style="list-style-type: none"> The impact of the Dry Area trial on the ability of Organisations and Agencies to service their client groups 	<ul style="list-style-type: none"> The Dry Area Trial has created some increase in demand for legal assistance and has dispersed clients from Victoria Square. This has dislocated patterns of social activity. Clients are more difficult to locate. Move to West parklands Increase in violence. Dry Area linked to homelessness There has been a marginal increase in demand for services of front line drug and alcohol organisations. 	*	*	
<ul style="list-style-type: none"> The extent to which service providers have put in place relevant programs and structures to address the impact of the Dry Area Trial on their clients 	<ul style="list-style-type: none"> The ASG has received funding to support the Dry Area. The Principal initiative has been the MAP Program. 			

7. Residents

7.1 Purpose and focus of this chapter

The purpose and focus of this chapter is to identify, assess and evaluate public perceptions regarding the impact of the Adelaide Dry Area. The views of residents were obtained through individual interviews and evaluated in relation to the project Terms of Reference. The main areas explored and evaluated were:

- Knowledge and understanding about the role and location of the Adelaide Dry Area.
- Identification of residents' pre-disposition towards Dry Areas.
- The impact of the Dry Area on the residents' feeling of safety.
- Residents' view of the impact of the Dry Area.
- Residents' views on the retention or lifting of the Dry Area.

7.2 General

In order to test the views of residents to the Dry Area Trial, a sample comprising 25 permanent residents of the City of Adelaide, drawn from within the Dry Area, was interviewed by telephone and the issues thoroughly explored. The average duration of each interview was approximately 25 minutes.

7.3 Residents

7.3.1 Residents' Views and Knowledge Regarding the Dry Area.

Knowledge of the Dry Area and its restrictions

Nearly all respondents were aware that a Dry Area Trial had been introduced in the City. The exception was one female respondent (under 20) who was not aware of the Dry Area Trial even though she had been a resident in the city all her life.

However the restrictions imposed by the Dry Area were not well understood by many. Three (3) residents had no knowledge, thirteen (13) had some knowledge and nine (9) had a good knowledge of the areas included in the Dry Area Trial and the restrictions that apply. Many thought that it was limited to the Squares in the City, particularly Victoria Square and Whitmore Square.

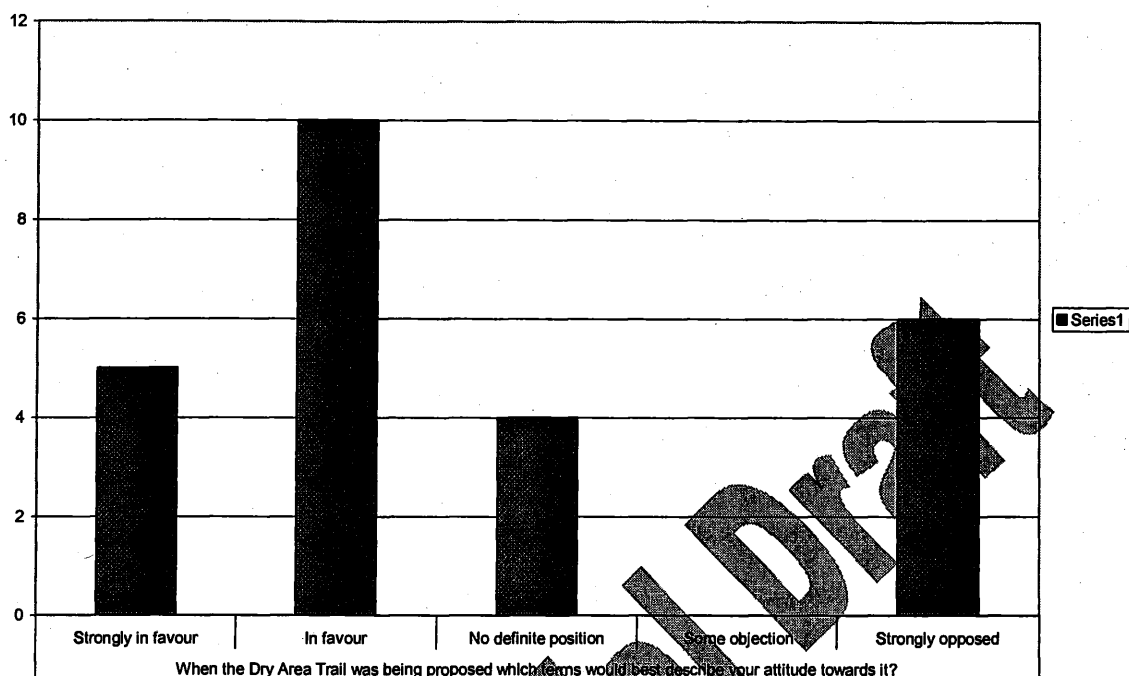
Reasons for the introduction of the Dry Area

The majority of interviewees considered that the Dry Area was introduced to address inappropriate behaviour by public drinkers particularly in Victoria Square, which was creating a public nuisance, interfering with the ability of the general public to use public spaces without harassment, interfering with businesses and tourism and creating a bad impression for visitors to the City.

A minority considered that it was a politically orchestrated beat-up in response to a couple of isolated incidents of inappropriate behavior by disadvantaged people. It was a blatant attempt to satisfy the concerns of businesses around Victoria Square, particularly large hotels involved in tourism.

Three interviewees considered that the Dry Area Trial was targeted at Indigenous people who gathered in Victoria Square and was therefore racist and discriminatory. It was considered by North Adelaide residents that North Adelaide was included, not because there were any manifest problems, but in order to counter claims of social and racial discrimination.

7.3.2 Attitude towards the introduction of the Dry Area.



As shown in the above graph, the majority of interviewees (60%) were in favour of the proposed introduction of the Dry Area Trial.

Expected benefits of the introduction of the Dry Area (if in favour)

The chief reason given by residents for supporting the introduction of the Dry area Trial was:

- The expectation of returning public areas for public use to *all the public* by addressing drunkenness particularly in Victoria and Whitmore Squares and dealing with inappropriate and threatening behavior characterised by aggressive begging, harassment, verbal abuse and violence.

Expected disadvantages (if not in favour)

The chief reasons given for opposing the introduction of the Dry Area Trial were:

- That it was a racist policy in that it was targeting Indigenous people and that it would only move the problem to other areas where Service Providers would have difficulty servicing their clients.
- That there were very few incidents of interference with the general public and that the issues had been beaten up by the media and exploited for political purposes.
- North Adelaide residents could not see any need for it. It was felt that the Dry Area Trial discriminates against those in high-rise units without a garden who wish to use Wellington Square for a Sunday picnic incorporating alcohol. They considered that North Adelaide had been included to avoid claims of social discrimination.

Change of attitude as a result of experience of the Dry Area Trial.

Only two people changed their position following the introduction of the Dry Area Trial. One was a resident on South Terrace.

The chief reasons given were:

- One respondent was strongly in favour of the initiation of the Trial but feels that it has not achieved anything for him in his location. In fact he thought that the situation with regard to the South Parklands had deteriorated as a result of the Dry Area Trial because of some relocation of the problem from the Squares in the City. He felt that unless it was uniformly policed and extended to address the problem in the South Parklands he could not see any advantages in the continuation of the Dry Area.

- Some people expressed concerns about shifting the problem from the Squares in the City to other areas, particularly the parklands and the West End of the City adjacent to the premises of welfare services providers.

It is interesting to note that many interviewees who supported a continuation of the Dry Area also expressed this last view.

7.3.3 Perceptions and Experiences of Inappropriate Public Behaviour

Problems with public drinking/public drunkenness in the City of Adelaide prior to the introduction of the Dry Areas.

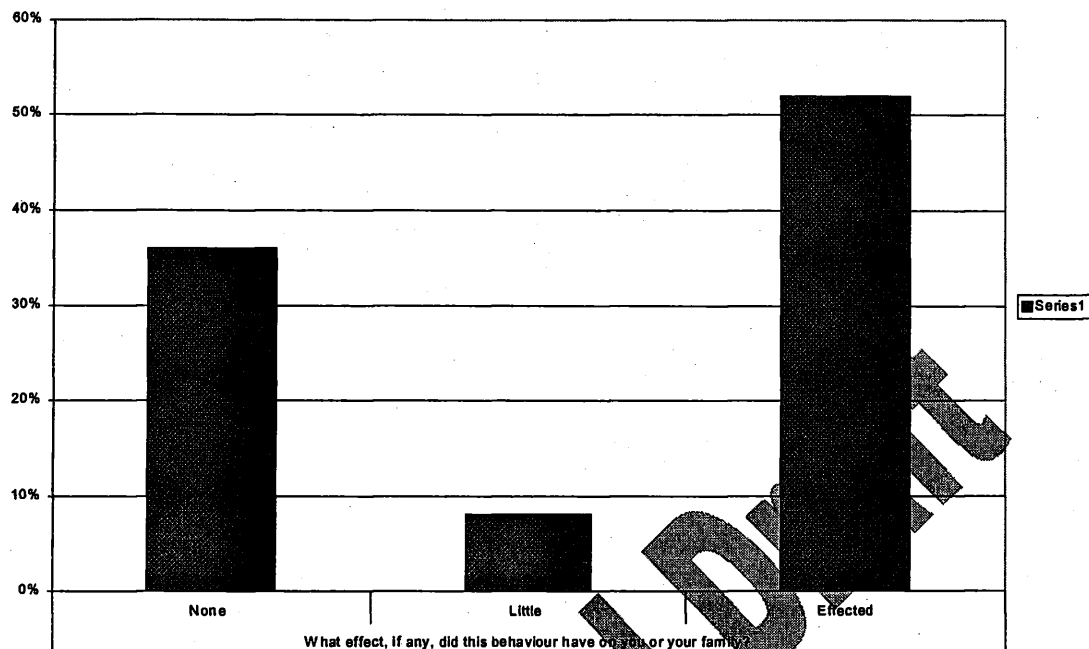
The majority of interviewees (twenty two of the twenty five) considered that prior to the introduction to the Dry Area Trial, they had been aware of problems associated with public drinking/ public drunkenness in the City of Adelaide.

Views about the severity of this problem varied from those who had directly observed and experienced instances of harassment, verbal abuse, aggressive begging, violence and even personal assault (13 respondents), to those whose knowledge of the problem was derived from media reports. Several respondents quoted reports in the *City Messenger* as their source of information influencing their views.

Concerns about inappropriate behaviour were centred on Victoria Square and Whitmore Square.

- Others were aware of some problems with drinkers in Victoria Square but considered the problem fairly minor and overstated. Issues emanating from the behaviour of mentally ill and drug-affected people were considered more disturbing than drinkers of alcohol, as the behaviour of this group was less predictable.
- Problems of noise, aggression and vandalism from patrons leaving nightclubs and licensed premises were also quoted.
- Three respondents did not consider that there were any problems associated with public drinking or public drunkenness in the City or at least no more than from other users of public spaces in the City. This was because they did not consider the public consumption of alcohol by individuals or groups on Victoria Square as a problem for anyone with a compassionate and tolerant view of homeless and disadvantaged people and considered that these groups had a right to drink wherever they felt comfortable.

Effect, if any, on you or your family of inappropriate behaviour resulting from the public consumption of alcohol.



Just over half of the 25 residents interviewed (52%) cited personal experience of negative encounters with public drinkers. These incidents occurred principally in Victoria Square but also on Whitmore Square, Wright Street and South Tee.

Impacts reported included:

- Feelings of apprehension when walking in Victoria Square and Whitmore Square when groups of noisy drinkers were gathered;
- Incidents of harassment for money and cigarettes, sometimes with aggression if refused or ignored;
- Being the subject of very strong abusive language;
- Having their car bonnet thumped at traffic lights;
- Witnessing an intoxicated man weaving out in front of traffic in Victoria Square;
- a man playing 'chicken' in the traffic with a baby in a pram in Victoria Square;
- Public fighting and violence by men against women and women against women;
- Two incidences of assault were reported:

On one occasion a man tried to intervene when a woman was being seriously bashed. (She was on the ground and being punched in the face and was bleeding profusely). The respondent was punched in the face by another member of the group and suffered a broken cheekbone. This assault was not reported. Another instance was reported from a man who was physically jostled and knocked to the ground after refusing requests for money. This incident was also not reported.

Other reports included:

- Female staff attending the Law Courts refusing to cross Victoria Square particularly in the evening;
- Witnessing vandalism, public urination and defecation;
- Those living in the West End and on South Tee reported graffiti, vandalism to cars, drunk people camping on their verandah, door step or in their carport;
- Needing to call the police on half a dozen occasions to break up serious fights and intervene in violence against women in the South Parklands;
- Needing to call the police to attend fights in Wright Street on several occasions.

All interviewees believed that excessive public consumption of alcohol was a major factor influencing the behaviour described above.

Reduction in public drinking /public drunkenness in the City as a result of the introduction of the Dry Area.

The majority of the interviewees (twenty two of the twenty five) considered that the number of public drinkers had reduced in the city. They noted that public drinkers were no longer in evidence in Victoria Square and, to a major extent, Whitmore Square. It was suspected that they had moved into less public locations in the City or relocated to the Parklands. Interviewees who thought that the number of public drinkers had not reduced in the City considered that, although no longer so visible particularly in Victoria Square, public drinking was still taking place in back allies, on North Tce or in the Parklands.

The view of the majority can be summarised as "public drinkers are not so visible" and "Victoria Square and Whitmore Square have been cleaned up". There was a widely held perception that the Dry Area was not uniformly policed.

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Impact of the Dry Area on you or your family

Those residents who reported a positive impact from the Dry Area Trial reported the following comments:

- Improved feelings of safety and security in Victoria Square and Whitmore Square.
- These areas have been returned for the use of all the public not dominated by groups who turned these public areas into "no go areas".
- Families were able to use the areas for picnic and family footy.
- Indigenous families (without alcohol) are starting to come back to use Whitmore Square. This was seen as positive.
- There was less noise and public damage at night around the Whitmore Square area.
- No incidents were reported in relation to Victoria Square

Those residents who thought that the situation had only marginally improved or not improved since the introduction of the Dry Area made the following comments:

- Several residents commented that there were still problems with drug affected people as well as alcohol (poly drug use) particularly in the South West Quarter.
- The situation on South Tee relating to drinking and violent behaviour in the South Parklands was perceived by some of the residents in the apartments opposite as having escalated since the introduction of the Dry Area Trial. They described themselves as having a front row seat to shockingly violent bashings particularly towards women, which they found very distressing.
- Concern was raised about inappropriate behaviour adjacent to areas used by women eg the Women's Soccer Club and St. Aloysius Oval in the South Parklands.

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Areas in the City where the impact of public drinking / drunkenness is severe

Twenty two of the twenty five interviewees considered that there were areas in the city where the impact of public drinking /public drunkenness was more severe than in other areas.

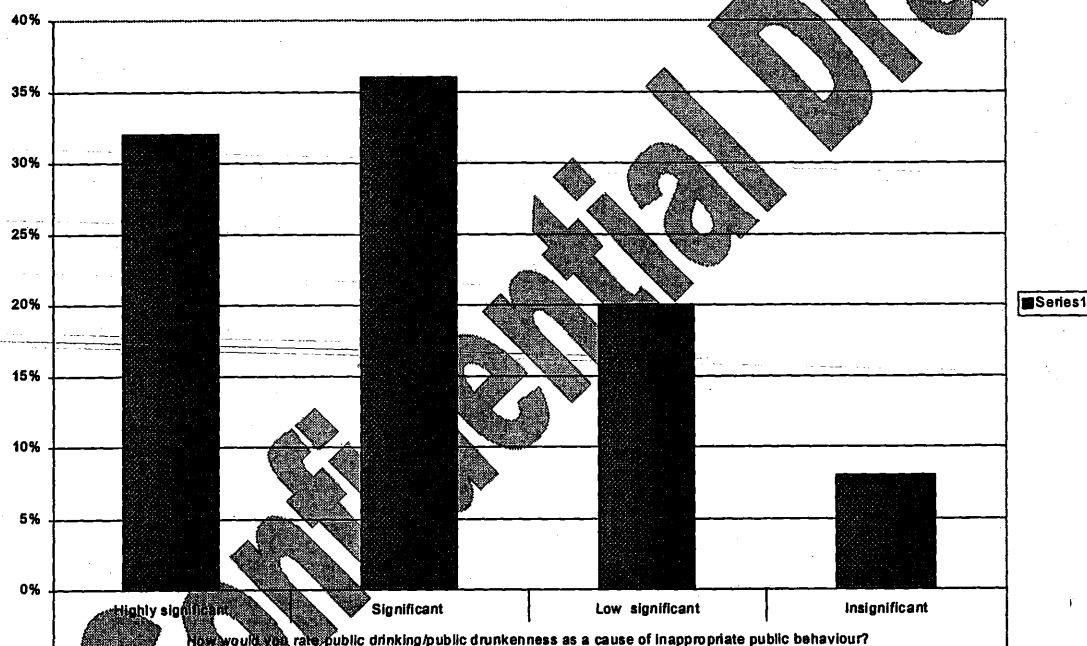
Prior to the Dry Area, Victoria and Whitmore Squares were of greatest concern, followed by the South and West Parklands and North Tee. It was generally felt that the situation has improved in Victoria Square and Whitmore Square.

It was thought that North Terrace did not seem to be policed to the same extent but generally these drinkers do not bother residents.

Respondents complained about patrons exiting from licensed premises late at night. The General Havelock and Night Clubs in Pirie Street were mentioned.

Currently there is concern about drinking in the South Parklands by residents on South Tee. and drinking in the West Parklands, West Tee. and Wright Street by residents in the North West Quarter of the City.

Assessment of public drinking /public drunkenness as a cause of inappropriate public behaviour



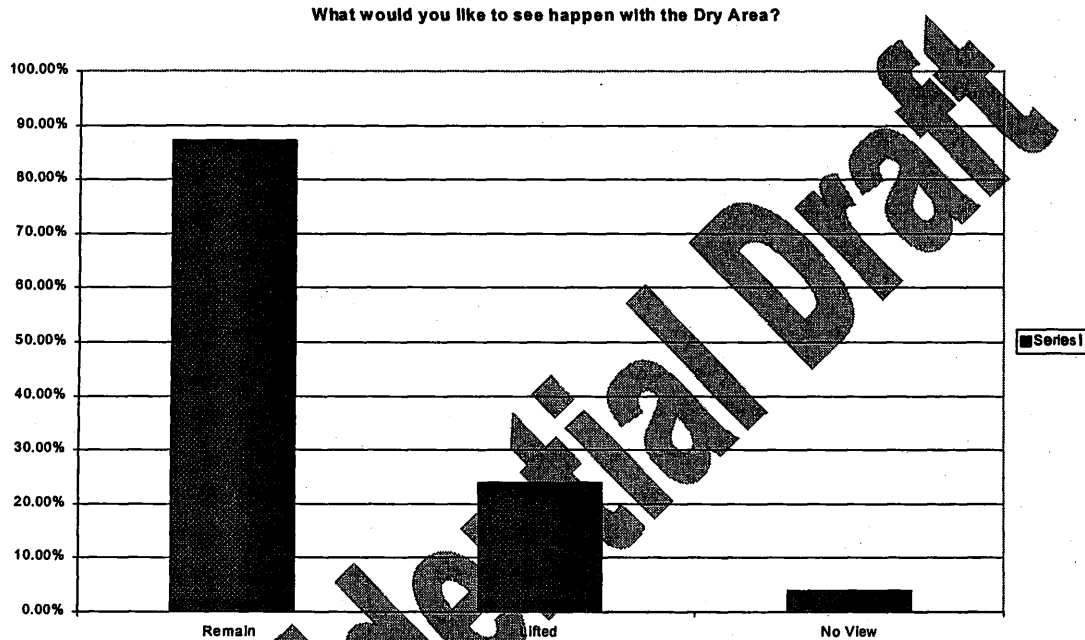
Although the majority of interviewees considered that public drinking and the resulting public drunkenness was a highly significant or significant factor affecting the inappropriate and undesirable public behaviour already described, the majority volunteered that alcohol was not the only factor. Mental illness and poly drug use together with social issues such as homelessness, were also identified as compounding factors.

7.3.5 Views on the lifting or continuation of the Dry Area

Consequences of lifting the Dry Area

The majority of interviewees (80%) considered that if the Dry Area was lifted, the situation would revert to that prior to the introduction of the Trial; that is, drinkers would return to Victoria Square and Whitmore Square.

Views on the lifting of the Dry Area



The majority of interviewees would like the Dry Area retained as they considered that it had played a major role in returning Victoria Square for the safe use of the majority of the public.

- Many expressed a desire to see more effort made to address the causes and symptoms of the problems and were concerned that the issues had just been moved to other locations.
- Residents on South Tee would like to see the Dry Area extended to include at least a strip of the Parklands along South Tee and to see it more rigorously policed.
- North Adelaide residents did not see any need for the Dry Area in North Adelaide, particularly Wellington Square, which has no toilets and rarely attracted "undesirable" public drinkers.
- Several interviewees made the point that begging is common in every city in the world but it is the combination of large, noisy groups and aggressive behaviour that causes people to fear for their safety.
- A view was expressed that, prior to the introduction of the Dry Area, when larger groups of Indigenous drinkers gathered in Victoria Square (usually two groups, one on each side) "terrorising" passers-by and making them 'run the gauntlet' had become a bit of a game. The size of the group was mentioned as a factor influencing peoples' apprehension levels. The number of drinkers in the Square seems to have fluctuated with the seasons, time of day and day of the week.

7.3.6 Summary of views expressed

- Residents do not have clear knowledge of the exact area covered by the Dry Area Trial or the nature of the restrictions.
- Residents expressed strong support for the introduction of the Dry Area.
- Significant numbers reported negative experiences in public areas prior to the introduction of the Dry Area Trial, which they attributed to public drinking.
- Most of the adverse comments about pre Dry Area public behaviour related to Victoria Square.
- Residents considered that other issues e.g. drugs, mental health and homelessness also impacted on inappropriate social behaviour and that they would like to see more effort made by the community to address the complexity of social issues affecting disadvantaged people in the City.
- Residents displayed improved perceptions of public safety since the introduction of the Dry Area Trial. Notable exceptions were the residents of South Tee.
- Residents expressed strong support for the retention of the Dry Area.

7.4 Evaluation Conclusion

A majority of the 25 interviewees reported that it was their perception that there had been a marked decrease in the incidence of public drinking in areas such as Victoria Square and Whitmore Square. Many commented that they thought the problem might have shifted to back alleys and the parklands. It was considered that the unacceptable behaviour surrounding licensed premises had not reduced as a result of the introduction of the Dry Area Trial. The majority of interviewees indicated that it was their experience or perception that incidents of violent behaviour, harassment of the public and damage to property had significantly reduced since the introduction of the Dry Area Trial.

The observations of incidents in Victoria Square and Whitmore Square since the introduction of the Dry Area have certainly reduced dramatically as supported by police data. However there is no evidence to suggest the public drinking across the four quadrant of the CBD and consequent inappropriate public behaviour has been reduced.

Interviewees reported an improvement in feelings of public safety and security when using or traversing public spaces around the City, particularly Victoria Square and Whitmore Square. Interviewees who reported avoiding these areas prior to the Dry Area Trial now feel comfortable using them again. The Dry Area Trial appears to have been most effective in the newly declared areas, particularly Victoria Square and Whitmore Square where the problems prior to the introduction of the Dry Area Trial were considered most acute. However residents on South Tee, reported that the situation in relation to violence, harassment of residents and property damage had deteriorated on South Terrace and in the South Parklands since the introduction of the Dry Area. Residents adjacent to the premises of service providers in the North West Quarter considered that there had been no improvement except in Whitmore Square.

Varying views were put forward on whether the number of drinkers in the South Parklands had increased in the last two years. The results were inconclusive.

There has been little change in the long standing Dry Areas of Rundle Mall, Hindley Street and adjacent streets.

Residents did not see the need for North Adelaide to be included in the Dry Area as the issues associated with public drinking in North Adelaide were insignificant compared with the central City area.

The introduction of the Dry Area Trial would appear to have reduced tensions between residents and public drinkers in areas such as Victoria Square and Whitmore Square, which were previous flash points.

It is interesting to note that a number of respondents who supported the continuation of the Dry Area expressed compassion and concern for the drinkers who may have been displaced from the Square.

Many also made the point that they had no objections to Indigenous people using public spaces such as Victoria Square but only objected to the violent, threatening and antisocial behaviour resulting from public drinking.

Impact Area	Resident Outcomes	Consultant Evaluation*		
		Agree	Partly Agree	Disagree
<ul style="list-style-type: none"> The impact of the Dry Area Trial on perceptions of public safety 	<ul style="list-style-type: none"> Improved perceptions of public safety 	4		
<ul style="list-style-type: none"> The impact of the Dry Area Trial on reducing incidence of public drinking/ public drunkenness and associated inappropriate behaviour across the four quadrants of the Adelaide CBD. 	<ul style="list-style-type: none"> Reduced incidences of public drinking/ public drunkenness and associated inappropriate behaviour 		(Not in all area across the CBD)	

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8. The Public's Perspective

8.1 Purpose and focus of this chapter

The purpose and focus of this chapter is to identify, assess and evaluate public perceptions regarding the impact of the Adelaide Dry Area. Their views were obtained through survey and evaluated in relation to the project Terms of Reference. The main areas explored and evaluated were:

- Knowledge and understanding about the role and location of the Adelaide Dry Area.
- Identification of the public's pre-disposition towards Dry Areas.
- The impact of the Dry Area on the public's feeling of safety.
- The public's view of the impact of the Dry Area.
- The public's view of changes in behaviours from 2 years ago to now.
- The relative importance of public drinking and drunkenness as a community issue.
- Identification of those community issues that have greater priority than public drinking and drunkenness.

8.2 General

In order to test the views of the public in respect of the Dry Area Trial, a sample of 110 people were selected at nominated locations within the existing Dry Area. All were asked to complete a survey document administered by an interviewer.

Location of Survey	Number of Respondents	Most Frequented area ⁹
Hindley St	10	10 Hindley St
Hindmarsh Square	10	2 Infrequent** 8 Hindmarsh Square
Hurtle Square	8	1 North Tee 1 Victoria Square 7 Hurtle Square
Light Square	4	1 Rundle Mall 1 Rundle St East 2 Light Square
North Tee	11	1 Gouger St 1 King William St
Rundle St East	11	11 North Tee 11 Rundle St East
South Tee	9	7 South Tee 1 King William St 1 Rundle Mall 1 Rundle St East
Victoria Square	38	31 Victoria Square 1 Rundle Mall 2 North Tee 4 Infrequent**
Wellington Square	4	1 Hindley St 1 North Tee 2 Wellington Square
West Tee	5	1 Carrington St/Victoria Square 3 Rundle Mall 2 West Tee
Whitmore Square	0***	
TOTAL	110	113

⁹ Note: * Table columns will not reconcile due to some respondents offering more than one area for which they wished to provide views. **Infrequent, means the respondent was unable to identify a location in the CBD or North Adelaide where they frequented at least once a month. ***Interviewers visited Whitmore Square several times but no respondents were obtained through a combination of limited numbers of people at the times of day visited, and those asked declining to be interviewed.

The sample is considered to be a representative cross section of the population and therefore provides a valid commentary for this evaluation. The following sections restate the questions posed and provide an interpretation of respondents' views.

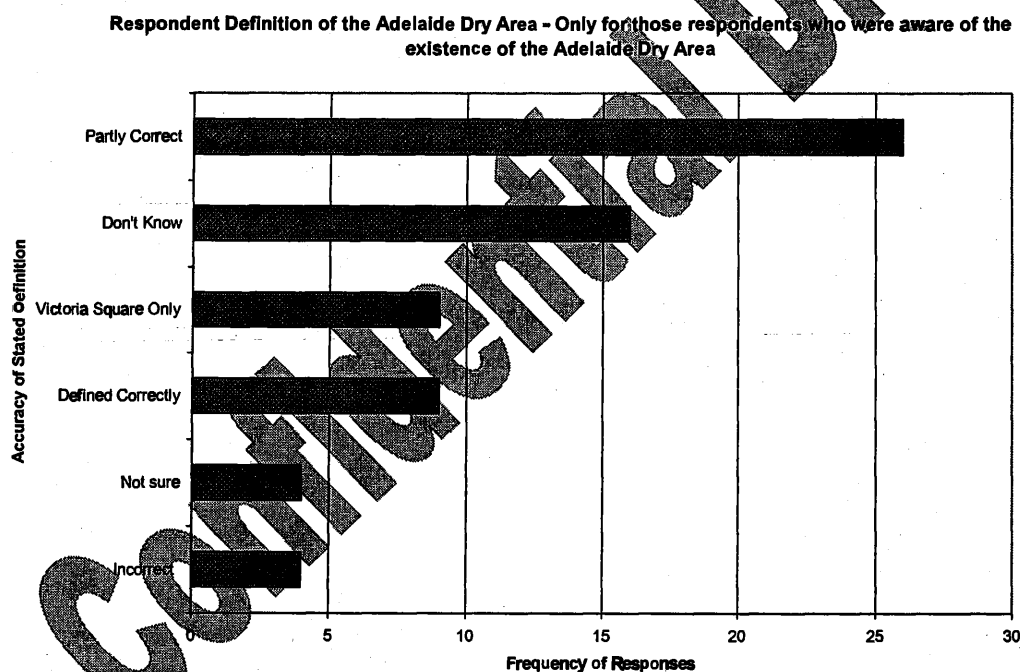
8.2.1 Dry Area- Knowledge and Understanding

Questions posed and views expressed in this section of the evaluation are focused on identifying knowledge and understanding about dry areas in general, and the Adelaide Dry Area specifically. Questions therefore relate to knowledge, definitions, predisposition and views about the impact that the Dry Area Trial has had.

Knowledge of existence of the Dry Area

Question: Do you know that a Dry Area currently exists within the City of Adelaide (CBD) and North Adelaide?

Respondents: 81% of respondents knew of the existence of the Adelaide Dry Area. However knowledge of the boundaries of the Dry Area were less obvious. The following chart indicates the public view of the boundaries for the Dry Area and the number of occurrences of that definition.



It should be noted that, of the 67 respondents who were aware of the Dry Area, only 9 respondents (13% of those who were aware of the Dry Area, or 8% of total respondents) were able to locate its boundaries correctly. Equally importantly, 24 respondents could not identify the boundaries, did not know how to define the boundaries or were unsure and declined to define the boundaries.

Definition of a Dry Area

Question: Which of the following statements best meets your description/definition of a Dry Area?

Respondents statements:

A ban on being drunk	3
A ban on the consumption and carrying of alcoholic containers	69
None of the above	0
Don't know	5

Comments: In terms of understanding the rules that apply in a Dry Area (i.e. definition), relevant respondents indicated that they had a clear knowledge of the definition of a "ban on the consumption and carrying of

alcohol in a public place where a Dry Area has been declared". 88% of relevant respondents defined the rules that are imposed in Adelaide's Dry Area.

Summary

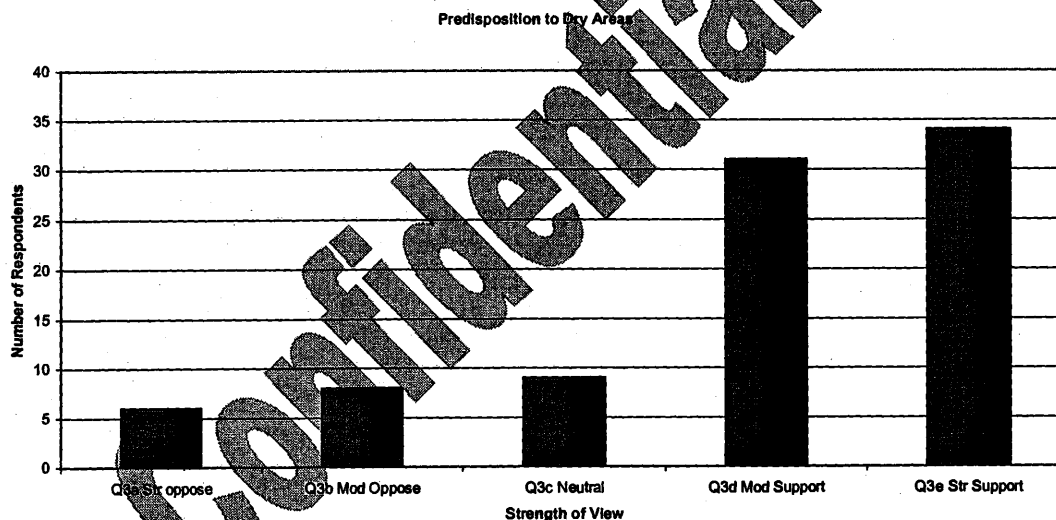
Based on the above responses, it is inferred that the public has limited knowledge about the location of the boundaries of the Dry Area but has significant knowledge regarding what a dry area signifies.

8.2.2 Identification of the public's pre-disposition towards Dry Areas

Predisposition to Dry Areas

Question: Which of the following statements best describes your views about Dry Areas?

Respondents: For the purposes of understanding the range of views expressed by respondents, it was necessary to establish the underlying predisposition of respondents to the



idea of Dry Areas. They were therefore asked to indicate their level of support for dry areas in general. The following chart, chart 9, provides an analysis of respondent's views.

Respondents were largely polarised in their views about Dry Areas, with 74% of respondents moderately or strongly supporting dry areas whereas 16% were moderately or strongly opposed to the notion of dry areas. On balance, a significant proportion of respondents support dry areas.

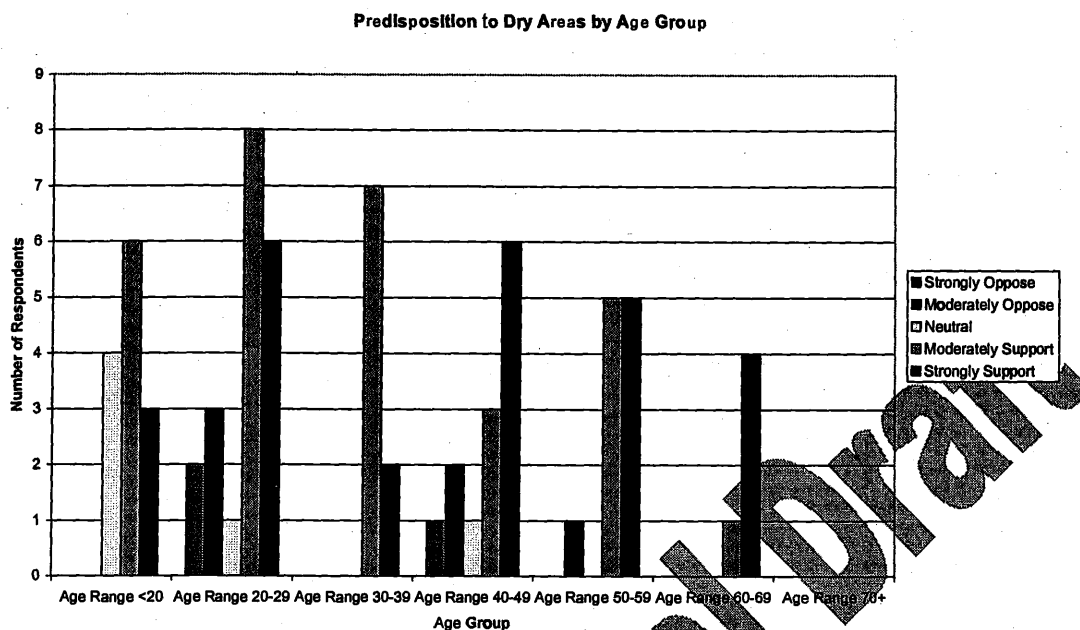
Responden's by Age Group and their Predisposition to Dry Areas

Through additional analysis of respondent data, the general predisposition shown above was examined on an age group basis to establish whether opinions varied according to age. On an "age group" basis these same respondents produced the following distribution of view.

Two age ranges, namely the 20-29 year and the 40-49 year groups were the only two groups where the respondents registered views in all categories from strong opposition to strong support. The 20-29 year group provided the greatest opposition to Dry Areas of all age

groups, but this same group also provided the strongest overall support for Dry Areas. Opposition to Dry Areas was non-existent in most other age group categories.

Overall, the level of support for Dry Areas was high for all major age groups.



Summary

There is significant support for the application of dry areas as a means to manage public drinking. This support is high for all age groups. However, there is also a moderate level of opposition to the application of Dry Areas in the 20-29 year age group.

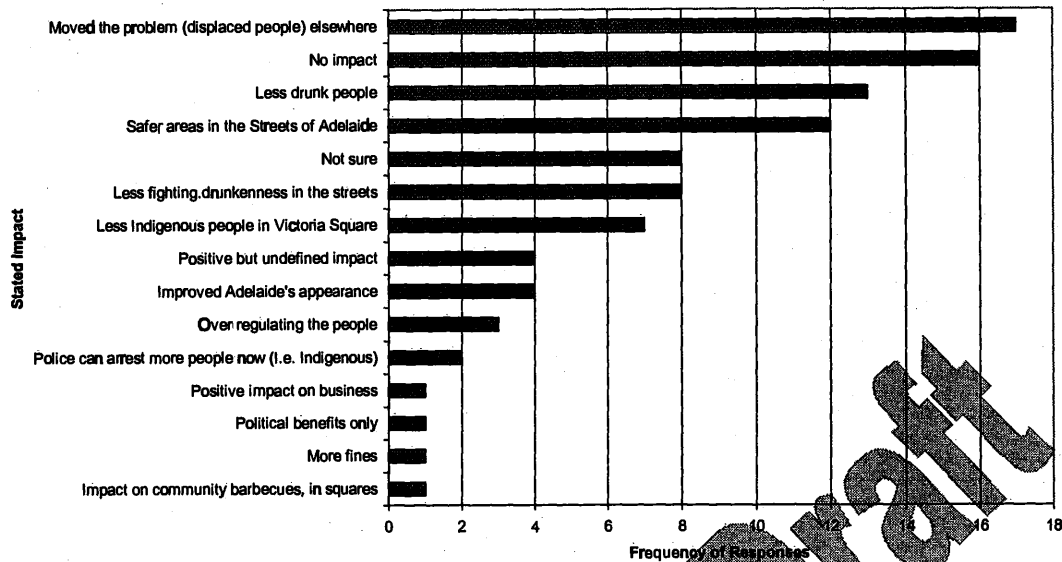
8.2.3 The impact/effect of the Dry Area

Impact of the Dry Area

Question: What do you think has been the impact/effect of the Adelaide Dry Area? (This question was only asked of those respondents who indicated they knew of the Adelaide Dry Area).

Respondents: Views expressed on the impact of the Dry Area Trial were wide ranging. These views are summarised in the following chart.

Impact of the Dry Area - Only for those respondents who were aware of the existence of the Adelaide Dry Area



The public, through their perceptions or direct experience, hold a wide range of views about the impact of the Dry Area Trial. Whether these impacts are supported by fact or are based on media reports, personal experience, observation, or discussion is not known. What is relevant is that these are the perceptions held by the respondents.

8.2.4 The impact of the Dry Area on the public's feeling of safety

A key consideration regarding the purpose of the Dry Area Trial was to enhance the perception of safety within the City of Adelaide. Questions were posed that focused on describing what was "safe" and "unsafe" in regard to public places and indicating their perceptions of personal safety now compared to before the introduction of the Dry Area.

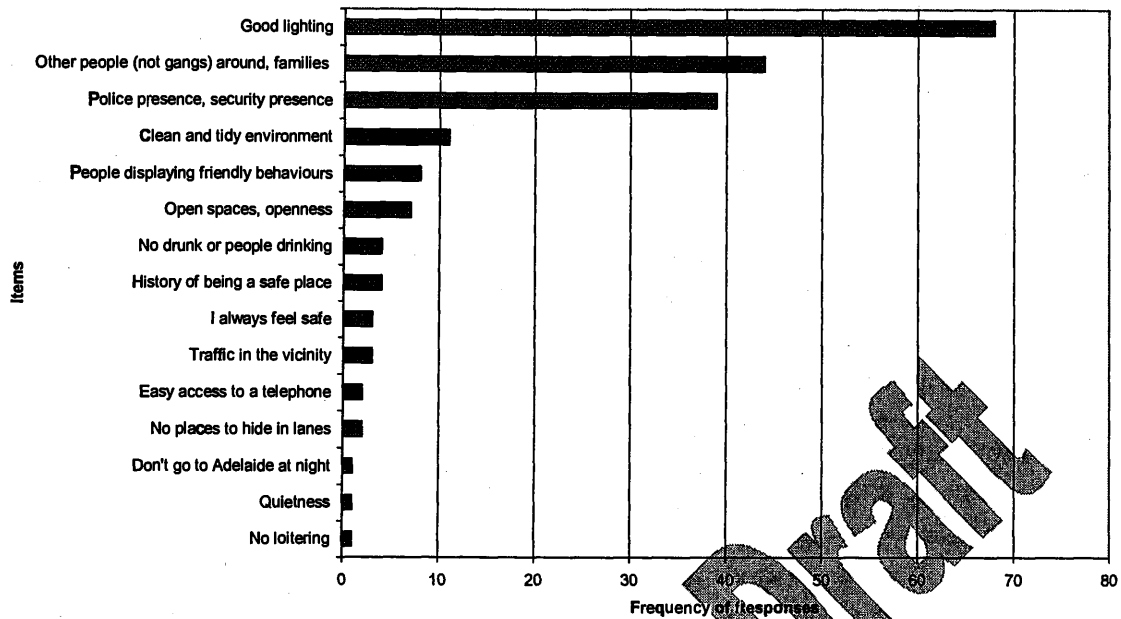
Level of Safety

Question 1: What are the characteristics (or things) you see or look for, which make you feel safe in a public place?

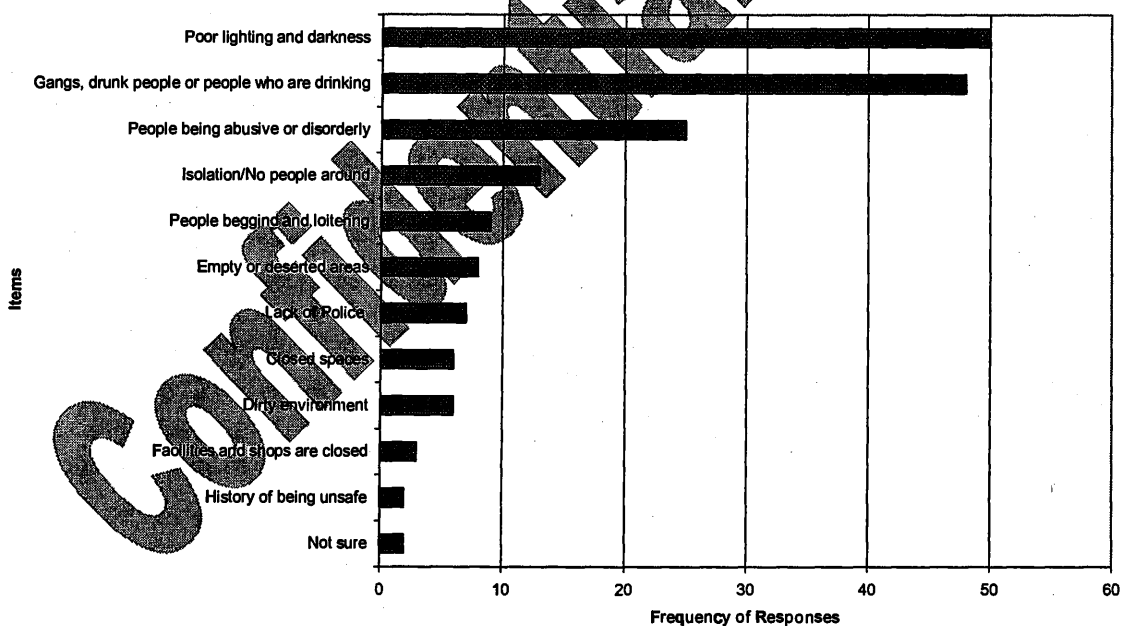
Question 2: What are the characteristics (or things) you see or look for, which make you feel unsafe in a public place?

Respondents: The range of characteristics or things that respondents see or look for as defining points for feeling safe or unsafe in a public place are shown in the following frequency charts. These questions were aimed at focusing respondents' views, as part of discussing the relative safety of Adelaide prior to and since the declaration of the Dry Area Trial.

Characteristics of Feeling Safe in a Public Place



Characteristics of Feeling Unsafe in a Public Place



These questions were aimed at focusing respondents' views, as part of discussing the relative safety of Adelaide prior to and since the declaration of the Dry Area Trial.

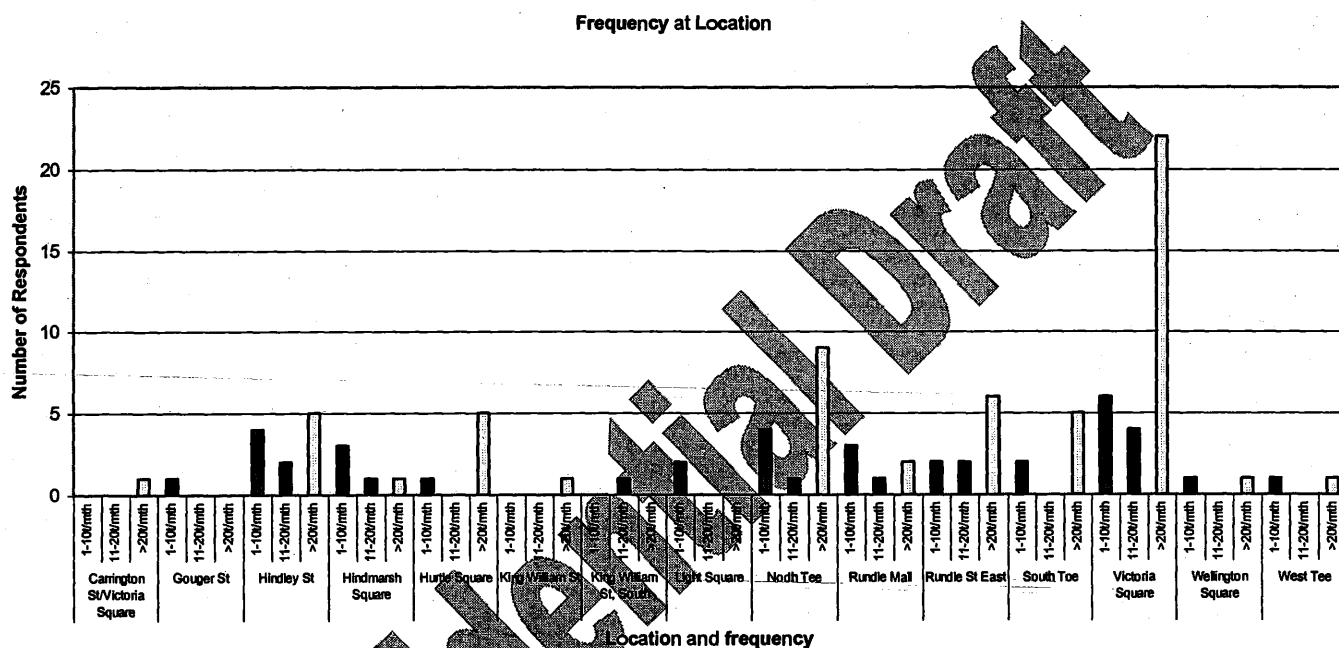
The most important characteristics of safety were good lighting, people being present in visited locations, and the clear presence of police and security personnel. Poor lighting, groups of people who are drinking and people being abusive or disorderly highlighted unsafe characteristics. In terms of the overall view expressed, lighting is considered to be the most important aspect of public safety.

Frequency of being in specific locations

These questions were asked to ensure that respondents were providing comments on locations they frequented regularly and, as a result, their views were based on familiarity with a location rather than on a perception they may have developed from listening to other people.

Question: How often over the past two years have you visited this location?

Respondents: Respondents were asked to indicate how often per month they visited this location. Where the location of interview returned a "rarely" response to this question, the respondent was asked to identify the location that they frequented most often in the CBD/North Adelaide. The following chart indicates this frequency for the most frequented location. Chart 16 to change



Respondents: Generally, respondents attended locations at all frequency levels; that is 1-10; 11-20 and >20 times per month. Victoria Square, Hindley St, Rundle St East and North Tee were the most frequented locations with Victoria Square being the most significant in the >20 times per month category. This question was also supplemented by a more specific commentary on the time of day that respondents frequented the location. The following table indicated the level of activity within each time period. Sheet 8

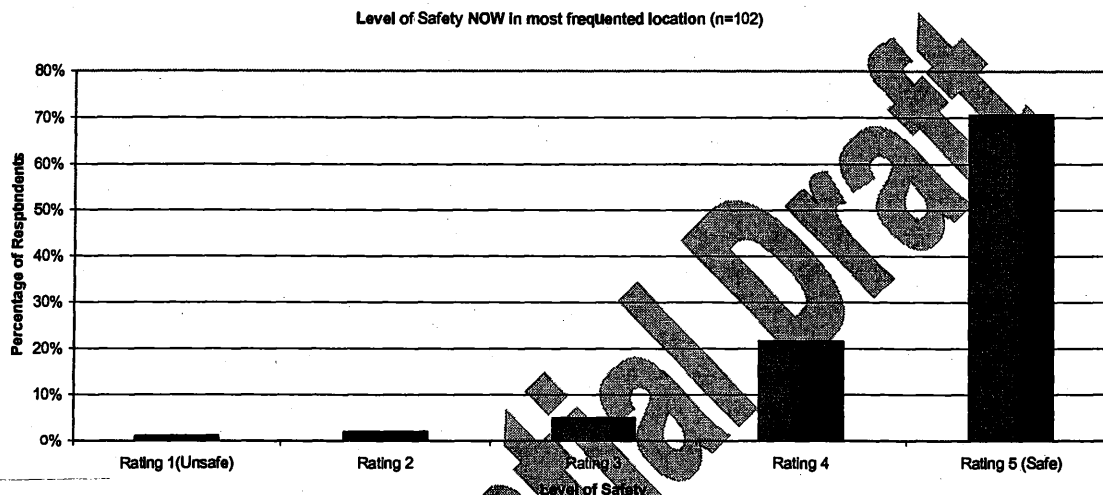
Data		Carrington St/ Victoria Square	Gouger St	Hindley St	Hindmarsh Square	Hurtle Square	King William St	King William St, South	Light Square	North Tee	Rundle Mall	Rundle St East	South Tee	Victoria Square	Wellington Square	West Tee	North Tee/Railway Station	Grand Total
6am-9am	1-10t/mth	0	0	0	0	0	0	0	1	0	0	0	0	2	0	0	1	4
	11-20t/mth	0	0	0	1	0	0	0	0	0	2	0	0	0	0	0	0	3
	>20t/mth	0	0	0	0	3	1	0	0	5	0	2	4	12	0	0	0	27
9am-12noon	1-10t/mth	0	0	0	1	0	0	0	2	2	4	1	0	4	1	0	0	15
	11-20t/mth	0	0	1	1	0	0	0	0	2	0	0	0	4	0	0	0	8
	>20t/mth	1	0	4	1	1	1	0	0	5	0	4	2	6	1	0	0	26
12noon-3pm	1-10t/mth	0	0	1	1	0	0	0	0	2	0	0	0	1	0	0	0	5
	11-20t/mth	0	0	1	1	0	0	0	0	2	0	0	0	1	0	0	0	5
	>20t/mth	1	0	4	1	1	1	0	0	3	0	4	2	4	1	0	0	22
3pm-6pm	1-10t/mth	0	0	1	0	1	0	0	1	1	1	1	2	4	0	1	1	14
	11-20t/mth	0	0	0	0	0	0	0	0	1	1	0	0	2	0	0	0	4
	>20t/mth	1	0	5	1	5	1	0	0	5	1	5	5	12	1	0	0	42
6pm-12midnight	1-10t/mth	0	1	2	2	1	1	1	1	3	1	2	1	5	0	2	0	23
	11-20t/mth	0	0	2	0	1	0	0	0	1	1	0	0	2	0	0	0	7
	>20t/mth	0	0	0	1	1	0	0	0	3	0	3	2	6	0	0	0	16
12midnight-6am	1-10t/mth	0	0	0	0	0	0	1	1	0	1	1	0	0	0	0	0	4
	11-20t/mth	0	0	1	0	0	0	0	0	0	0	0	0	1	0	0	0	2
	>20t/mth	0	0	0	1	1	0	0	0	0	0	0	0	2	0	0	0	4
Total		3	1	22	12	15	5	2	6	35	12	23	18	68	4	3	2	231

The majority of respondents attended their most often visited location more than 20 times per month, and the time of the day when this occurred was generally 6am-9am and 3pm-6pm. Most were in Adelaide during these times for the start and closure of their workday. Accordingly, a significant proportion of respondents were employed in the City, frequented specific locations, and the time of day that they were in these locations tended to revolve traditional working hours in the CBD.

Level of Safety Now

Question: How do you rate your level of safety for your most recent visit to this location (based on your criteria of safe and unsafe)?

Respondents: The following chart indicates the responses to this question. Across all locations, the level of safety rating based on the percentage of respondents was as shown.



Question: How do you rate your level of safety 2 years ago at this location?

Respondents: The following chart indicates the responses to this question. Chart 2



There were a number of respondents who were unable to respond to the "2 years ago" question – due to "can't remember" (n=6) or "didn't visit location" (n=18).

An analysis of the overall feeling of safety for the most frequently visited location, *Victoria Square*, is provided below.

Victoria Square: Change in perception of Safety 2 years ago and Now

Time	Unsafe 1	2	3	4	Safe 5	Total Respondents
NOW	0 (0%)	0 (0%)	2 (6%)	5 (15%)	26 (79%)	33 (100%)
2 years Ago	2 (8%)	8 (32%)	1 (4%)	3 (12%)	11 (44%)	25 (100%)

There has been a significant change in the perception of safety for Victoria Square. Two years ago 40% of respondents had feelings that tended to the "unsafe" perception and 56% had feelings that tended towards the "safe" perception. The view currently is that none of the respondents had feelings that tended to the "unsafe" perception and 79% had feelings that tended towards the "safe" perception.

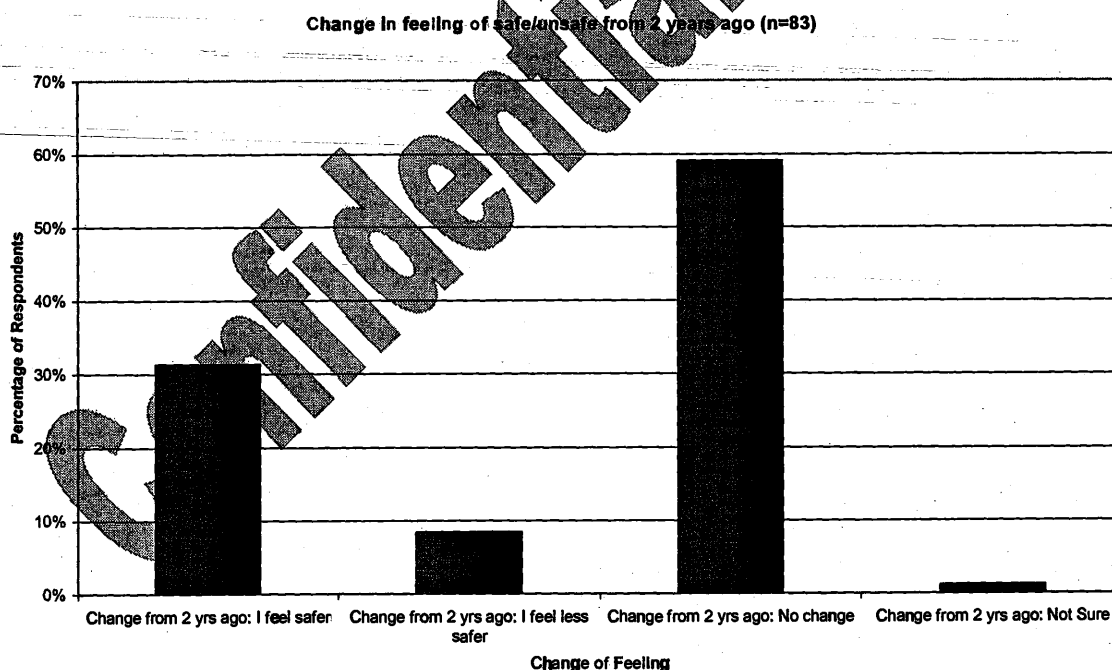
Confirming respondents' opinions

Question: Has your opinion on the level of feeling safe/unsafe changed from 2 years ago?

Respondents: The majority indicated that their feelings of safety had not changed markedly from 2 years ago. However, just over 30% of respondents to this question felt that their level of safety had improved from 2 years ago.

This table provides an acknowledgement of the overall trend in feeling safe or unsafe, through the most frequented location for the respondent group.

Chart 3



Summary

Respondents had both a strong view about what they see as safe and unsafe characteristics of a public place with lighting being the most important characteristic. Respondents also have indicated a strong positive shift in the perceived level of safety attached to their most often visited location in the order of 30% for all locations, and 35% for Victoria Square.

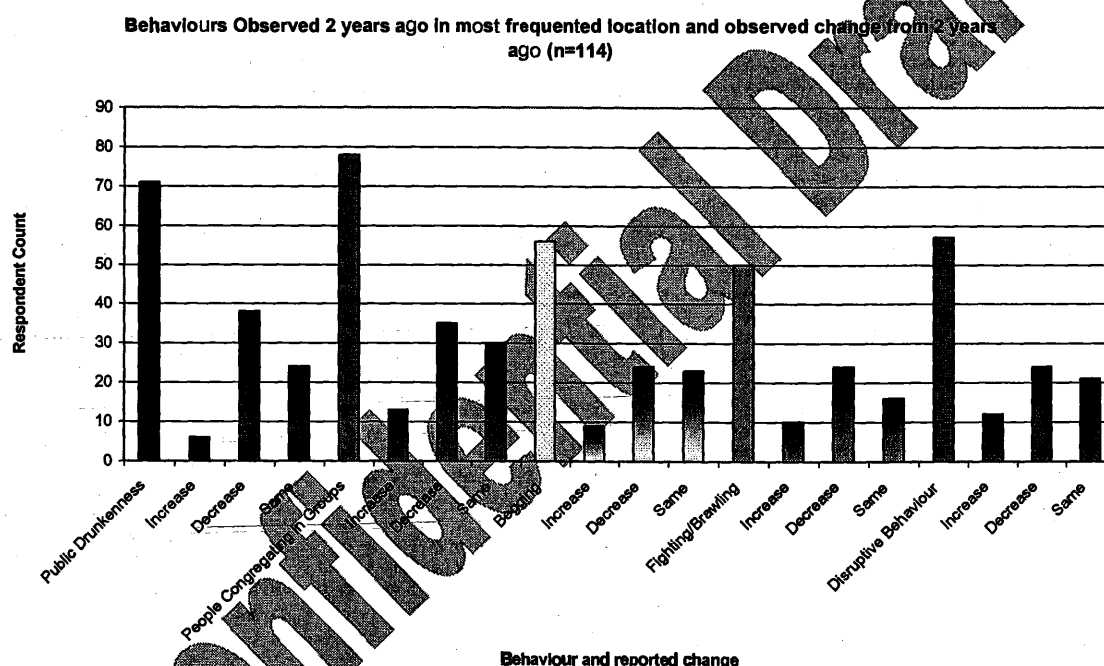
8.2.5 The public's view of changes in behaviours from 2 years ago to now

Question: Which of the following behaviours did you observe 2 years ago in the location you visited?

Respondents: Respondents were asked (from a list of behaviours) to indicate which behaviours they observed 2 years ago and whether these behaviours have increased or decreased. A significant number of respondents were unable to answer this question because they had limited or no knowledge of the location 2 years ago or had not observed such behaviours. The response levels were:

- Public drunkenness - 71
- People congregating in groups - 78
- Begging - 56
- Fighting /Brawling - 50
- Disruptive Behaviour - 57

Many respondents not only indicated specific behaviours but also wished to advise where the behaviour level was the "same" as 2 years ago. Interviewers recorded this information. The chart below indicates the behaviours that were observed and the extent of change as reported by respondents.

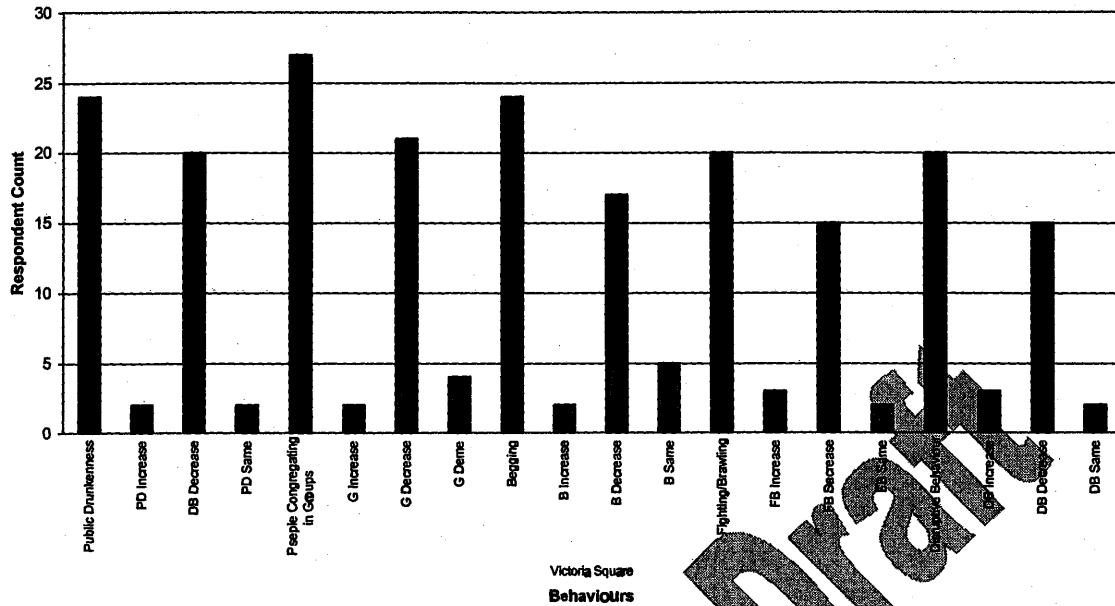


All of the behaviours had been observed 2 years ago, with public drunkenness and people congregating in groups being the most frequently observed. All behaviours have reduced by more than 40% from 2 years ago, with the most significant decreases occurring for public drunkenness (54%) and fighting/brawling (48%).

Voluntary reporting of "same" or "no change" for these behaviours also occurred. The most significant "no change" occurred for begging (41%), people congregating in groups (38%) and disruptive behaviour (37%).

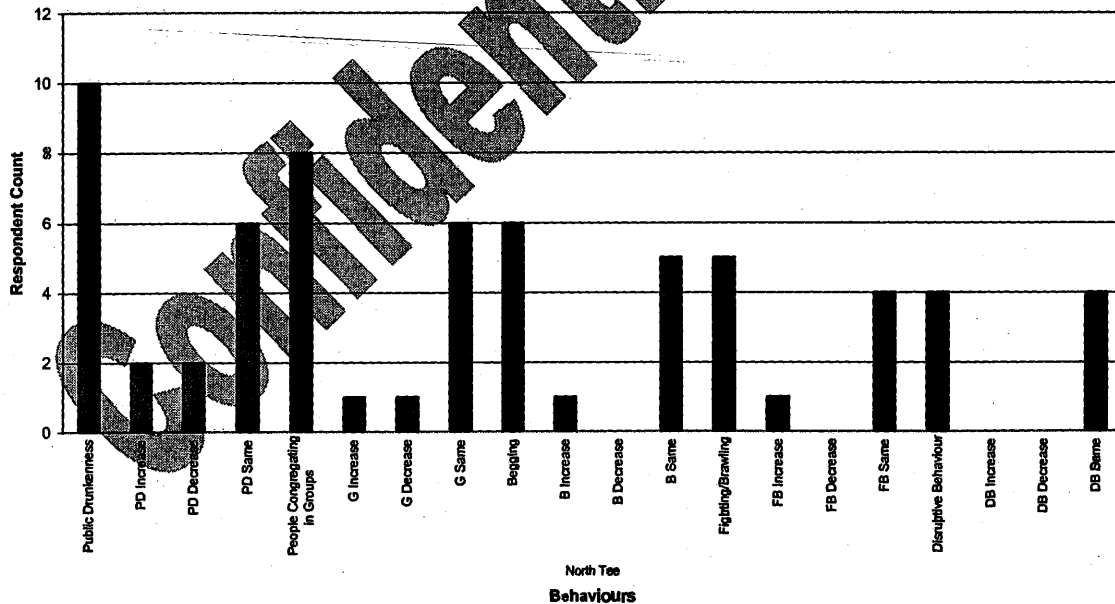
Overall the level of reported increases in behaviours were minor. On a location specific basis there are some notable exceptions to the overall observation. The table below represents the changes reported for Victoria Square. Substantial decreases in all behaviours have been reported from 2 years ago compared to now. Relatively insignificant levels of reported "increases" or "same" are evident for this location.

Change in Observed Behaviours by Selected Location, Victoria Square



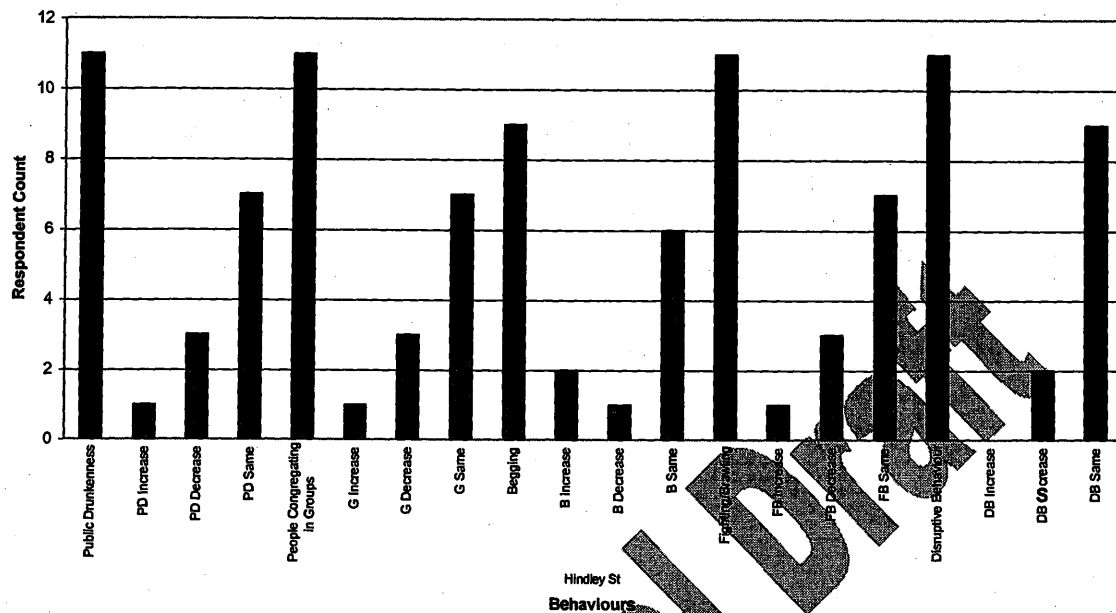
For North Tce (following chart) the reported changes in behaviour indicate a predominant pattern of "same" from 2 years ago compared to now. It is evident that respondents have reported very little reporting of decreases in these behaviours.

Change in Observed Behaviours by Selected Location, North Tce



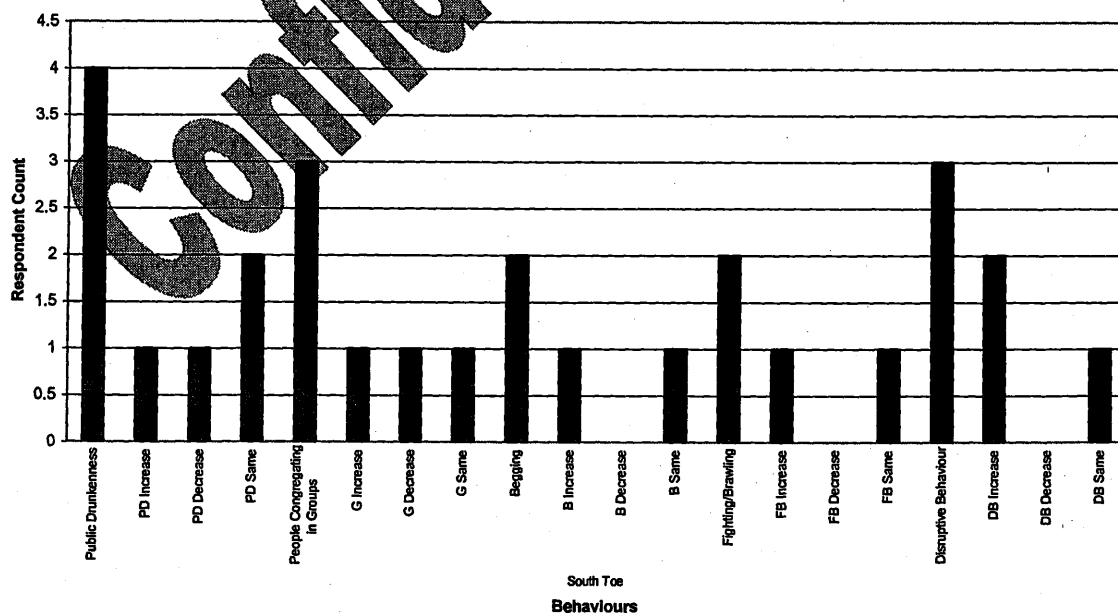
In regard to Hindley St (following chart) the pattern of reported behaviours are similar in that there had been consistent reporting for all behaviours as the "same" or "decreasing" when compared to 2 years ago.

Change in Observed Behaviours by Selected Location, Hindley St



For South Tee (following chart), whilst levels of reported behaviour were limited, there was a trend for all behaviours to be the "same" and equal levels of increases and decreases in observed behaviours. Respondents located towards Hutt St may have been reacting to people they observe in the parklands or Hutt St who were accessing welfare services, whereas respondents located towards King William St may have not observed the same people or behaviours.

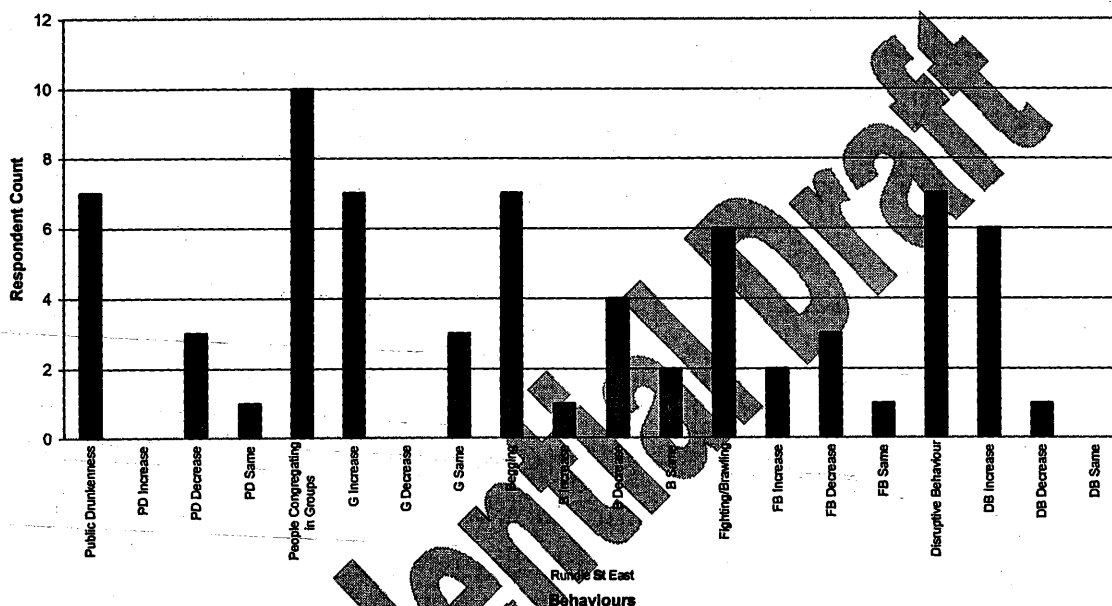
Change in Observed Behaviours by Selected Location, South Tee



For Rundle St East (chart below) there was a general trend of reporting decreases in many behaviours except for two; "disruptive behaviour" and "people congregating in groups". Both behaviours have increased and were observed by a majority of those respondents who reported observing such behaviours.

Whilst reasons were not asked of respondents for their view on behaviours, the increases associated with Rundle St East may be associated with the popularity of the precinct, particularly at night, which has resulted in increased crowds and increases in disruptive behaviours. The commentary regarding the increase in people congregating in groups could also be a reflection of the precinct's changing popularity and it becoming a significant meeting place, with attendant concerns over people in groups.

Change in Observed Behaviours by Selected Location, Rundle St East



In all other locations where behaviours have been observed the commentary was either that these behaviours have remained about the "same" or that the behaviour has "decreased".

Summary

Respondents have observed a significant change in behaviours over the past 2 years for key locations within the CBD. These behaviours have not changed evenly from one location to the next, but generally have been trending in the same directions. Some notable exceptions have occurred over the two years, largely associated with the lifestyle changes. An example is Rundle St East where respondents have observed an increase in "disruptive behaviour".

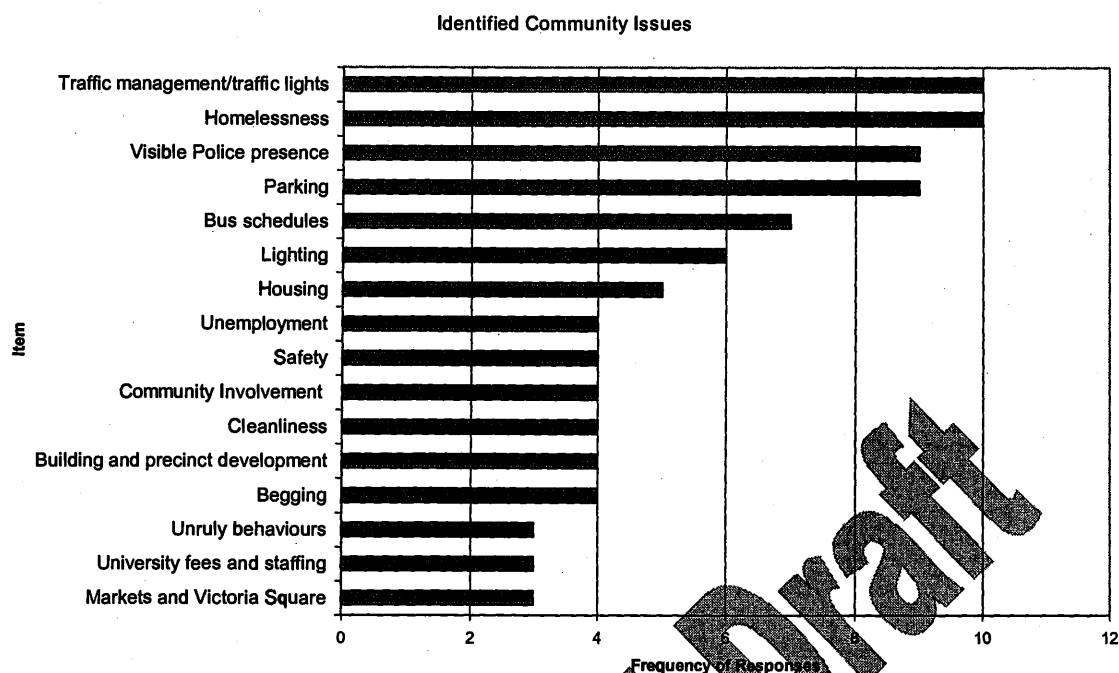
8.2.6 The relative importance of public drinking and drunkenness as a community issue

This group of questions was provided to identify respondent views regarding what they believe are the community issues that need resolution. It was also important to gain a perspective on how important public drinking/drunkenness was to respondents compared to other community issues.

3 most important community issues

Question: What do you believe to be the 3 most important community issues that need to be addressed within the City of Adelaide?

Respondents: Respondents were invited to provide their views on the 3 most important community issues within the City of Adelaide. The most frequent response categories are shown in the below table.



Other items listed as community issues but which only received 1 or 2 responses are shown below.

ACC is focused on right issues now	Abuse
Cleaner parks	Additional public toilets
Community participation with minority groups	Age Care
Controlling groups in public	Child care
Harassment	Education
Health	Firearm laws
Pokies	Focus on major not minor issues
Public and visual Art support	Live music venues
Public drunkenness	Mental illness
Rubbish management	New business development
Safety in Whitmore Square	No community issues
Shop trading hours	Parklands - development encroachment
Standard of venues	Prostitution
Water use	Road quality
	Road signage

Traffic management, homelessness, visible police presence and parking were the three most important community issues amongst a relatively long list of nominated issues.

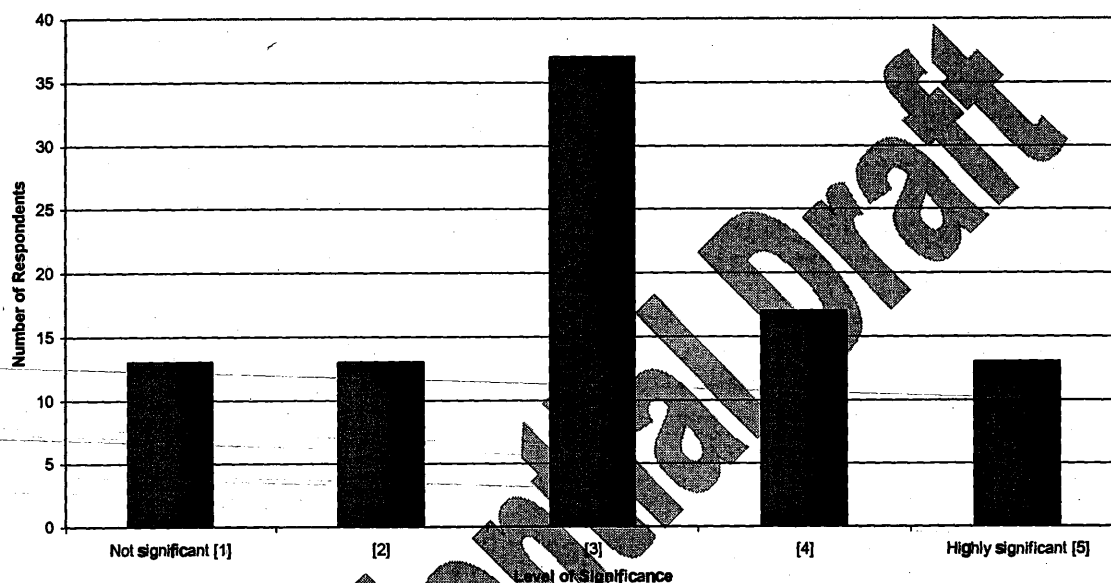
If the identified community issues did not include public drunkenness (public drinking or a statement closely aligned to this descriptor), then the respondent was asked a supplementary question. Only 17 respondents (n=110) considered public drinking as one of the 3 most important community issues affecting the City of Adelaide.

Where does public drinking/drunkenness fit in importance?

Question: As public drunkenness (or similar) is not on your list of the 3 most important community issues that need to be addressed within the City of Adelaide, how would you rate its significance when considering community issues for the City of Adelaide?

Respondents: 93 respondents were asked to comment on the level of significance of public drunkenness/ drinking. They were pressed to give a rating in terms of significance. This resulted in respondents indicating that public drunkenness (or similar) was of a moderate to

Significance of public drinking and drunkenness, if not identified as one of the 3 most important community issues within the City of Adelaide



moderately high level of significance but overall less important than a range of other community issues.

8.2.7 Respondent Outcomes

The public survey has produced several key outcomes regarding Adelaide's Dry Area.

Whilst most respondents are aware of the Adelaide Dry Area, its boundaries are not well understood, and could not be readily identified by respondents.

There has been a significant shift in the perception of the level of safety experienced in public places within the City of Adelaide. That is, the public feel safer now, compared to before the Dry Area Trial. The public also indicated that they are predisposed to the idea of a Dry Area and as a result support the philosophy behind imposing dry areas.

Respondents generally believe that the dry area has not resolved the problem for public drinkers, but has only shifted the issue elsewhere.

Respondents identified a range of parameters that impact on what is deemed as feeling personally safe and unsafe in public areas. Lighting is the most significant issue that affects the way the public perceive safe/unsafe public areas.

Respondents generally do not rank public drinking/drunkenness as one of the 3 most significant community issues within the City of Adelaide. However, when specifically asked, they ranked it as a moderately significant issue that needs to be managed.

Respondents also are aware of the changes that have occurred in behaviours since the Dry Areas has been imposed. All listed behaviours that have been observed and generally have decreased over the two years.

8.3 Evaluation Conclusion

Whilst the existence of the Adelaide Dry Area is well known, there is a gap in knowledge, particularly regarding the Dry Area boundaries.

Many respondents have experienced and noticed changes in behaviours from 2 years ago, with many seeing a reduction in those behaviours. The below table indicates where more than 50% respondents (those who observed a behaviour) have observed a decrease in that location.

Where behaviour has been observed to decrease (% of respondents who have observed the decrease)

Location	Victoria Square	North Tee	Hindley St	South Tee*	Rundle St East*
Public Drunkenness	83%	10%	27%	25%	43%
People in Groups	78%	13%	27%	33%	0%
Begging	71%	0%	22%	0%	57%
Fighting/Brawling	75%	0%	27%	0%	50%
Disruptive Behaviour	75%	0%	18%	0%	14%

Note: Locations marked with an (*) were small counts from which the %ages were derived. These %ages need to be considered carefully.

Equally important is to recognise those locations where an increase in behaviour was observed. These are summarised below:

Where behaviour has been observed to increase (% of respondents who have observed the increase)

Location	Victoria Square	North Tee	Hindley St	South Tee*	Rundle St East*
Public Drunkenness	8%	10%	8%	25%	0%
People in Groups	7%	13%	8%	33%	70%
Begging	8%	17%	22%	50%	63%
Fighting/Brawling	15%	20%	9%	50%	33%
Disruptive Behaviour	15%	0%	0%	66%	86%

Note: Locations marked with an (*) were small counts from which the %ages were derived. These %ages need to be considered carefully.

The above tables show the level of change that has been observed. Whereas a sharp decline in all behaviour has been observed for Victoria Square and a moderate decline in Hindley St, there has been an observed increase in behaviours such as begging and fighting/brawling in North Tee.

Furthermore, there were many reported instances where behaviours have not changed.

This could be due to several factors, none of which have been tested.

- The behaviour has, in fact, not changed and the view is being reported correctly.
- The behaviour may have changed and reduced, but the respondent's views on the behaviour have also changed. That is, over two years the respondent's level of tolerance of defined behaviours may have reduced, indicating the behaviour significant now, whereas 2 years ago the same behaviour was deemed minor; hence, the potential for reporting the behaviour as "the same".

The public have also indicated that they have stronger perceptions of feeling safe in Adelaide.

- Respondents have stated that they rate their level of safety higher now compared to 2 years ago. Whilst the perception of feeling safer in Adelaide has changed over the past 2 years it cannot be proven that the Dry Area was the single motivation for changing that perception. There could have been other influences such as those listed as characteristics of feeling safe or unsafe in a public place. I.e. street lighting, security cameras, policing activities, all of which may have contributed to the perception of increased safety.

Underpinning the feeling of higher levels of safety in public places is the predisposition of the public to the idea of a dry area. By extension, it is argued that there is significant public support for the Adelaide Dry Area.

Public drinking/ drunkenness as a community issue (whilst being seen generally as a moderately significant community issue) is not within the three most important community issues described by respondents. This could mean that it is currently not a priority for the majority of respondents and by extension not a priority for the public.

The following summary is provided for the expected Dry Area Trial Impacts.

Impact Area	Public Perception Outcomes	Evaluation Outcomes*		
		Agree	Partly Agree	Disagree
Knowledge and understanding about the role and location of the Adelaide Dry Area.	There is an increased awareness and understanding about the Adelaide Dry Area Trial.			4
Identification of the public's pre-disposition towards Dry Areas	The public's predisposition towards Dry Areas is significant.	4		
The impact of the Dry Area on the public's feeling of safety.	There is increased feelings of safety by the public.	4		
The public's view of the impact of the Dry Area.	The public have a clear understanding of the impact of the Dry Area.		4	
The public's view of changes in behaviours from 2 years ago to now.	The public has observed decreases of inappropriate behaviours over the past 2 years.	4		
The relative importance of public drinking and drunkenness as a community issue.	Public drinking and drunkenness is not seen as a significant community issue.	4		

* Evaluation Outcome is an assessment by the consultants, taking into account the qualitative and quantitative evidence and collected data, and comparing this with the outcomes (column 2 above) of the respondents and interviewed groups/individuals.

8. Business Operators

9.1 Purpose and focus of this chapter

The purpose and focus of this chapter is to identify, assess and evaluate the experiences of a sample of business owners and managers in the City of Adelaide. Their views were obtained through face-to-face interview and evaluated in relation to the project Terms of Reference. The main areas explored and evaluated were:

- The impact that the Dry Area has had on perceptions of safety.
- The impact that the Dry Area has had on business operations.
- The impact that the Dry Area has had on public transport operations.

9.2 General

In order to test the views of business in respect of the Dry Area Trial, a sample of 14 business owners, managers and business representatives were interviewed. Several of the businesses were in Victoria Square and several along West Tee. Other businesses were located in the Central Market, West End (NW quadrant of Adelaide CBD), North Tee and Hurtle Square areas. Two businesses are public transport service providers (with their administrative centres outside of the Adelaide CBD) but they operate their services in Victoria Square and in other permanent locations within the CBD.

Business	Function
Adelaide Convention Centre (statistics)	Facility Hire
Central Market Precinct Association inclusive of Gouger and Grote Sts Business Associations	Business Organisation comprising Business Operators
CMV/ CMI Toyota	Motor Vehicle Retail
Hilton Adelaide	Accommodation
IGA Gilbert St	Retail
Imprints Booksellers (email response to questions provided through West End Association)	Retail
Liquorland West Tee	Liquor Retail
Medina Grand Adelaide Treasury Apartments	Accommodation
Premier Stateliner	Central Bus Facility
Shell Service Station West Tee	Petrol and Retail Sales
TI Business Services	Accounting Services
Tiki Café	Retail/Hospitality
Torrens Transit - contractor to the Passenger Transport Board	Beeline and City Loop Bus Drivers
Trans Adelaide	Tram Drivers and Conductors
West End Association	Business Organisation comprising Business Operators
West Terrace Cemetery	Cemetery

The sample is considered to be a representative cross section of the business sector and therefore provides a valid commentary for this evaluation. It is important to note that the commentary and views expressed divide into three general areas, these being

- West Tee and environs
- Victoria Square and environs and
- Public transport facilities that regularly enter Victoria Square

Each of these general areas will be discussed within this evaluation. The following sections review the comments offered by business operators and provide an interpretation of their views.

9.2.1 The impact that the Dry Area has had on perceptions of safety amongst business operators

Business operators expressed two primary viewpoints in regard to perceptions of safety.

Those business operators that operate their business facilities with the Dry Area had a different perspective to those operators who were operating businesses on the boundary of the Dry Area. Essentially those businesses located on or near West Tee provided a significantly different view of perceptions of safety than businesses elsewhere in the Adelaide CBD.

Business Operators – pre Dry Area

Commentary from this group revolved around the circumstances that the business operators and their clients and customers observed. Before the Dry Area perceptions of safety for businesses located near Victoria Square were described in terms of

- Observed inappropriate behaviours of harassment and violence to people in, between and from drinking groups in Victoria Square,
- Clients of accommodation providers being reticent to venture across Victoria Square,
- Clients (including tourists) of hospitality providers, expressing their concern for their own personal safety as a result of observed behaviours in Victoria Square and in the Adelaide Central Market
- Security personnel and security system were hired or enhanced to provide or increase the level of safety to both customers in the Central Market precinct and in accommodation provider facilities.
- Family based customers expressed their concern to shop owners about safety for their families and children in the Central Market environment.

Business perceptions about safety were strongly linked to the attitudes of clients and customers. Given that clients and customers were continuously expressing their concerns to businesses, the business operators saw this as a significant issue regarding safety in and around their businesses. Many business operators were also adamant that the inappropriate behaviours and the customers' and clients' perceptions of safety were a driver to the financial position of their businesses.

Businesses that operate on the boundaries of the Dry Area had different perceptions of safety before the Dry Area was imposed. Before the Dry Area perceptions of safety for were described in terms of

- People from the Camps in the West Parklands affected businesses along West Tee, and their clients and customers. Campers would stay longer in some stores, which created unease with some customers and clients. Whilst this was a generally expressed view, it could not be considered as a significant safety issue.
- Campers would also stay longer in liquor outlets to make their selection and then cause some safety concerns for customers by drinking openly in adjacent lanes and streets.

Business operators recognised that there were people drinking publicly but it was not a significant safety issue at the time. Most of the concern was about ensuring they were given access to appropriate facilities and housing.

Business Operators – after introduction of the Dry Area

Following the imposition of the Dry Area, business operators located near Victoria Square described perceptions of safety in terms of as follows:

- The entire market precinct used to have significant problems with public drinkers. This included fighting, urinating, swearing, screaming, and stealing of food products. These behaviours do not occur now. The Dry Area is considered by business operators to be the primary catalyst for this change.
- The Dry Area changed the situation quickly – within months. The market precinct became safer, public drunkenness has largely been removed, and there is now a family atmosphere within the markets, providing comfort to all concerned. This atmosphere has

also brought older people into the market, whereas they were absent and feeling unsafe prior to the Dry Area.

- Personal and business concern for clients' safety has largely been removed.

As an additional input to this analysis, a major accommodation provider has for many years conducted independent assessments of patrons' perceptions of safety and security within and around their premises. Management of the business completed a review of collected data and provided a summary of the results to inform this evaluation. The results are based on data collected for the 12-month period immediately prior to, and 20 months since, the commencement of the Dry Area Trial.

Period prior to the Dry Area Trial	83% safety and security rating
Period since the commencement of the trial	89% safety and security rating

These data are presented in the summarised form offered by the business. The data present a perception of clients' views about safety in and around the accommodation provider. Whilst the provider felt that the variation might have been more significant when they completed their assessment of patron views, the provider was also able to suggest other reasons for a higher rating prior to the Dry Area due to upgrading security practices within the facility prior to the Dry Area. Nevertheless, the same facility has now reassessed its security requirements, as a result of the Dry Area and altered circumstances in Victoria Square, and has introduced less invasive security systems and practices, which have been cost effective changes for the provider.

Business operators located on the boundaries of the Dry Area have commented differently to those businesses near Victoria Square. They note that public drinking is concentrated along West Tee and as a result there are higher levels of inappropriate behaviours being observed by staff, customers and clients. Nevertheless, there have been benefits in that public drinkers purchase liquor within the Dry Area and quickly move back into the Parkland environment where there is no Dry Area. This has lessened the impact of public drinkers on other clients and customers who may have felt their safety was being threatened.

West Tee Cemetery: The most significant impact on safety for a business and its visitors is in regard to the operations and activities of the West Tee Cemetery. Whilst the West Tee Cemetery is outside but adjacent to the Dry Area Trial boundary, campers located in the West Parklands directly affect it. Currently mourners, Funeral Directors, and staff are threatened and intimidated by campers. Staff consider that these behaviours are escalating. Some campers set up tents and shelters in the cemetery, causing the operators to challenge them and demand they leave. This confrontation is considered by staff to be dangerous and stressful. The Cemetery workshop compound must be locked themselves to maintain security of cemetery materials.

As a result, the safety of staff and visitors has become a significant issue for Cemetery personnel. An added concern by staff is that campers are involved with drug taking, not simply consuming alcohol. Staff consider there has been a growth in campers, but this changes continuously, depending on the number of itinerants in Adelaide who locate in the West Parklands. Permanent campers have often been the problem for the operator, with a mix of issues attached to the camping groups who take materials, such a timber from the Cemetery for firewood.

The drugs problem is of major concern for staff and visitors as sharps are found in toilet facilities and spread around the Cemetery. This causes staff to be ever vigilant and remove them as soon as detected.

Summary

Business operators have stated that the level of inappropriate behaviours that were occurring in Victoria Square and in the Adelaide Central Markets by public drinkers had a significant impact on the perceptions of safety before the Dry Area. Now that the Dry Area has been imposed, families have returned to Victoria Square and the market environment in increasing

numbers, which was not evident before the Dry Area. It is claimed that the Dry Area was the catalyst that changed people's perception of safety.

At the boundaries of the Dry Area a different set of circumstances has arisen. The behaviours that were observed in locations such as Victoria Square before the Dry Area are now occurring at the boundaries. Furthermore, it is claimed that some of these behaviours have been magnified as a result of increased drug taking. The impact on perceptions of safety has also changed at the boundaries. Safety is seen as a major issue by some businesses, particularly those that are in close proximity to campers and drinkers who frequent the West Parklands.

9.2.2 The impact of the Dry Area has had on **business** operations

Impact on business operations - Pre Dry Area

The above discussion on perceptions of safety also has a significant bearing on the operational aspects of businesses. Most businesses located near Victoria Square have stated that they felt the activities and behaviours that were occurring were having negative affect on business operations with there being a focus on security issues and customer and client safety. In the Adelaide Central Market there were traders who felt business had suffered because of the activities of public drinkers and intoxicated people fighting and undertaken other behaviours that essentially frightened people away from the area.

Businesses located on the boundaries were like any other business in the Adelaide CBD affected by public drinkers but, other than the West Tee Cemetery, were not acutely troubled by these behaviours.

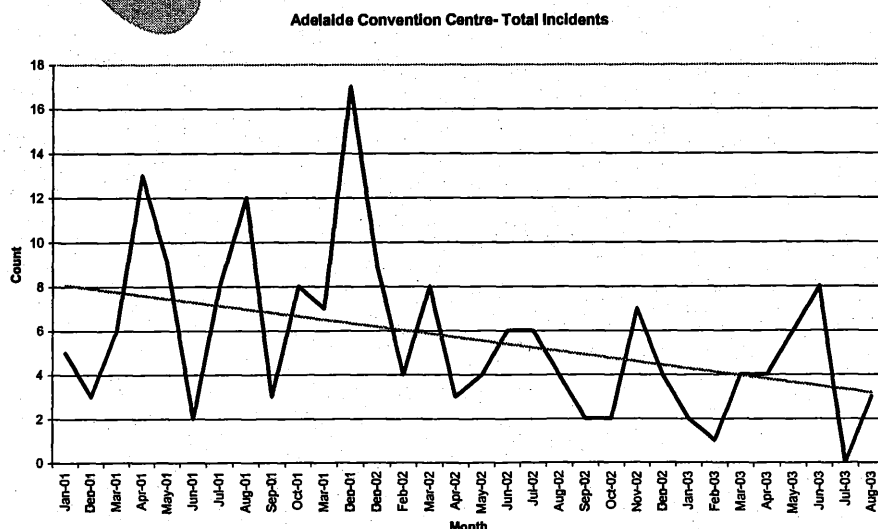
Impact on business operations - after introduction of the Dry Area

The Dry Area is claimed to have impacted immediately on the business operations of businesses located within the Dry Area. Aggressive, drunken people were not troubling businesses nor were the business operators continuously concerning themselves about security and safety of clients and customers.

Those businesses located on the boundaries have commented that their business operations have been affected. In once instance a business operator commented that it was rare to see families involved with the business he operates, whereas another stated that they were very concerned over the safety of their visitors and felt that people were avoiding the West Tee location because of the problems being experienced with public drinkers.

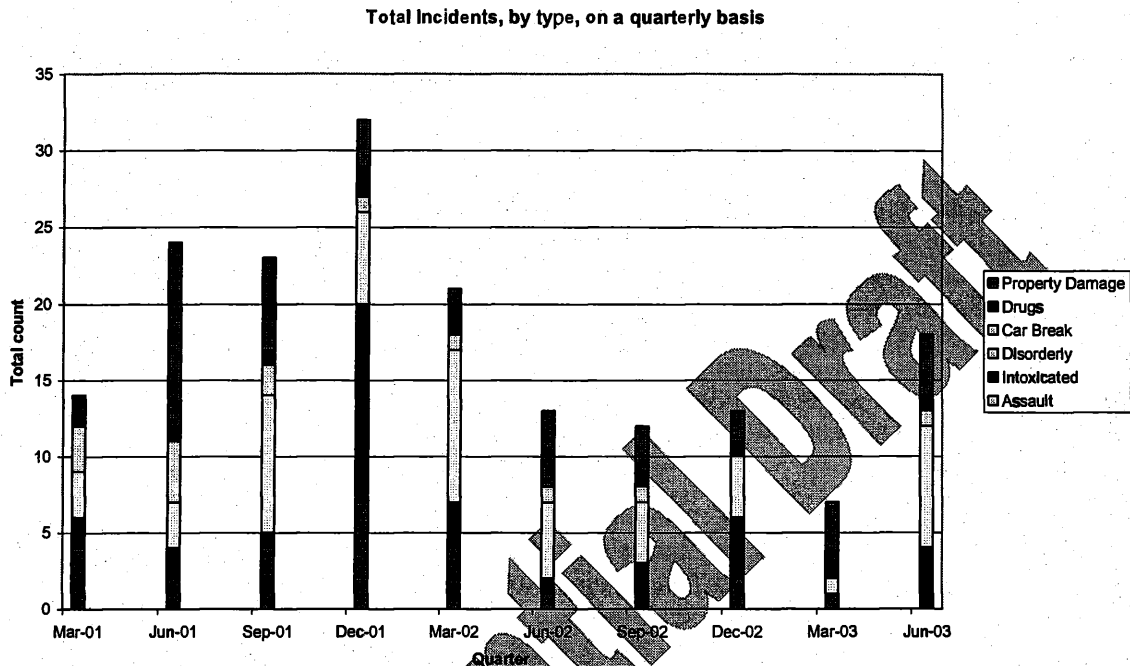
The Adelaide Convention Centre: The Adelaide Convention Centre, located on the Northern boundary of the Dry Area has maintained records of incidents in the vicinity of the Convention facilities. The Convention Centre, being within the Dry Area, has provided statistics of the changes that have occurred based on their incident management practices.

Incidents include assaults, intoxication, disorderly behaviour, car break-ins, drugs and property damage. Total incidents, on a monthly basis, are shown in the following chart.



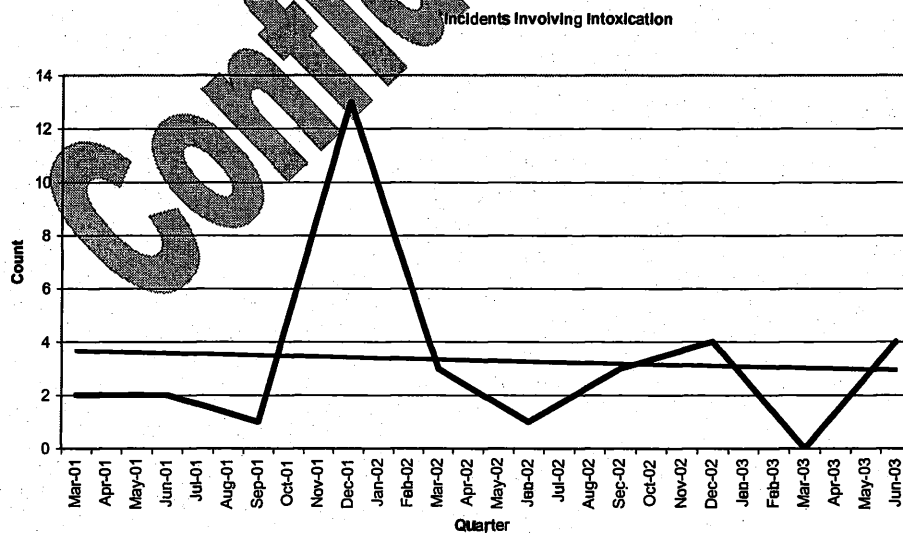
The trend line in the above chart indicates a reduction of these incidents overall, even though, on a monthly basis, Dec 01 was the most active for the overall incident count whilst being in the first two months of the Dry Area trial.

The relative count of each type of incident, on a quarterly basis, and the trend for each, is shown in the following chart.



This chart indicates a generally higher level of incident in the quarters prior to the Dry Area Trial compared to the quarters following the commencement of the trial.

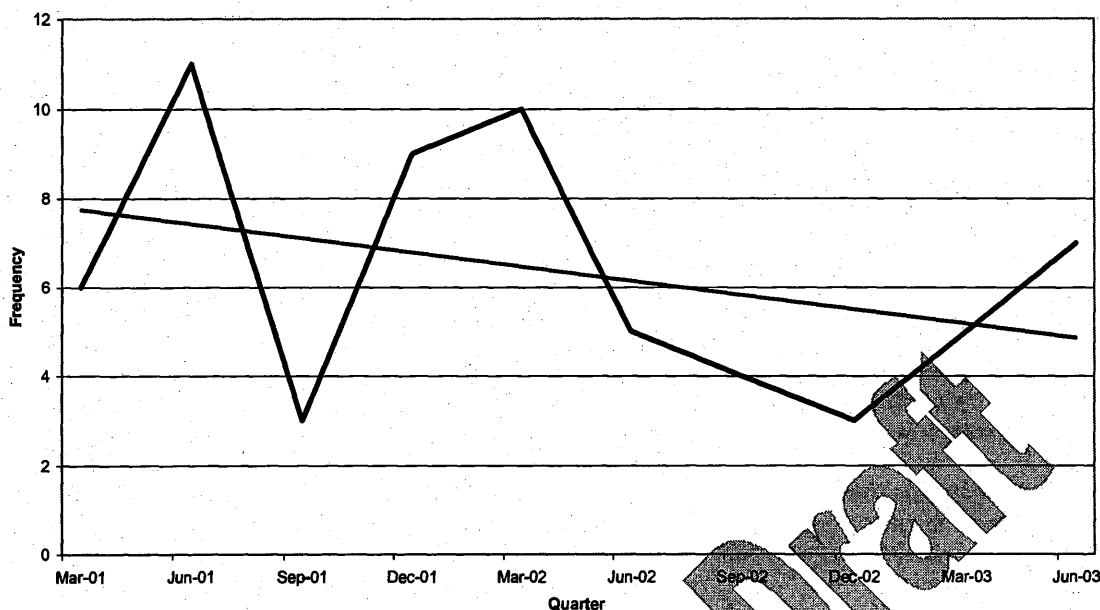
Incidents where alcohol (intoxication) was evident are shown in the below chart.



The trend line indicates a general reduction in these incidents over the period in which data have been provided.

The following chart indicates attendances by police to relevant incidents. The trend shows a reduction in the frequency of police attending incidents that have been reported by Adelaide Convention Centre security.

Police Attendance



These data show that at the North Tee boundary the incidence of identified and reported activities has shown a decline over the past 2½ years.

Summary

Whilst it cannot be validated, the view of business operators within the Dry Area is that their business operations have been enhanced as a result of the Dry Area. Businesses at the boundaries (specifically West Tce) are observing behaviours similar to the same behaviours that occurred in Victoria Square two years ago.

The data provided by the Adelaide Convention Centre provides a view of incidents in the North Tee environment. Nevertheless it cannot be confirmed whether the incidents and their changing levels are as a result of the Dry Area or due to other circumstances.

The impact of the Dry Area on business outcomes cannot be confirmed.

9.2.3 The impact that the Dry Area has had on public transport operations

A total of 20 public transport drivers were interviewed and their views are provided and analysed below.

Bus Drivers, Tram Drivers and Conductors - Before the Dry Area Trial

Bus and Tram drivers and conductors provide a contribution to the commentary regarding the Adelaide Dry Area. A number of the drivers and conductors have had a long association with the Adelaide public transport routes and have been regular observers of the behaviour of public drinkers, their impacts on the public, and the impact on their ability to provide a public transport service.

The drivers and conductors were able to describe circumstances before the Dry Area in the following way.

In their view, many Indigenous people used free bus services to move between the Railway Station and Victoria Square. Three groups would form in Victoria Square; one family oriented, the remaining two predominantly drinkers. Most incidents on the buses were the result of Indigenous people using the buses for sleeping or transporting between Victoria Square and the Railway Station. Non-Indigenous drinkers also caused problems on the buses for the public and the drivers. The ratio was about 10:1 Indigenous:non-Indigenous. Re-occurring incidents on the buses were generally associated with alcohol spills, vandalism and assaults.

Passengers were regularly sworn at and abused. It was also evident that tourists were reluctant to venture on or near the buses.

Drinking would occur throughout the day and result in arguments, begging, fights and bad language. Depending on whether it was pension week or not, the number of Indigenous drinkers would vary between 15-20 to half that number. In addition there were 3-4 non-Indigenous drinkers in Victoria Square on a daily basis also.

The Victoria Square tram terminus was a regular meeting place for Indigenous people, but was also an unsafe place for commuters.

Bus drivers would refer incidents, requiring additional input, to the Transit Police (1st) or Police patrols (2nd).

Bus Drivers, Tram Drivers and Conductors - Impact of the Dry Area

Based on the level of incidents that occurred on the buses prior to the Dry Area it was estimated that there has been a 95% reduction in incidents. Reported alcohol-related incidents have dropped from 20-30 per year before the Dry Area Trial to nearly zero.

As a result it is claimed buses are cleaner and are carrying more passengers, there is less harassment of passengers and drivers and there has been no evidence of fights as they have not seen people enter buses with lacerations and bruises.

Bus drivers have seen their role change since the Dry Area to being information providers, who are regularly asked by tourists for directions and information (brochures are now carried on buses). The drivers have commented that, even though the Dry Area is in place, there are still a limited number of drinkers who frequent Victoria Square, but generally, they are not causing any problems for the passengers, general public or the bus drivers.

Tram drivers indicated that tourists are now using Victoria Square in greater numbers and are asking Tram drivers for information. Intoxicated people are not present. Therefore they are not boarding the trams causing problems for drivers and conductors.

They also mentioned that the outlook of Victoria Square had changed in the past two years, with families and office workers now using the Square more frequently.

Summary

Public Transport drivers and conductors have observed a change in the appearance and demeanour of people who frequent Victoria Square. They have also noticed the daily movement of drinkers before the Dry Area from the Adelaide Railway Station to Victoria Square by public transport and their return to the railway station to access transport to return to their homes.

Public Transport drivers and conductors have also seen the level of abuse and harassment directed at passengers reduce to almost zero. It is their belief that the Dry Area was the catalyst for this change.

9.3 Evaluation Conclusion

Business operators, in the main, have the same view about the benefits of a Dry Area and are able to indicate the circumstances before the Dry Area and the extent to which change has occurred for their business and clients. Most business operators believe the Dry Area has providing the catalyst for better tourism outcomes.

The impact that the Dry Area has had on public drinkers who were displaced from, in the main, Victoria Square has not been overlooked by business. The majority of business operators were concerned that the people affected, whether they were/are displaced to camps on West Tee or have relocated elsewhere, generally require services to assist them through their social/health problems and needs.

The most significant area of debate is the problem the Dry Area has caused businesses that are located on the boundaries of the Dry Area. Essentially these businesses view their situation as much the same as the problems businesses located on the Squares (principally Victoria Square) had two years ago.

These businesses seek resolution to problems such as begging, public drinking, drunkenness, fighting and language, but see the answer is addressing the needs of the people affected and, as a result, removing them from the camps and other unsafe environments.

Impact Area	Business Outcomes	Evaluation Outcome*		
		Agree	Partly Agree	Disagree
The impact that the Dry Area has had on perceptions of safety.	Safety within the business environment has increased	4 Victoria Square		4 On the boundaries
The impact that the Dry Area has had on business operations.	The Dry Area has had a positive impact on business operations	4 Victoria Square		4 On the boundaries
The impact that the Dry Area has had on public transport operations and public safety.	Clients are frequenting public transport more regularly. Public safety has been enhanced.	4 safety and transport use		

* Evaluation Outcome is an assessment by the consultants, taking into account the qualitative and quantitative evidence and collected data, and comparing this with the outcomes (column 2 above) of the respondents and interviewed groups/individuals.

Confidential

10. Impact on Crime Trends

10.1 General

10.1.1 Data Access, Reliability and Consistency

Access to data that provide relevant and reliable information on the performance of the Adelaide Dry Area trial is subject to organisations collecting appropriately focused data, and then being able to provide such data in a form that can be applied to this evaluation.

It was evident that all organisations (government agencies and service providers) do not have systems in place to collect data that directly informs this evaluation on the impact of the Adelaide Dry Area Trial. Organisations collect data that meets their reporting and funding requirements. In many instances organisations (predominantly service providers) collect minimal data as they argue their resources are employed to provide services, not collect data. Accordingly data tends to be categorised as

- Agency data that by inference or broadly based complementary activities provides trends on the potential impact of the Adelaide Dry Area Trial, or
- Service provider data that is in the main anecdotal, inconsistent, or lacks reliability due to collection method and processes.

Nevertheless, some data were accessed through DASC. These were collected for audit purposes to ensure that NGOs are achieving outcome and activity requirements that in turn inform the Department of Human Services about continued funding support.

10.1.2 Purpose and Focus

This chapter is focused on assessing the impact of the Dry Area Trial by evaluating relevant data that informs on alcohol consumption and intoxication as well as crime trends. The data are derived from several sources.

Expiation Notice Data

- These data may provide information on the relative change that has occurred between pre Dry Area Trial breaches (i.e. Hindley St and Rundle Mall) and breaches since the Dry Area Trial controls were put in place.
- May indicate whether breaches have reduced over the course of the Dry Area Trial, as drinkers familiarised themselves with the Dry Area controls.

Reports from the City Watch House for alcohol related arrests

- These data may indicate the extent to which alcohol was a factor in arrest-based apprehensions processed through the City Watch House for behaviours occurring in the Adelaide Dry Area.

Proportion of Charges Involving Alcohol

- These data were derived by linking apprehension data for alcohol related arrests dealt with the City Watch House with the number of charges listed on all arrest-based apprehensions where the arrest took place and the offence was committed in the Adelaide LGA. It may provide a comparative analysis of the proportion of all charges within the Adelaide LGA that involved alcohol.

Offences Recorded

- These data relate to all offences within specific categories that were recorded by SAPOL in the Adelaide LGA between 1998/99 and 2002/03. These may provide some indication of changing trends for those offence types most likely to be alcohol related, and in particular, whether these have decreased over the period the Dry Area Trial has been in place.

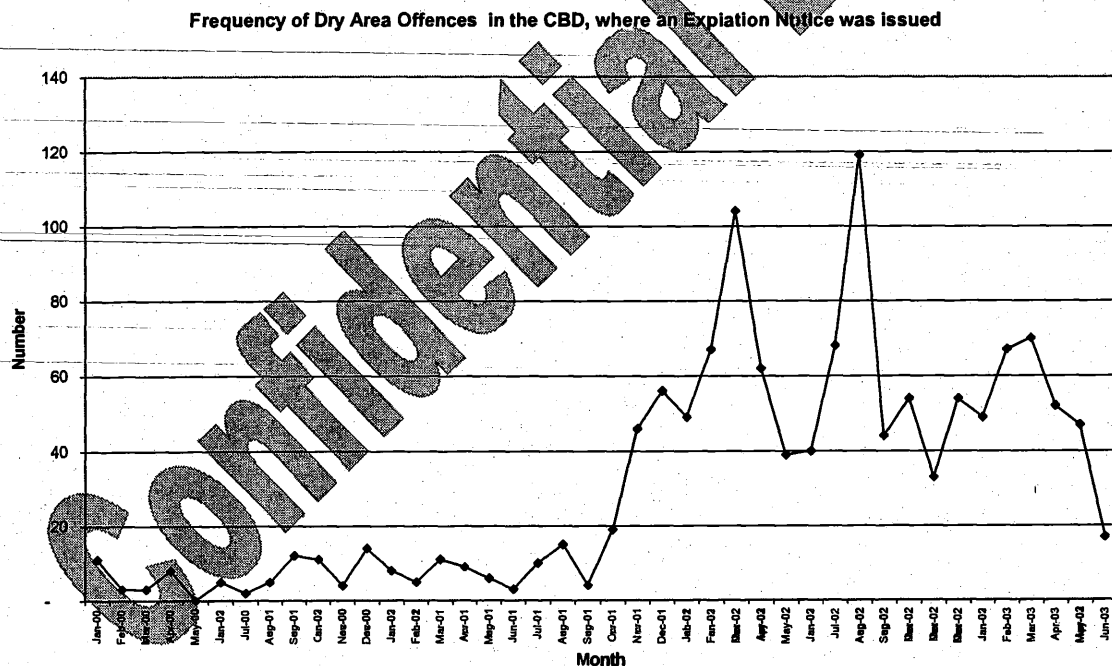
10.1.3 Expiation Notice Data

Expiation notice data have been provided for offences under the Liquor Licensing Act, which are coded as "consuming or possessing liquor in a public place contrary to prohibition".

These data provide a basis for identifying the level of expiations issued for breaches of the Liquor Licensing Act. For the purposes of this evaluation they may provide information on the relative change that has occurred between pre Dry Area Trial breaches (i.e. Hindley St and Rundle Mall) and breaches since the Dry Area controls were put in place. Additionally, the level of breaches should demonstrate a reduction over the course of the Dry Area Trial as drinkers familiarise themselves with the Dry Area controls. Expiation notice data provide therefore, an indication of activity levels and levels of breaches where an expiation notice was issued.

The data provided covered the period 1/1/2000 – 30/6/2003. A total of 1,305 records were provided for analysis. These data provide an understanding of the extent to which expiation notices have been applied within the Adelaide CBD.

- The period 1/1/2000- 28/10/2001 is for expiation notices relating to the pre-existing Dry Area, namely Hindley St and Rundle Mall.
- The period 29/10/2001-30/6/2003 relates to the Dry Area Trial period.



Pre Dry Area Trial

Prior to the Dry Area Trial, expiation notices were confined to the pre-existing Dry Area namely, Hindley St, Rundle Mall and adjoining side streets and lanes. The number of expiation notices issued was within a range of 0-19/month, with the monthly average being 8.

After the Dry Area Trial commenced

Once the Dry Area Trial was in place, the number of expiation notices issued increased to a range of 17 - 119/month, with a monthly average of 57.

Assuming the underlying pre-existing Dry Area expiation notice level continued during the Dry Area Trial period then the overall average arguably has increased by 49 expiation notices per month for the additional Dry Area trial locations.

Influences on activity levels

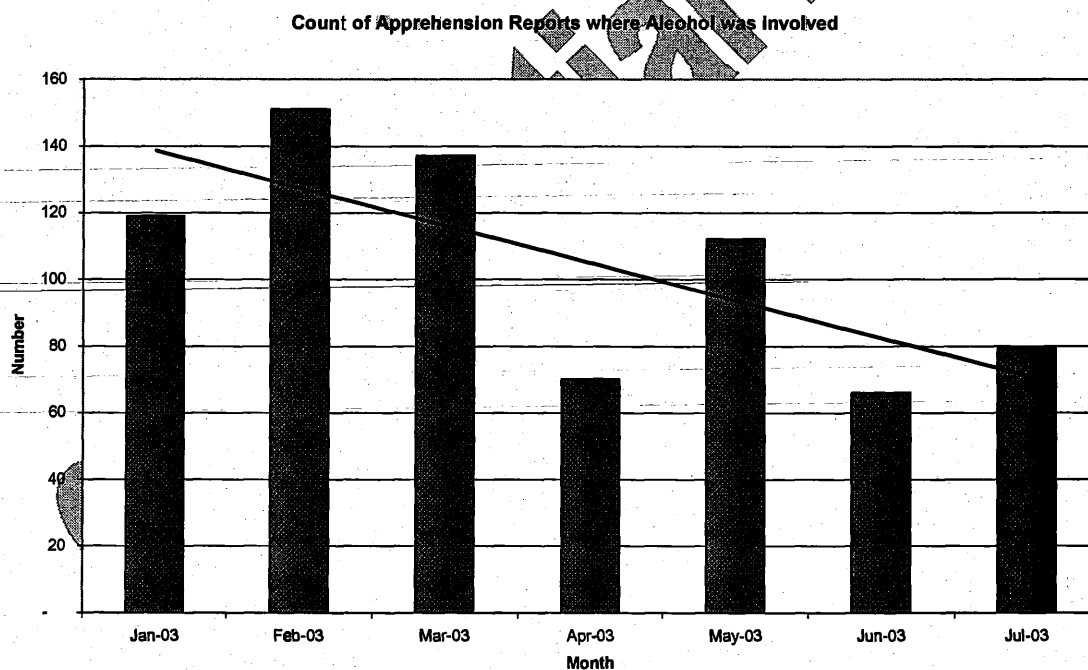
The timing of events held in Adelaide may also influence the scale of activity level variations between months. For instance the Glendi Festival, Clipsal 500, Festival of Arts, WomAdelaide and the Fringe Festival are several of the more significant events that may impact on the level of expiation notices issued. Most of these events occur in the summer months and would indicate a possible reason for the peak that occurred in March 2002. The peak that occurred in August 2002 may have been associated with policing practices and programs at the time.

10.1.5 Reports from City Watch House for Alcohol related Arrests

These data relate to charges listed in arrest-based apprehension reports dealt with at the Adelaide City Watch House where police indicated that alcohol was an issue at the time of arrest.

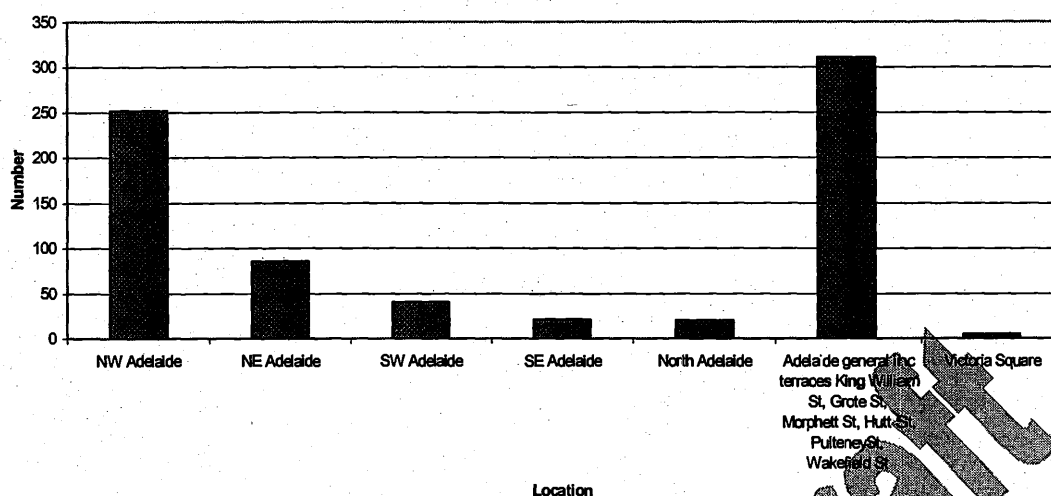
The data provided covered the period 1/1/2003 – 27/7/2003. A total of 734 records were provided for analysis. These data provided an understanding of the extent to which alcohol was a factor in arrests recorded at the City Watch House for the Adelaide Dry Area. This data exclude arrests within the Adelaide LSA that occurred outside the Adelaide CBD. This information was extracted manually by SAPOL to provide specific information for this evaluation.

City Watch House arrests where alcohol was involved ranged from 66-151/month, with a monthly average of 105 for the 7 months of data provision. The below chart indicates the monthly movement of arrests and the relative linear trend for the data provided. It should be noted that all data relates to a period where the Adelaide Dry Area Trial was in place, and had been so for 14 months prior to the data shown on the chart.



The number of arrests has been analysed in terms of the general location of where the arrest occurred. The best categorisation of locations for the data are the four quadrants of Adelaide's CBD, North Adelaide, Victoria Square and a combination of unspecified locations that cannot be classified into the four quadrants; namely, Adelaide [general], King William St, Grote St, Morphett St, Hutt St, Pulteney St and Wakefield St. This chart represents the overall activity level for the 8 month period, including the unspecified category.

Apprehension Reports, Indicating Alcohol was Involved, within the Dry Area



These data indicate a significant level of arrests in the North West quadrant of Adelaide CBD, through to an insignificant level of arrests in Victoria Square.

The following chart provides information on the change in volume for each location for each of the months.

In several locations there is sufficient volume of arrests to indicate a trend. The NW quadrant is trending downwards in its overall arrest levels where alcohol was involved, from 49 in Jan 03 to 29 in July 03. All other quadrants or locations show similar downward movements, but in some cases the overall volumes are small and the reliability of a trend is questioned.

Of particular note, the level of arrest-based apprehensions involving alcohol which took place in Victoria Square has remained very low, ranging from 0 to 5 over the seven month period. It should also be recognised that there may be a seasonal or public events that may impact on some of this activity.

These levels could be representative of the character of each of the quadrants within the CBD.

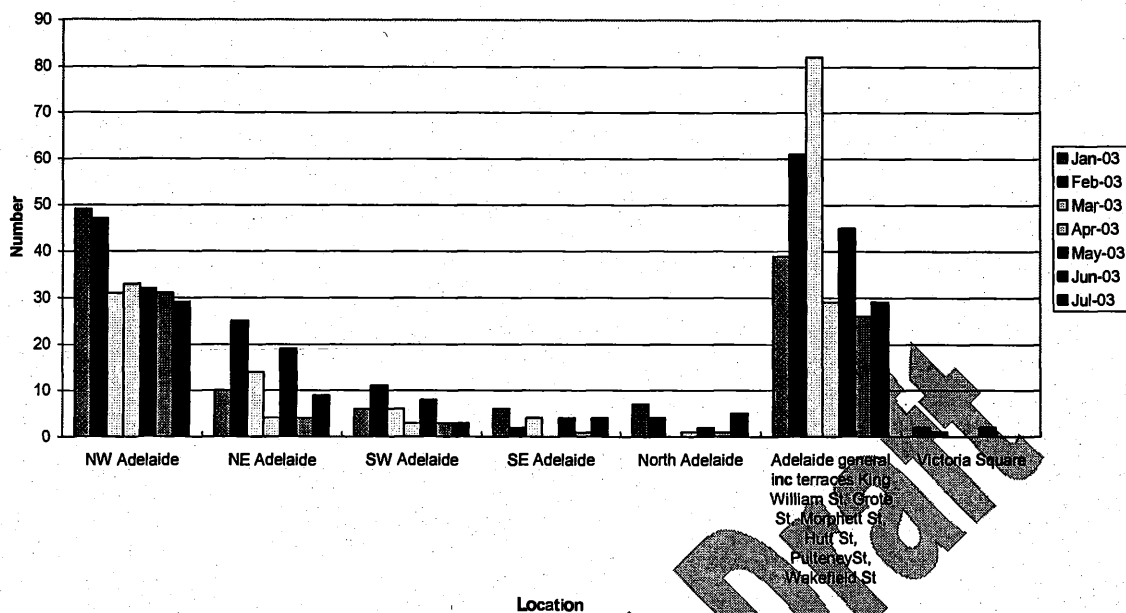
The NW quadrant - is characterised by minor inner Adelaide residential, office precinct, night clubs, entertainment, accommodation, arts, academia, casino and the railway transport hub.

The NE quadrant - is characterised by inner Adelaide residential, major retail, office precinct, light entertainment, hospitality, academia and arts.

The SW quadrant - is characterised by inner Adelaide housing, light commercial, retail, accommodation and social services.

The SE quadrant - is characterised by inner Adelaide housing, retail (predominantly hospitality) and social services.

Number of APs, by Location and Month



It should also be noted that the above chart refers to a category "Adelaide general". This category relates to records that cannot be confidently assigned to a specific quadrant due to the way the location is described. For instance, the location King William St could place the arrest in any of the four quadrants.

Moreover, whilst this data provides a view of alcohol-related arrest levels in the Dry Area, it doesn't identify the extent to which these arrests relate to public drinking in a licensed premise. Certainly one quadrant has shown a decline in arrests but there is no clarity with any of the other quadrants, by applying this data.

10.1.6 Charges Involving Alcohol

As part of the evaluation and with the assistance of the Office of Crime Statistics and Research, a comparative analysis was undertaken by linking City Watch House arrests where alcohol was involved and comparing it to the number of charges listed on all arrest based apprehensions where the arrest occurred in the Adelaide Local Service Area and the offence was committed the Adelaide LGA between January 2003 and June 2003.

Interpretation of Data

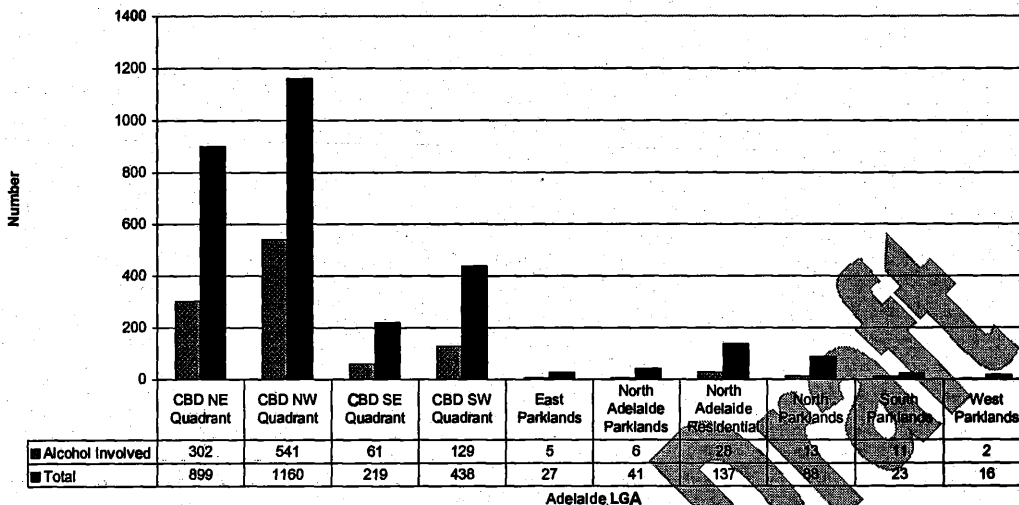
The comparative analysis has identified the proportion of all charges within the Adelaide LGA that, according to police involved alcohol. These charts provide a view on the relative proportion of all arrest based apprehensions have involving alcohol for various offence categories and between the different Adelaide CBD quadrants, parkland and North Adelaide zones.

The charts can only be used to provide a general view of the impact of the Dry Area Trial. In some instances the counts are too small for analysis.

All Charges

The following chart details all alcohol based charges expressed as a percentage of all arrest

All charges on apprehension reports involving alcohol compared to All Offence (Arrest) Categories
Jan 2003-Jun 2003, by CBD Quadrant, North Adelaide and Parkland zones

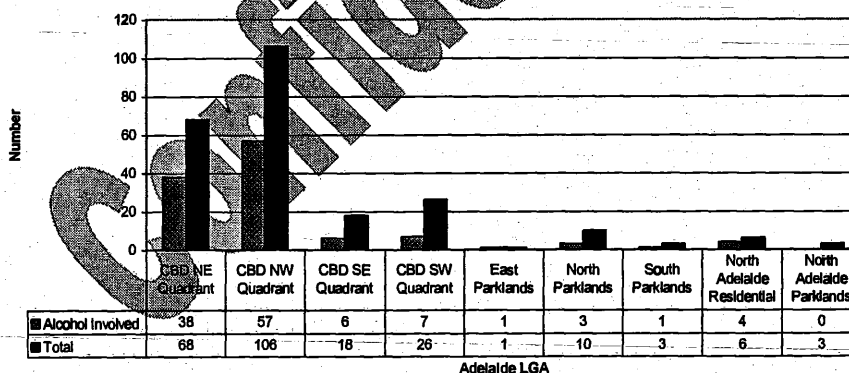


based charges for the Adelaide LGA .

CBD NE Quadrant	34%	East Parklands	19%
CBD NW Quadrant	47%	North Parklands	15%
CBD SE Quadrant	26%	South Parklands	48%
CBD SW Quadrant	30%	West Parklands	13%
North Adelaide Residential	20%	North Adelaide Parklands	15%

Assault Charges

Assault Charges on apprehension reports involving alcohol, compared to Arrest records for Assaults, Jan 2003-Jun 2003,
by CBD Quadrant, North Adelaide and Parkland zones



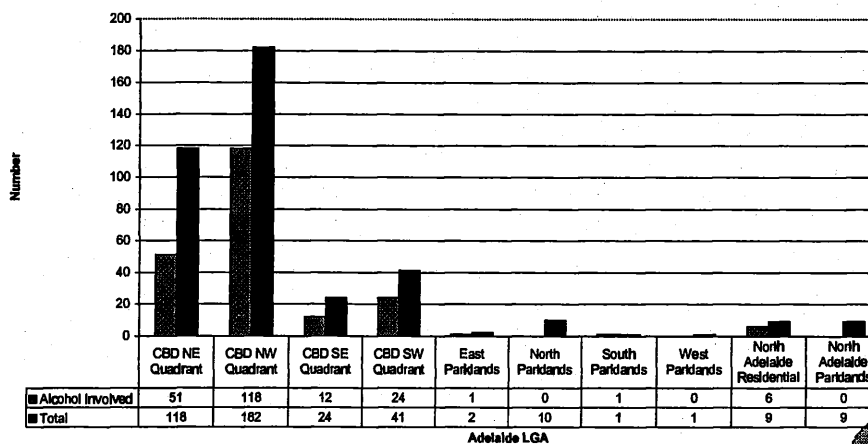
Based on the above chart, the percentage of assault charges laid against arrested persons at the City Watch House where alcohol was involved compared with all assault for the Adelaide LGA is:

CBD NE Quadrant	56%	East Parklands	100%
CBD NW Quadrant	54%	North Parklands	30%
CBD SE Quadrant	33%	South Parklands	33%
CBD SW Quadrant	27%	West Parklands	n.r.
North Adelaide Residential	66%	North Adelaide Parklands	0%

n.r. = no record

Hindering or Resisting Arrest Charges

Hindering or Resisting Police Charges on apprehension reports involving alcohol, compared to Arrest records for Hindering or Resisting Police, Jan 2003-Jun 2003, by CBD Quadrant, North Adelaide and Parkland zones

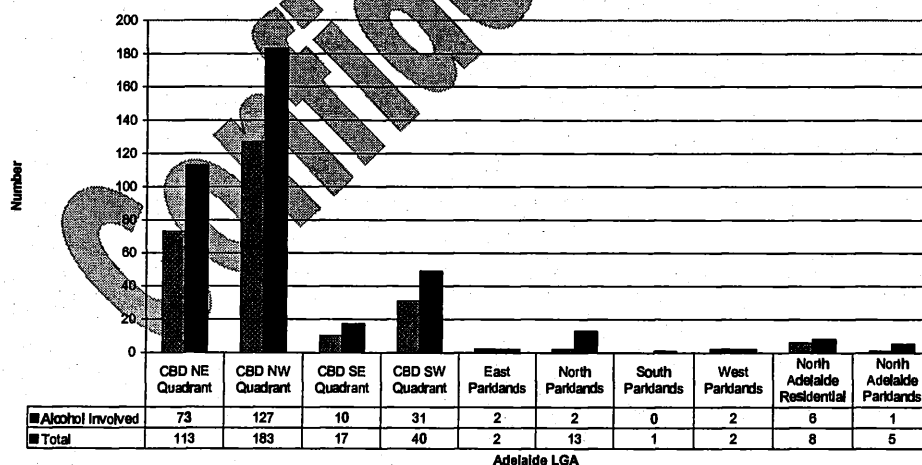


Based on the above chart, the percentage of Hindering or Resisting Police based apprehensions (where alcohol was involved) at the City Watch House compared with Hindering or Resisting Police (Arrest) based Apprehensions for the Adelaide LGA is:

CBD NE Quadrant	43%	East Parklands	50%
CBD NW Quadrant	65%	North Parklands	0%
CBD SE Quadrant	50%	South Parklands	100%
CBD SW Quadrant	59%	West Parklands	0%
North Adelaide Residential	66%	North Adelaide Parklands	0%

Disorderly Behaviour Charges

Disorderly Behaviour Charges on apprehension reports involving alcohol, compared to Arrest records for Disorderly Behaviour, Jan 2003-Jun 2003, by CBD Quadrant, North Adelaide and Parkland zones

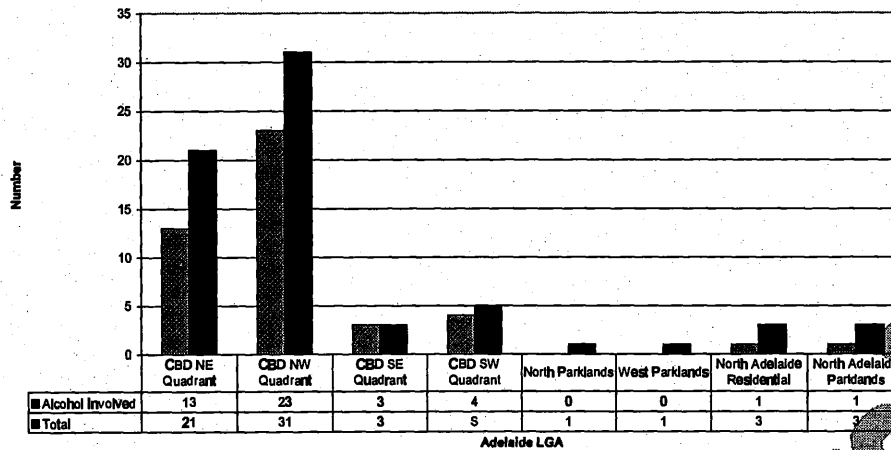


Based on the above chart, the percentage of Disorderly Behaviour based apprehensions (where alcohol was involved) at the City Watch House compared with Disorderly Behaviour (Arrest) based Apprehensions for the Adelaide LGA is:

CBD NE Quadrant	65%	East Parklands	100%
CBD NW Quadrant	69%	North Parklands	15%
CBD SE Quadrant	59%	South Parklands	0%
CBD SW Quadrant	63%	West Parklands	100%
North Adelaide Residential	75%	North Adelaide Parklands	20%

Indecent or Offensive Language Charges

Indecent or Offensive Language Charges on apprehension reports involving alcohol, compared to Arrest records for Indecent or Offensive Language, Jan 2003-Jun 2003, by CBD Quadrant, North Adelaide and Parkland zones



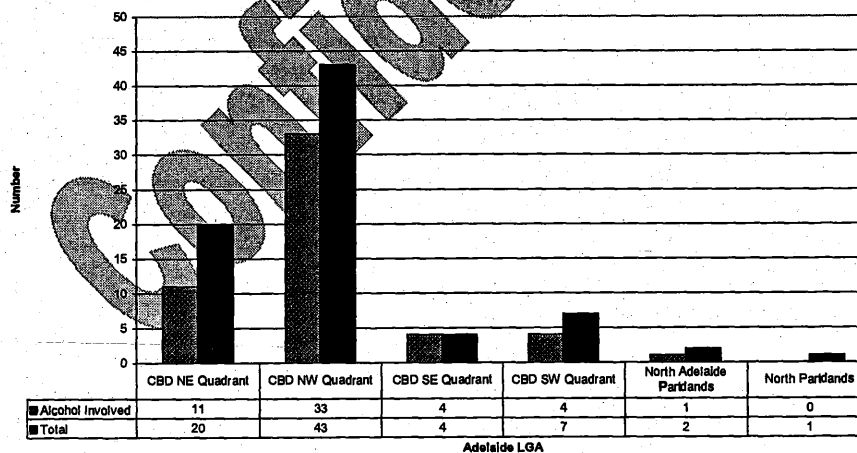
Based on the above chart, the percentage of Indecent or Offensive Language based apprehensions (where alcohol was involved) at the City Watch House compared with Indecent or Offensive Language (Arrest) based Apprehensions for the Adelaide LGA is:

CBD NE Quadrant	62%	East Parklands	n.r.
CBD NW Quadrant	74%	North Parklands	0%
CBD SE Quadrant	100%	South Parklands	n.r.
CBD SW Quadrant	80%	West Parklands	0%
North Adelaide Residential	33%	North Adelaide Parklands	33%

n.r. = no record

Loitering Charges

Loitering Charges on apprehension reports involving alcohol, compared to Arrest records for Loitering, Jan 2003-Jun 2003, by CBD Quadrant, North Adelaide and Parkland zones



Based on the above chart, the percentage of Loitering based apprehensions (where alcohol was involved) at the City Watch House compared with Loitering (Arrest) based Apprehensions for the Adelaide LGA is:

CBD NE Quadrant	55%	East Parklands	n.r.
CBD NW Quadrant	75%	North Parklands	0%
CBD SE Quadrant	100%	South Parklands	n.r.
CBD SW Quadrant	57%	West Parklands	n.r.
North Adelaide Residential	n.r.	North Adelaide Parklands	50%

n.r. = no record

Conclusion

The conclusions from this comparative analysis of the charges on arrest-based apprehension reports where alcohol was involved and all relevant arrest reports for the Adelaide LGA are as follows:

- Data counts for the all parkland and North Adelaide Residential areas are low and therefore the percentage statistic is generally inappropriate.
- Data counts for all CBD quadrants vary but generally are appropriate.
- The extent to which alcohol is involved in the above arrests is generally in excess of 50% and in the two most active quadrants (namely Adelaide CBD NW and NE), the level is above 60%.
- Inappropriate behaviours, which are observed by the public, business and residents such as loitering, abusive or offensive language and disorder behaviour offences are at high levels of representation (in excess of 60% in most instances).
- These high incidences of inappropriate behaviour involving alcohol could be as a result of the level of policing activity.
- Whilst the data provides information on alcohol related offences, the data cannot be directly linked to the impact of the Dry Area but only be used in an advisory context.

10.1.7 Offences Recorded

The following data relate to offences recorded by SAPOL in the Adelaide LGA from July 1998 to June 2003. While information on all offences recorded are provided, more specific analysis focuses on those offence types which are the ones most likely to result from, or be associated with the consumption of alcohol.

It should be stressed, however, that there is no way of knowing what proportion of these offences were actually alcohol related, or of differentiating between those offences arising from public drinking in the Dry Area and those linked to the consumption of alcohol in licensed premises. As a result, only broad inferences about the possible effect of the Dry Area Trial on general offending levels in the Adelaide LGA can be drawn.

The level of offending could also be affected by other factors such as changes to the night club district, the impact of drug use, public events, trading hours, changes to the business mix i.e. al fresco dining, time of the year, specific policing activities or general changes in crime across Adelaide.

As noted there are a range of offence types that may inform this evaluation in the manner mentioned above. The below table provides the structure to the offence groups and is provided as a framework and reference guide to identify the relationship between major categories of offences and subcategories within some of these groups.

Adelaide LGA		
Major Category of Offences	Selected Offences	Sub heading
Offences against the person including acts endangering life	Assaults	
Robbery and extortion		
Burglary, break and enter, fraud, forgery, false pretences and larceny		
Damage property and environmental		
Offences against good order	Hinder or resisting police	
	Other offences against good order	Found with intent to commit crime
		Indecent or offensive language
		Disorderly behaviour
		Offensive behaviour
		Loitering
		Urinating, defecating
		Offences against good order nec

Drug offences		
Driving, motor vehicle, traffic and related offences		
Other offences		

Relevant components of this table have been extracted and provided below. All charts provide quarterly totals from July 1998 – June 2003. Each chart identifies when the Dry Area Trial commenced by a vertical (orange) line.

All charts have been developed on the basis of summarising data for CD (ABS Collector Districts) locations into key areas of Adelaide LGA. These areas are:

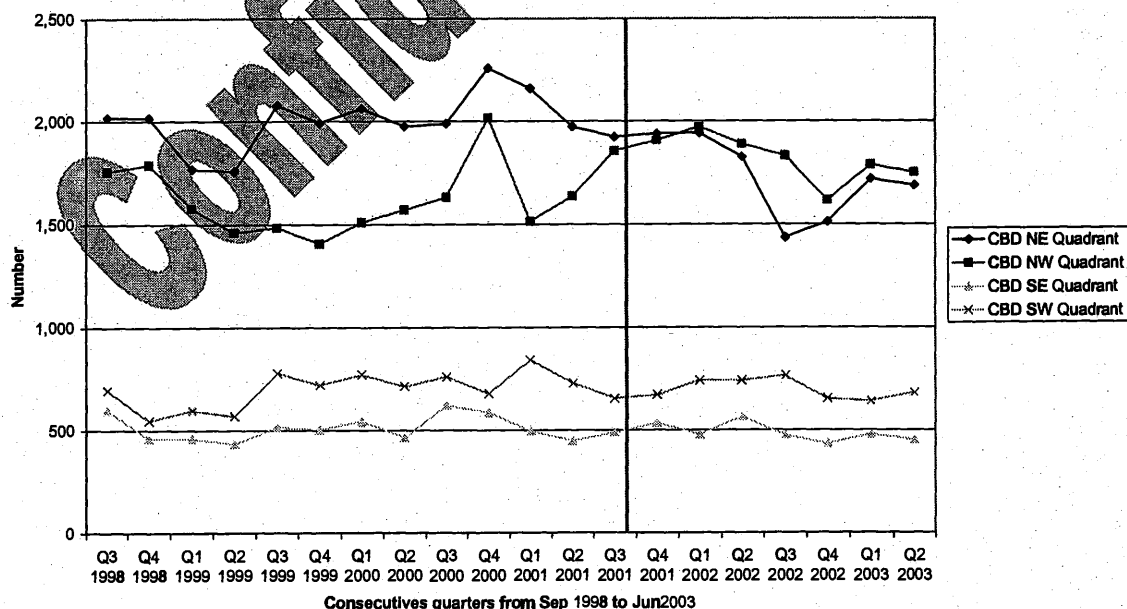
- CBD NW quadrant inclusive of the Railway Station, Casino, Parliament House and The Festival Theatre.
- CBD NE quadrant inclusive of the University, Museum, Royal Adelaide Hospital.
- CBD SE quadrant
- CBD SW quadrant
- West Parklands
- South Parklands
- East Parklands
- North Parklands
- North Adelaide Residential
- North Adelaide Parklands

King William St and Grote-Wakefield Sts separate the four CBD quadrants in the CBD.

All Offences CBD Quadrants

The following chart is for "All offences recorded by Police, quarterly from July 1998, by Adelaide CBD quadrant." All offences, is the total of the "Major Categories of Offences" listed in the above table, and provides an overall view of the level of offending.

All Offences Recorded by Police, quarterly from Sep 1998, by Adelaide CBD Quadrant



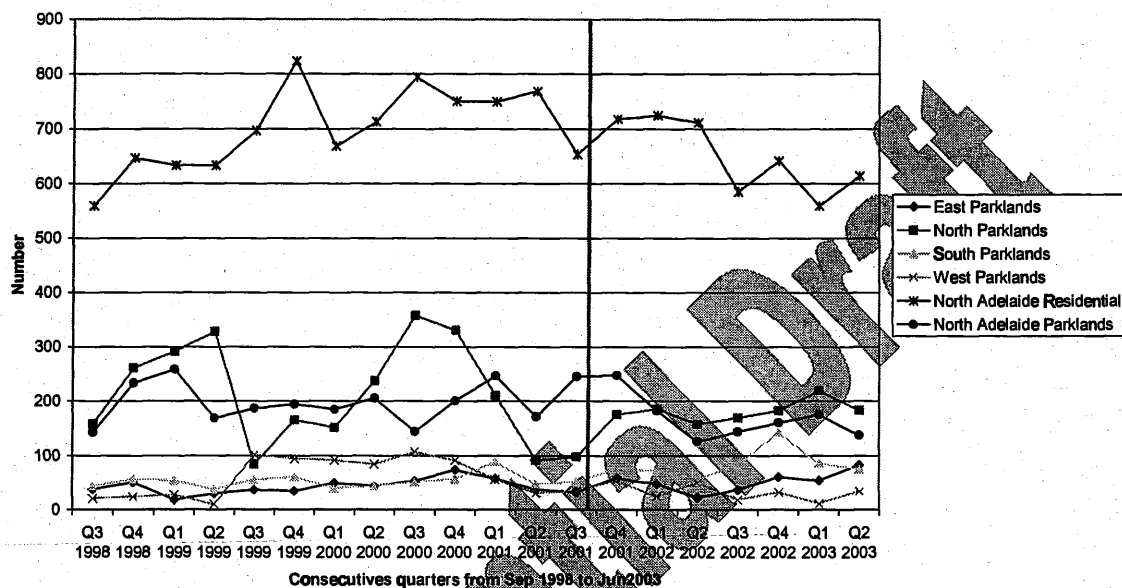
The NE and NW quadrants recorded the highest level of detected offences. Noticeably the NE quadrant shows a reduction in the overall number of offences from Q4 2000 whereas the NW quadrant, whilst displaying a decline in overall offences in the most recent quarter, has been relatively stable for the duration shown in the chart above. The SW and SE quadrants

recorded fewer offences and both quadrants have been stable since the introduction of the Dry Area.

All Offences (Parkland Zones and North Adelaide Residential)

The following chart is for "All offences recorded by Police, quarterly from July 1998, by Parkland Zone and North Adelaide Residential." All offences is the total of the "Major Categories of Offences" listed in the above table.

All Offences Recorded by Police, quarterly from Sep 1998, by Parkland Zone and Nth Adelaide Residential



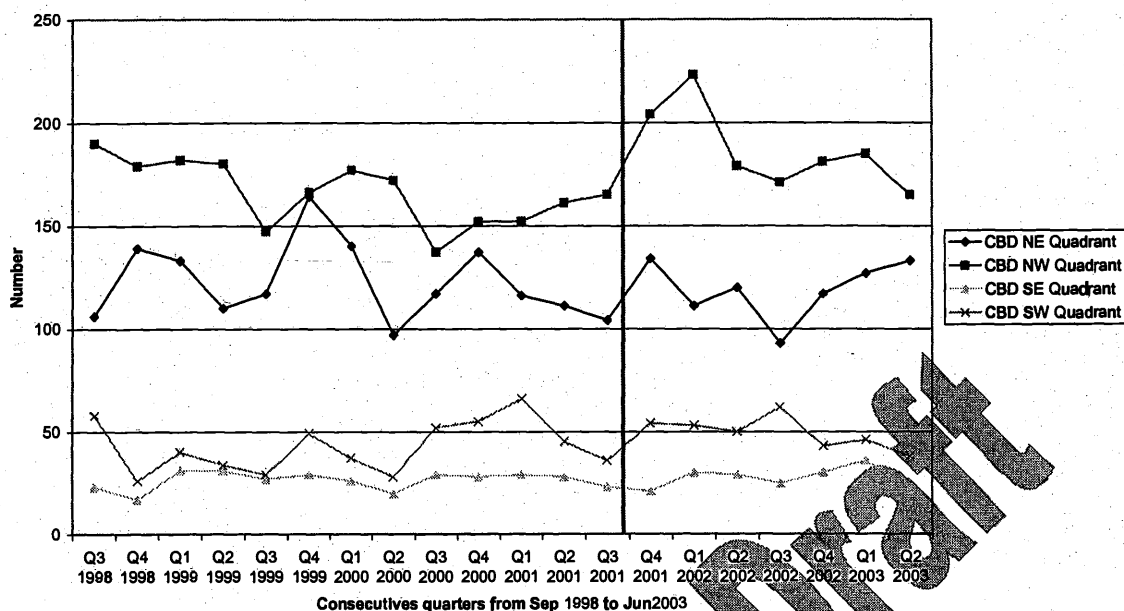
The North Adelaide Residential recorded the highest level of offending. Noticeably the offending pattern shows a reduction in the overall number of offences following the introduction of the Dry Area (although a small increase occurred for a period of 3 months immediately after the Dry Area Trial was introduced).

The parkland zones record significantly fewer overall offences, and generally have remained stable over the 5-year period. Nevertheless, the South Parklands show a small increase, which has not been sustained. Both the North Adelaide residential and North Adelaide Parklands could be considered to show decreasing levels of offences more recently, but overall their activity levels are similar to 5 years ago.

Assault Offences (Adelaide CBD quadrants)

The following chart is for "Assault offences recorded by Police, quarterly from July 1998, by Adelaide CBD quadrant."

Assault Offences Recorded by Police, quarterly from Sep 1998, by Adelaide CBD Quadrant

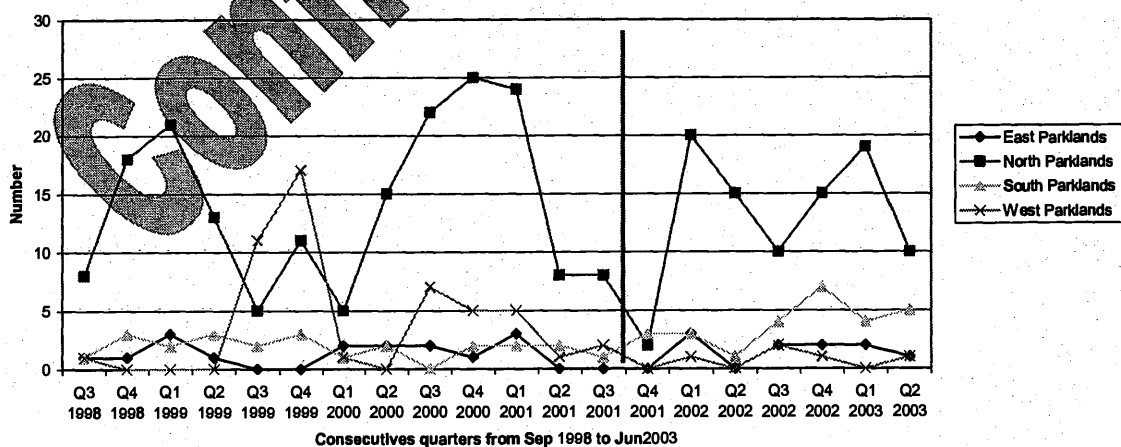


The NE and NW quadrants recorded the highest level of assault offences. Noticeably both quadrants show very little change in the overall number of assaults. The NW quadrant recorded an initial increase in offences for up to 6 months following the introduction of the Dry Area. Whilst the SW and SE quadrants have fewer overall offences, both have also recorded little change in the level of assaults over the data period and since the Dry Area Trial commenced.

Assault Offences (Parkland Zones excluding North Adelaide Residential and North Adelaide Parklands)

The following chart is for "Assault offences recorded by Police, quarterly from July 1998, by Parkland Zone excluding North Adelaide Residential and North Adelaide Parklands".

Assault Offences recorded by Police, quarterly from Sep 1998, by Parkland Zone (ex Nth Adelaide)

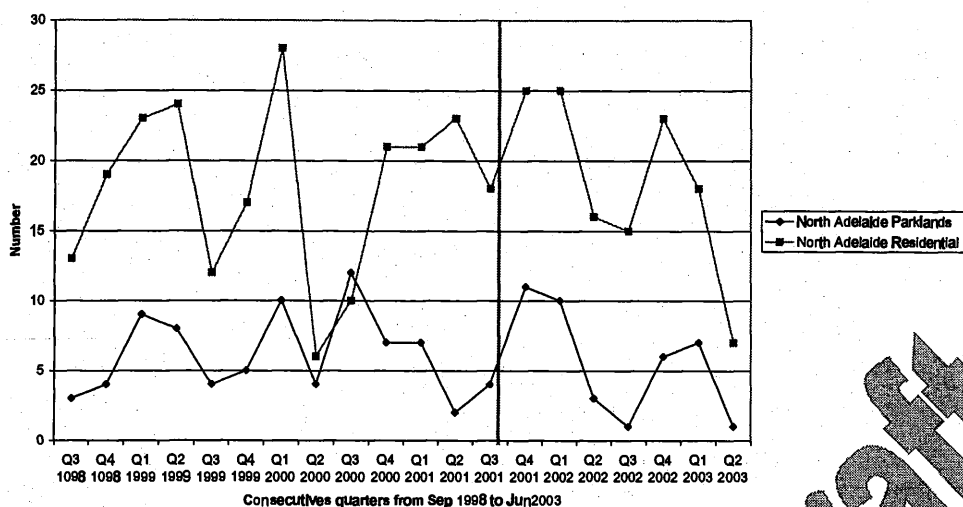


Assault offences recorded by police across all parkland zones have remained relatively constant (except for the North Parklands) over the period. It should also be recognised that the number of reported assaults is small.

Assault Offences (North Adelaide Residential and North Adelaide Parklands)

The following chart is for "Assault offences recorded by Police, quarterly from July 1998, by North Adelaide Residential and North Adelaide Parklands".

Assault Offences Recorded by Police, quarterly from Sep 1998, for North Adelaide Residential and North Adelaide Parklands

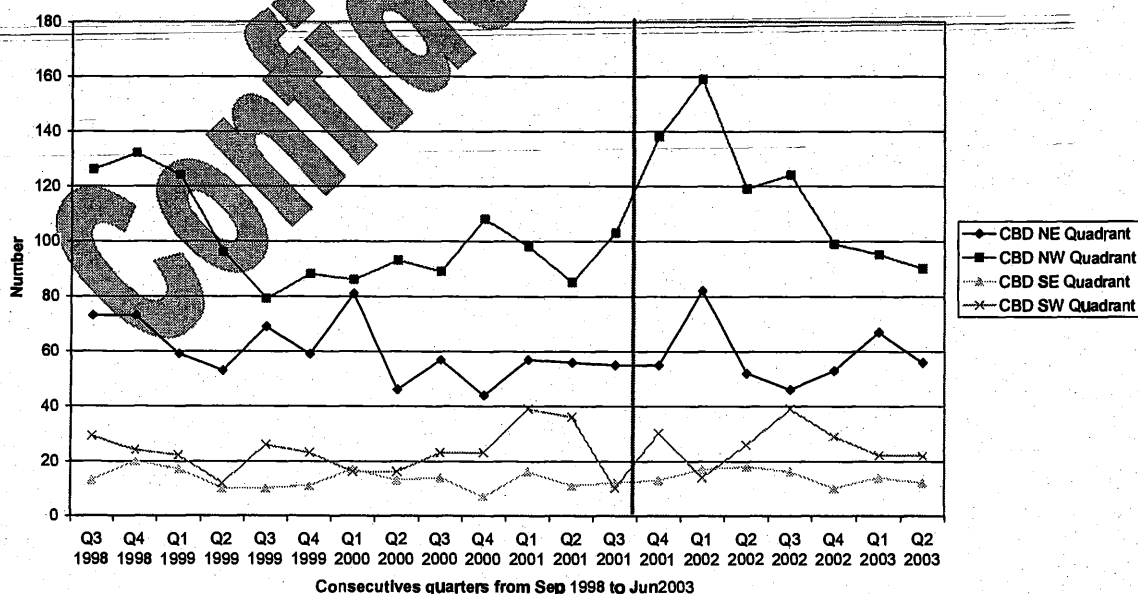


The Assault offences recorded by Police across North Adelaide Residential and North Adelaide Parklands are relatively small in number and show significant fluctuations in consecutive quarters. Nevertheless, there is a trend of declining offending levels within the North Adelaide Residential and to a lesser extent within the North Adelaide Parklands.

Hindering or Resisting Police Offences (Adelaide CBD quadrants)

The following chart is for "Hindering or Resisting Police offences recorded by Police, quarterly from July 1998, by Adelaide CBD quadrant

Hindering or Resisting Police Offences Recorded by Police, quarterly from Sep 1998, by Adelaide CBD Quadrant



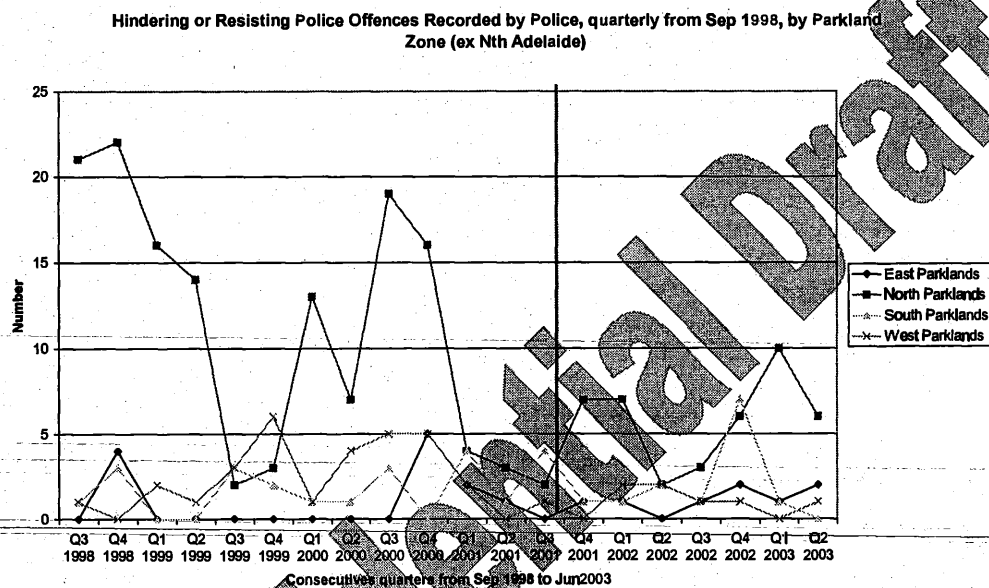
The hindering or resisting police offences, as recorded by SAPOL indicates that the majority of such events occurred in the NW and NE quadrants of the Adelaide CBD. Overall this offence category has remained at the same level for the majority of the data period, except for the NW quadrant of the Adelaide CBD where there was a significant increase in incidents associated

with this offence category at the time the Dry Area was announced. This could be due to specific policing activities and a stronger focus on licensed premises and patrols linked to the nightclub premises.

Hindering or Resisting Police Offences (Adelaide CBD quadrants)

The following chart is for "Hindering or Resisting Police offences recorded by Police, quarterly from July 1998, by Parkland zone. The chart excludes North Adelaide, due to very small counts."

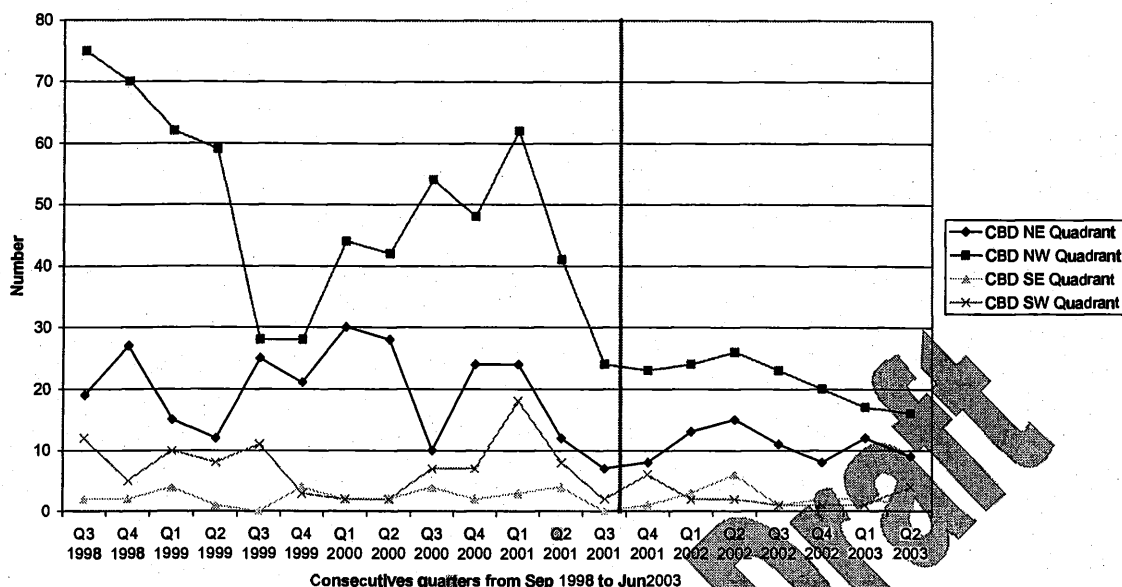
The most significant feature of this chart is the relatively low level of offending in all parklands except for the North Parklands. Whilst the number of offences for this parkland zone has been four times that of other parklands, it nevertheless has reduced to levels seen pre- Dry Area and is approaching the activity levels of other parkland zones.



Indecent or Offensive Language Offences (Adelaide CBD quadrants)

The following chart is for "Indecent or Offensive Language offences recorded by Police, quarterly from July 1998, by Adelaide CBD quadrant."

Indecent or Offensive Language Offences Recorded by Police, quarterly from Sep 1998, by Adelaide CBD Quadrant

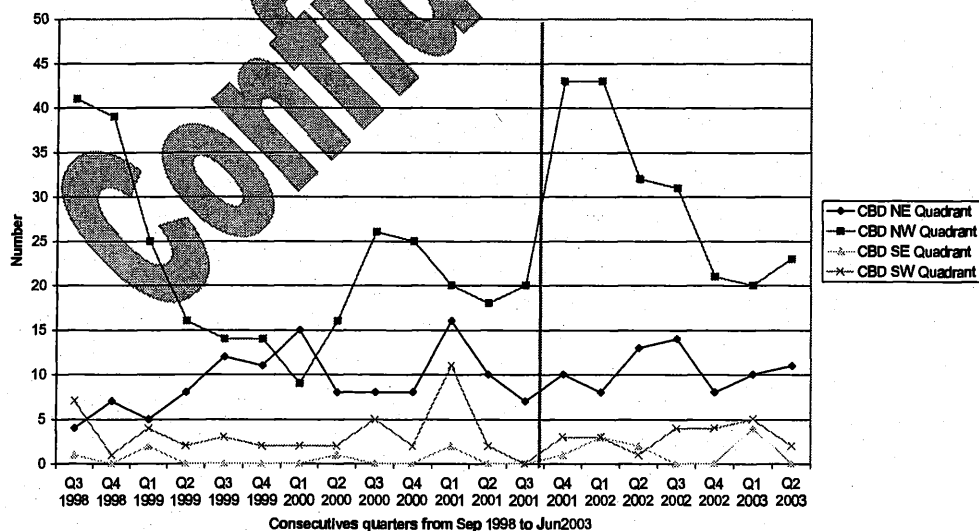


Whilst both the NW and NE quadrants are more significant in absolute terms, there is a substantial decrease in offences of this nature for the NW quadrant and to a lesser extent the SW quadrant. Noticeably the reduction was significant for the NW quadrant in the 6 months immediately prior to the Dry Area Trial but continued to decline albeit at a more modest level following commencement of the Trial.

Loitering Offences (Adelaide CBD quadrants)

The following chart is for "Loitering offences recorded by Police, quarterly from July 1998, by Adelaide CBD quadrant."

Loitering Offences Recorded by Police, quarterly from Sep 1998, by Adelaide CBD Quadrant

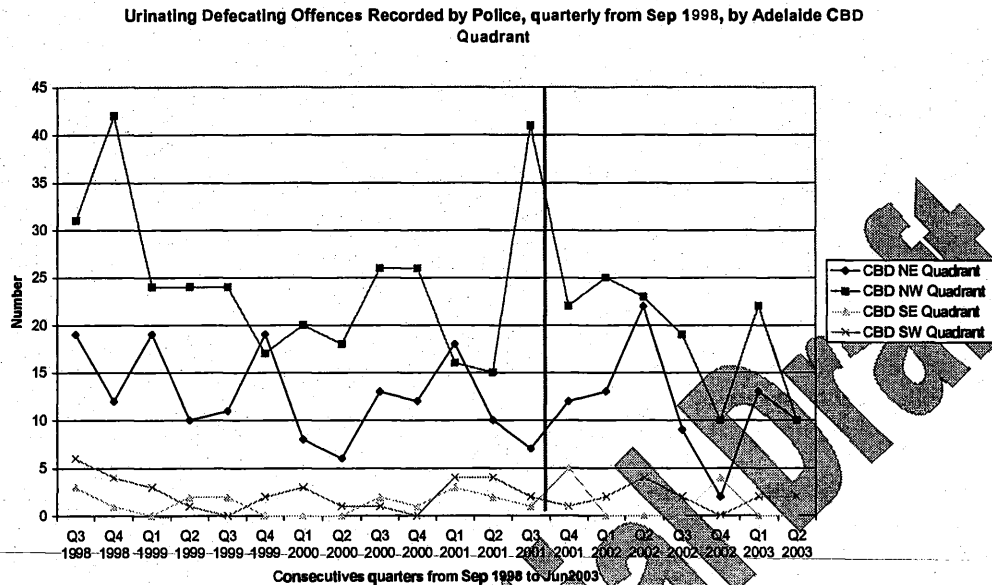


The NW quadrant was the most significant for loitering offences. All other quadrants have numerically smaller number of offences in this category. The loitering offence chart for the NW quadrant is characterised by a sharp decline in this type of offence in 1999/2000 rising to a peak 3-6 months after the commencement of the Dry Area Trial. However, the number of Loitering offences in the NW quadrant has continued to decline to a level similar to that immediately prior to the commencement of the Trial. In the most recent quarter there was a

slight increase in loitering offences in both the NW and NE quadrants whereas there was a reduction in both the SW and SE quadrants.

Urinating, Defecating Offences (Adelaide CBD quadrants)

The following chart is for "Urinating, Defecating offences recorded by Police, quarterly from July 1998, by Adelaide CBD quadrant."



Whilst the NW and NE quadrants are numerically the largest of the 4 quadrants in terms of the number of offences of this type being recorded by Police, there is a decline in the number of offences recorded, particularly for the NW quadrant, which has posted a decline since the commencement of the Dry Area Trial.

The NE quadrant, whilst returning a decline over the past 18 months, has been characterised by a fluctuating level of offences, albeit at a low count.

10.1.8 Evaluation Conclusion

Impact Area	Crime and Associated Data Outcomes	Evaluation Outcome*		
		Agree	Partly Agree	Disagree
Expiation Notice Data: May provide information on the relative change that has occurred between pre Dry Area Trial breaches (i.e. Hindley St and Rundle Mall) and breaches since the Dry Area Trial controls were put in place.	The data demonstrated a clear increase in breach levels following the introduction of the Dry Area.	4		
Expiation Notice Data: May indicate the extent to which breaches have reduced over the course of the Dry Area Trial, as drinkers familiarised themselves with the Dry Area controls.	Expiation notice levels have not decreased since the Dry Area Trial was introduced	4		
Reports from the City Watch House for Alcohol related Apprehensions: This data may indicate the extent to which alcohol was a factor in Apprehension Reports recorded at the City Watch House, for the Adelaide Dry Area.	The number of apprehension reports has decreased where alcohol was involved		4	
Charges involving alcohol: This data (derived through linking Apprehension data for alcohol related arrests associated with the	A comparative analysis provided an understanding of the	4		

City Watch House and comparing to the number of charges listed on arrest based apprehensions where the arrest and offence were committed in the Adelaide LGA and Adelaide LSA) may provide a comparative analysis of the proportion of charges from the City Watch House (involving alcohol) to total charges.	level of alcohol related apprehensions City Watch house to total charges, for each quadrant.			
Offences Recorded: It is expected that offences that are related to alcohol should have decreased as a result of the Dry Area Trial.	The data indicates there are levels of decreasing crime in some of the quadrants and zones of Adelaide LGA.		4	

* Evaluation Outcome is an assessment by the consultants, taking into account the qualitative and quantitative evidence and collected data, and comparing this with the outcomes (column 2 above) of the respondents and interviewed groups/individuals.

10.2 Public Intoxication Act- PIA data

10.2.1 Purpose and Focus

This section is focused on assessing the impact of the Dry Area Trial by evaluating relevant data that informs on the level of intoxication detected and recorded under the Public Intoxication Act. The data are derived from DASC records. The data is evaluated in relation to the project terms of reference. The main areas explored and evaluated were:

- To assess whether the Dry Area has had any impact on the number of PIA apprehensions in the Adelaide CBD compared to the long term.
- To assess whether this impact can be attributed to the Dry Area Trial.

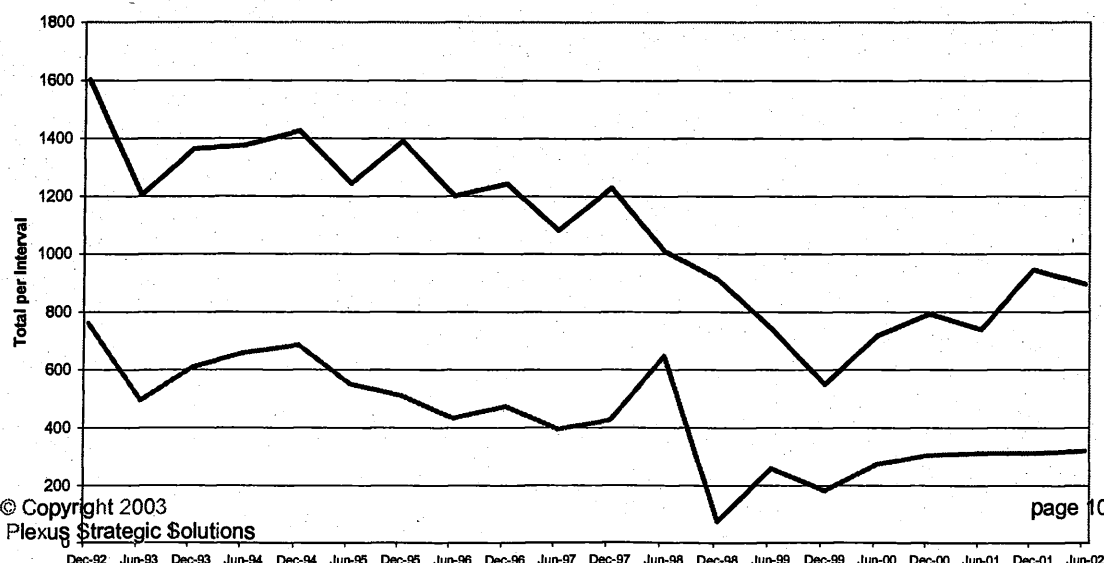
10.2.2 General

The Drug and Alcohol Services Council stores, analyses and reports on data collected by SAPOL under the Public Intoxication Act. Data is collected by SAPOL and is forwarded to DASC for processing.

DASC maintains data that enables the level of apprehensions under the Act to be identified on a Police Station basis. The location of the infringement is not reported other than the fact that it is the reporting of apprehensions in the vicinity of a Police Station/Centre. Apprehensions relate to people who have been detained by police for being intoxicated in public places. The Public Intoxication Act does not differentiate between being intoxicated and apprehended as a result of drinking publicly OR from drinking in licensed premises.

Data associated with PIA apprehensions does not in itself report on the impact of the Dry Area. It does however provide a combination of trends in relation to apprehensions relating to the PIA and also the characteristics associated with the frequency of apprehensions and the

Comparison of the Number of Apprehensions - PIA



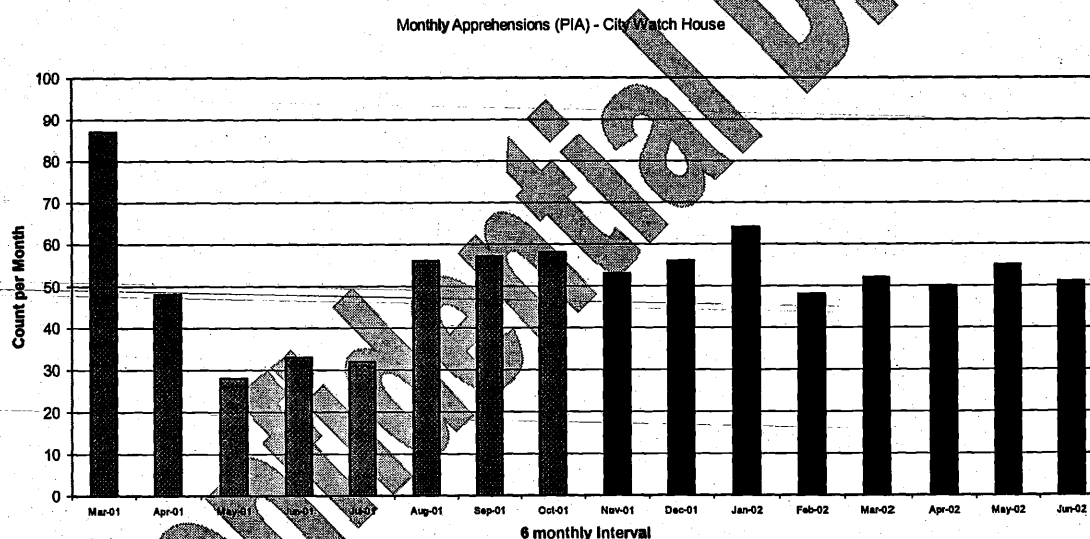
means of discharge.

The PIA data is recorded against every Police Station in South Australia. The most relevant and informative for the impact on the Adelaide Dry Area is that data associated with the City Watch House. The trend in overall apprehensions under the PIA is shown in the chart below for all Police Stations and the City Watch House.

Whilst this is the most informative (and appropriate) for this evaluation, other Police Station data sets may be analysed to assess the impact of linked areas i.e. those areas adjoining the CBD and those areas that have public transport corridors from the City to the suburbs to identify the level of referred behaviour. That is a person may be apprehended in an outer suburb but became intoxicated within the CBD and used public transport to get to the outer suburb.

The above chart indicates the trend in PIA apprehensions since 1992 on a 6 monthly-summarised count basis. Whilst the relationship between State based apprehensions and City Watch House apprehensions has been relatively constant since 1992, the Dry Area Trial has seen apprehensions plateau whereas statewide apprehensions have increased.

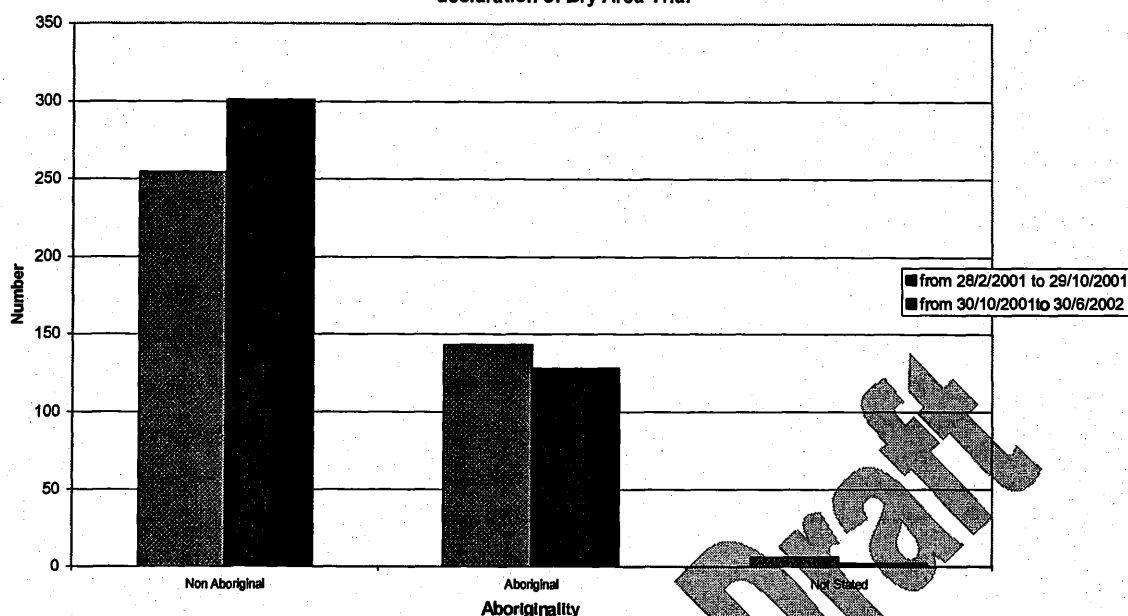
Data provided indicates the following levels of monthly apprehensions 8 months before and 8 months after the Adelaide Dry Area was declared as a trial.



In general terms the level of apprehensions has increased between the two 8 month periods by 8%. However, it should also be noted that the trend for the three months before the Dry Area and the 8 months following the introduction of the Dry Area demonstrate a stable monthly apprehensions count.

Notification of apprehensions in terms of Indigenous or non-Indigenous is shown below and compares the two 8 month periods.

**Change in Apprehensions based on Aboriginality - 10 months prior to and 10 months following
declaration of Dry Area Trial**



This chart indicates that whilst the level of Non Indigenous apprehensions increased by 18.6%, Indigenous apprehensions decreased by 11.7%. Furthermore, Indigenous representation has decreased from 36% to 30% of total apprehensions between the two 8 month periods.

10.2.3 Frequency of Apprehension

For the City Watch House the following level of apprehension frequency occurred.

For the 8 months March 2001 – October 2001	For the 8 months November 2001 – June 2002
247 persons were involved in 397 PIA Apprehensions	265 individuals were involved in 431 PIA Apprehensions
Average Number of Apprehension per person 1.61	Average Number of Apprehension per person 1.63
The majority of persons were apprehended only once	The majority of persons were apprehended only once
Range of Apprehensions per person during 8 month period 1-27	Range of Apprehensions per person during 8 month period 1-39
11 people accounted for more than 5 apprehensions each and between them totalled 118. An average of 10.7 apprehensions	11 people accounted for more than 5 apprehensions each and between them totalled 125. An average of 11.3 apprehensions

- Five individuals were common to the "11 people" indicated above in the two 8 month periods.
- Apprehensions for these five individuals for the 16-month period ranged between 11 and 66.
- The 5 individuals were involved in a total of 153 PIA apprehensions (an average of 30.6 apprehensions each).
- Apprehensions relate, in the main, to individuals who have had one PIA infringement. The number of people who regularly are apprehended (or habitually) for PIA infringement is less than 15.

10.2.4 Time Held at City Watch House and Method of Discharge

The time that a person is held at the City Watch House from the reported apprehension to discharge varies based on whether they are held in the cells at the Station or discharged to another safe place.

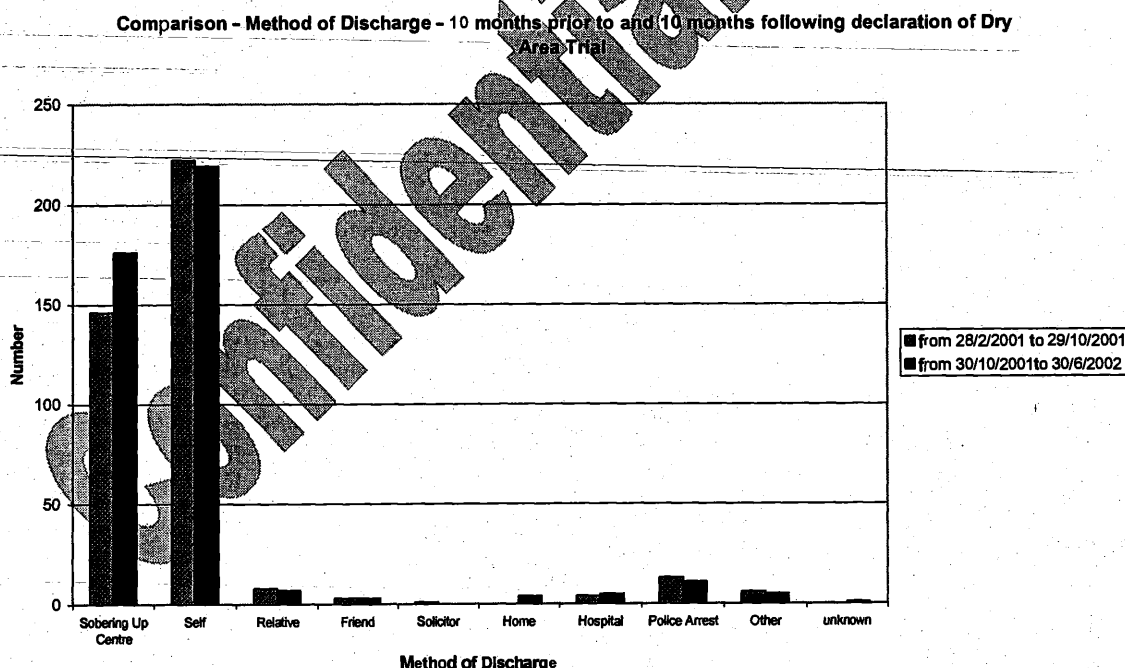
The following circumstances apply from the analysed data.

For the 8 months March 2001 – October 2001	For the 8 months November 2001 – June 2002
397 PIA Apprehensions for 1757 minutes detained	431 PIA Apprehensions for 1711 minutes detained
Average 4.43 hours	Average 3.97 hours
Range of hours for Apprehensions 0.01-18.21 hours	Range of hours for Apprehensions 0.01- 32.00 hours

The Public Intoxication Act requires Police to discharge an apprehended person to a safe environment. The general choices are:

• The Sobering Up Centre	• Friend	• Hospital
• Self	• Solicitor	• Police Arrest
• Relative	• Home	• Other (not stated)

The following methods of discharge were applied to apprehended persons at the City Watch House.



The most significant method of discharge was to the "Sobering Up Centre" and "Self". A distinctive growth of 20% to the Sobering Up Centre was evident from the data supplied.

The implications of this data are

- The higher level of activity being directed to the Sobering Up Unit and what pressures does this have on the SUU to adequately manage the person.
- The absolute level of "self" discharge. Recognising most people are apprehended only once, then the incident is probably seen as a "one-off". However there are others who may be "self" discharged who have been apprehended more than once. Are these people being counselled or being offered access to service provides for such counselling?

10.2.5 Evaluation Conclusion

Impact Area	PIA Outcomes	Evaluation Outcome*		
		Agree	Partly Agree	Disagree
To assess whether the Dry Area has had any impact on the number of PIA apprehensions in the Adelaide CBD compared to the long term.	The number of PIAs has decreased	4		
To assess whether this impact can be attributed to the Dry Area Trial.	The number of PIA from the City Watch House stabilised 3 months prior to the commencement of the Dry Area. The Dry Area has no direct impact on PIAs	4		

* Evaluation Outcome is an assessment by the consultants, taking into account the qualitative and quantitative evidence and collected data, and comparing this with the outcomes (column 2 above) of the respondents and interviewed groups/individuals.

11. Policies, Strategies and Actions- Implemented and Proposed

The Dry Area Trial has been in operation for nearly two years. In that time organisations and government agencies have been planning, developing, funding and implementing a range of initiatives that provide support to the targets of the Dry Area, namely the public drinker. However, as mentioned elsewhere in this document, the identification of the public drinker is complex due to other presenting issues that could include homelessness, poverty, mental health issues, relationship issues etc.

During this evaluation, areas in which policies and strategies need to be developed have been highlighted.

These include:

- Ensure there are support strategies in place such as effective rehabilitation services, not just sobering up centres to meet non-Indigenous and Indigenous needs.
- A holistic response is required for Indigenous people who are affected by homelessness, poverty and alcohol abuse. Service development must become integrated and focus on breaking the cycle of social exclusion and marginalisation. A new basis of service delivery for Indigenous people should be developed.
- Ensure strategies are in place that allows Indigenous people to visit "mainstream services".
- Services need to be relevant, timely and effective and delivered in a co-ordinated way.
- Strengthen community liaison strategies to enable greater participation in joint problem solving.
- If the Dry Area is extended then there must be an accompanying public awareness program.

If these views represent the directions that need to be taken then the current level of policy, strategy and actions must be identified and assessed for their ability to meet both the current but also the future needs.

11.1 Initiatives to Date

The evaluation found that progress had been made over the previous 12 months to identify and implement dry area service responses and strategies.

It is acknowledged that the issues the dry area was put in place to address are multi-faceted and complex. Therefore many of the service responses have long lead times because implementation can involve stakeholder consultation, the preparation of business cases, the development and agreement of service models, allocation of funding, planning approval, the construction of infrastructure and the recruitment of staff.

Pedestrian Safety

Several serious pedestrian accidents occurred on West Terrace following the extension of the Dry Area Trial. To create a safer crossing environment for people frequenting the West parklands several road safety initiatives were implemented ; including.

- Installation of additional street lighting on West Terrace
- Changes to traffic light sequences to give pedestrians more time to cross West Terrace
- Agreement by Adelaide City Council to construct an additional pedestrian crossing
- Increased deployment of police officers to the West Terrace area.

SAPOL work with licensed premises

SAPOL has instituted a range of measures directed at reducing crime in and around licensed premises. These include:

- Operation City Safe and Operation Confidence to address the incidence of serious assault, serious robbery and public disorder
- establishment of a uniform tactical team whose duties include providing policing presence outside and within licensed premises on Friday and Saturday evenings
- increased police numbers in the central business district entertainment precincts on Friday and Saturday evenings
- meetings with licensees and night club operators to encourage more responsible management of licensed premises
- formally advising licensees when criminal offences occur within their premises or when an intoxicated person has to be removed by police
- regularly speaking to licensees in the South and West Terrace precincts to reinforce their responsibilities under Liquor Licensing Act, particularly in relation to the sale of alcohol to intoxicated persons and licensees' promotion of inexpensive, bulk take away alcohol.

The Adelaide Local Service Area (LSA) also has a dedicated licensing intelligence and enforcement officer who works with the City of Adelaide, the Metropolitan Fire Service and the Office of the Liquor and Gambling Commissioner to address public safety issues associated with the operation of licensed premises.

Increased SAPOL patrols in parklands

The increased numbers of people congregating and drinking alcohol in the parklands has raised concerns about public safety and the safety of people in the congregating groups. To address this, SAPOL has increased the frequency of patrols to the parklands, especially the West Parklands.

Amenities in the West Parklands

Following discussions with the Government, the Adelaide City Council agreed to provide running water in the west parklands for campers and people who congregate in this area to drink alcohol as a result of the Dry Area Trial.

Aboriginal Community Constable

In February 2003 SAPOL appointed an Aboriginal Community Constable to the Adelaide Local Service Area's (LSA) Drug Action Team. The Community Constable's role includes:

- Working with the government and non-government sectors to set up an Indigenous Drug Action Team to tackle alcohol and drug problems affecting Aboriginal people in the inner city
- Engaging and building rapport with the inner city Aboriginal community, particularly in and the around the parklands, the terraces and the River Torrens
- Membership of interagency forums (including the Dry Area Aboriginal Consultative Committee) to help provide a more coordinated approach to dealing with inner city issues
- Working with agencies to link Aboriginal people in to services and programs
- Liaising with licensed premises to ensure they are complying with the Liquor Licensing Act and not engaging in unsafe alcohol selling practices.

Stabilisation facility

After considerable delays in gaining planning approval, the building works for the stabilisation facility were completed in late August 2003 and the facility began taking clients in mid-September.

The 22 bed centre is operated by the Salvation Army and it is located adjacent to the Sobering Up Unit in Whitmore Square. It provides an eight week residential program for homeless adults in the inner city with alcohol and drug abuse problems. The program includes assessment,

intensive case management and treatment services to assist people back into healthy, sustainable lifestyles. The case management process links clients up with health, housing, education and employment services and provides on-going support when clients have completed the residential component of the program. Community liaison committee
There was quite strong local community opposition to the stabilisation facility. The Department of Human Services (DHS) set up a Community Liaison Committee to work with residents to address their concerns about the stabilisation facility. The committee includes representation from DHS, the Adelaide City Council, the Salvation Army, the Inner City Administrators Group, City South Association and residents from Gilbert Street and Whitmore Square. The committee is chaired by a senior officer from the ACC.

It has been reported that since the completion of the stabilisation facility negative local opinion about it has lessened considerably.

Mobile legal service

A mobile legal service has been set up for homeless people (in particular Indigenous people) in the inner city. The service, which began operation on 21 May 2003, is a partnership between the City Homeless Assessment Support Team (CHAST), the Aboriginal Legal Rights Movement (ALRM) and the Courts Administration Authority's Aboriginal Justice Officers.

It provides a coordinated service response that gives homeless and itinerant people improved access to legal assistance so they are better informed about their legal rights and responsibilities. Services provided include:

- referrals to ALRM, Women's Legal Service and the Legal Services Commission
- assistance and advocacy in relation to fines and general legal advice and advocacy
- warrants
- information about court procedures and links to court services.

The service was set up as a pilot but owing to its success agencies have agreed to continue it.

Exceptional needs group

There are approximately 13 itinerant men with mental health, behavioural and alcohol abuse problems who frequent the inner city and who are regularly detained in the City Watch House because human services providers will not accept them when they are intoxicated and exhibiting behavioural problems.

With assistance from the Aboriginal Housing Authority, the Department of Human Services has been able to house three of the men and it has provided funding for their intensive supervision, which is being provided by Brain Injury Options Coordination.

Funding of \$102k has been recently provided from the Social Inclusion Board's homelessness initiative to DRS' Exceptional Needs Unit for the employment of a senior social worker to monitor and develop management plans for the 13 men.

The Exceptional Needs Unit has organised training for Adelaide LSA police teams about how to identify and appropriately manage people who are suffering from a mental illness. The training, which is provided by a psychiatrist and Brain Injury Options Coordination, has been well received by operational police because it provides operational police with practical strategies for dealing with people who are experiencing psychotic episodes.

The Exceptional Needs Unit has also been running workshops with Indigenous staff from all the inner city services to assist them to provide more coordinated and collaborative services for the Aboriginal people in the exceptional needs group.

Inner city services audit

An audit of dry area-related support services has been carried out. The audit includes government provided services and non-government services that receive government funding.

CHAST funding

The City Homeless Assessment Support Team (CHAST) has received additional funding that has enabled it to increase the number of full time staff from seven to nine. CHAST provides outreach services to homeless and vulnerable people in the inner city, especially those with mental health and drug and alcohol problems.

As a result of representations made by the Dry Area Steering Group, the ACC has allowed CHAST outreach workers to have vehicular access to the parklands and has provided parking fine exemptions. This has enabled CHAST to deliver its services more effectively to where they are needed.

Mobile Assistance Patrol

The Aboriginal Sobriety Group's Mobile Assistance Patrol (MAP) transports people under the influence of alcohol or other drugs to places of safety and support. Since the introduction of the Dry Area Trial MAP has received additional funding and now provides a 24 hour a day, seven days a week service.

SAPOL and Aboriginal Sobriety Group MOU

A Memorandum of Understanding has been developed between SAPOL and the Aboriginal Sobriety Group regarding protocols for dealing with intoxicated Indigenous people in the city. Under this protocol SAPOL notifies ASG's Mobile Assistance Patrol when it is called to a Public Intoxication Act incident involving an Indigenous person and MAP then transports the person to a place of safety (e.g., their home or the sobering up unit).

ACC and DHS Agreement

It was identified early in the dry area trial that there needed to be better coordination and integration of services. To help achieve this, the Adelaide City Council and the Department of Human Services have an in principal agreement to work collaboratively to build a more strategic alignment of government-council priorities in relation to human service planning.

Additional MACHA funding

The Multi Agency Community Housing Authority (MACHA) has received additional funding to employ a community liaison officer to implement strategies that encourage greater community, government, business and media awareness and support for disadvantaged groups in the inner city.

Youth initiatives

Operation Shut Eye

SAPOL has recently reinstated Operation Shut Eye, which is a program targeting at risk young people who are in the city late at night.

SAPOL reports that young people are catching public transport into the city late on Friday night and then deliberately missing the last service home. They then roam the streets committing offences (such as underage drinking) and/or putting themselves at risk of victimisation.

Under Operation Shut Eye police take at risk young people to the City Youth Service Office and then arrange their safe transportation home. The young persons' parents (or an adult relative or friend) are contacted and notified that their child has been found on the street late at night and the parents/relative or friend are then asked to come and collect the child. If that is not possible, SAPOL arranges for a service provider to take the young person home.

The operation is a joint initiative involving the Attorney-General's Department's Crime Prevention Unit, the Metropolitan Aboriginal Youth Team, the Mobile Assistance Patrol and the Adelaide Local Service Area Drug Action Team.

Operation Shut Eye was last run in January 2003 and was found to be a particularly effective way of reducing the number of at risk young people on the streets in the inner city.

Kumangka Aboriginal Youth Service

Kumangka, which is funded by DHS, runs a street work program in the inner city on Friday and Saturday nights for Aboriginal young people. The program includes crisis intervention, counselling, advocacy, case management and emergency transportation.

Kumangka has received additional funding from the Police Drug Diversion Program, which has enabled it to increase the hours of operation of the street work service from 19 to 23 hours a week.

11.2 Initiatives That Are Being Finalised

Listed below are long term dry area-related initiatives that are in the process of being finalised.

Visiting health service

Existing inner city health services are not fully meeting the needs of homeless and itinerant people. For instance, it has been reported they have service models that fail to engage the homeless, that because of their locations and operating hours they are difficult to access, and that they have long waiting lists that discourage homeless people from using the services.

To tackle these issues, work has commenced on the development of a primary care network model for the inner city homeless. The key elements of the proposed service model are:

- provision of a tiered approach to case management and intervention
- providing CHAST with general nursing and general practitioner capacity, including outreach to key inner city locations
- expanding the RDNS primary health care service
- investigating ways to fund additional general practitioners to work in the inner city
- providing general practitioner and registered nurse clinics at a range of entry points (e.g., day centres, stabilisation facility and through outreach facilities)
- providing specialist RAH outpatient clinics (e.g., renal, diabetic, hepatic and respiratory) at key inner city locations frequented by homeless people
- increasing services for young adults, including young adults with children.

These proposals are consistent with the findings of the Generational Health Review, which called for improved services for homeless people.

Further refinement of the service delivery model is occurring and the resource implications of implementation is being examined.

Exceptional needs group

DHS' Supported Housing Unit has prepared a proposal to provide long term supported housing for the approximately 13 men with multiple, complex needs who are regularly detained in the city watch house. Funding for this proposal is currently being sought.

Detention facility under the Public Intoxication Act

A key recommendation of the Royal Commission into Aboriginal Deaths in Custody (RCIADIC) was the abolition of the offence of public drunkenness (RCIADIC rec. 79). Linked to this were recommendations that non-custodial facilities should be established for the care and treatment of intoxicated persons and that police should not detain intoxicated persons in police cells (RCIADIC recs 80 and 81).

In response to the RCIADIC, public drunkenness was decriminalised in South Australia and sobering up centres established. The *Public Intoxication Act 1984* was also amended to permit police to take persons under the influence of alcohol in a public place to their home or a sobering up centre.

The sobering up centres currently in operation in Adelaide, which are run by the non-government sector, will not admit or detain intoxicated people against their will. As a result, intoxicated people are frequently detained in police cells in contravention of the RCIADIC.

To address this issue, discussions are occurring with DHS to identify options for establishing a proclaimed facility under the Public Intoxication Act (PIA) for the safe detention of people who are under the influence of a drug or alcohol. (Note: There is currently no facility in South Australia proclaimed pursuant to the PIA.)

Transitional accommodation

The dry area declaration has highlighted the issue of people sleeping in the parklands, particularly the west parklands.

Cross-agency strategies are being investigated to tackle this issue. This includes providing transitional accommodation near the parklands for homeless and itinerant people.

The proposed transitional accommodation would be similar to a caravan park. Residents would be actively case managed and linked into support services (e.g., health, drug and alcohol, housing, justice, financial) to address the problems that led to their sleeping rough.

There have been preliminary discussions with the ACC, the Land Management Corporation, Planning SA and the Department of Environment and Heritage to identify potential transitional accommodation sites.

Service models and possible funding sources are also being investigated.

Improved procedures for the verification of Aboriginality

Current proof of Aboriginality procedures used by agencies are delaying Aboriginal people's access to human services in the inner city. It has been reported that this is a particular problem in relation to Aboriginal housing.

To address this issue, a new and simplified procedure for verifying Aboriginality is being developed.

Aboriginal detoxification facility and family centre

Work is proceeding on the preparation of a proposal for the establishment of a 24 hour medical detoxification and family care facility for Aboriginal people.

Tender documents have been developed to engage a consultant to prepare a business case for the facility. Tenders will be called in mid-October 2003.

Funding of \$100k has been allocated from the Drugs Summit for the business case.

At this stage it is anticipated the centre would be a residential facility providing detoxification from alcohol and poly-drug use as well as assessment, counselling, rehabilitation programs, long term case management and exit links to appropriate support services (e.g., accommodation, education, vocational training).

The preparation of the business case will include extensive stakeholder consultations, which will determine the most appropriate operating models.

Emergency housing – Aboriginal Housing Authority

The Aboriginal Housing Authority has prepared a proposal to redevelop a former SA Housing Trust site in Sturt Street in the inner city to provide transitional accommodation for Aboriginal women with children experiencing domestic violence.

There will be six dwellings providing unsupported, short term accommodation (i.e., up to nine months). It will be managed by the Aboriginal Housing Authority.

The necessary ACC approvals have been received and tenders were called in early September 2003. It is anticipated construction will commence in late 2003.

Dry area-related initiatives from the Inner City Services Strategic Plan

DHS is preparing an Inner City Services Strategic Plan, which will form the basis for planning and delivering human services in the inner city over the next three years. The plan up-dates the Towards a Service Coordination Framework for Vulnerable Adults in the Inner City that was released in 2001.

A number of specific initiatives outlined above are contained in the plan. In addition, the plan has a range of communication strategies between agencies to address the effects of the dry area on service delivery, particularly in relation to the displacement of people from the city to the parklands and riverfront areas. Strategies include:

- increasing the capacity of agencies to deliver assertive outreach services across the city area, including the parklands (e.g., providing additional resources for CHAST and Day Centre Services)
- developing regular communication pathways between inner city agencies and SAPOL to respond to violent incidents and maintain safe environments for all
- increasing community liaison strategies to promote understanding about homelessness and opportunities for increased community relations initiatives that support the work of inner city agencies
- increasing communication pathways between DHS, inner city agencies and Aboriginal networks, agencies and forums to develop effective responses to drug and alcohol issues affecting Aboriginal people in the inner city
- strengthening liaison between inner city agencies, DHS, ACC and SAPOL regarding the management of camping out and social gatherings in the parklands.

Strategies for young people

The Inner City Plan also has strategies to improve service delivery for young people. These include improved collaboration between Aboriginal and non-Aboriginal youth workers, increased outreach services for young people at risk, and greater follow-up and support strategies around police activities such as Operation Shut Eye.

City watch house drug and alcohol referral service

The prevalence of alcohol and drug related problems amongst people in police custody is of major concern.

The Drug and Alcohol Services Council has received Drugs Summit funding to conduct a 12 month pilot examining the effectiveness of placing drug and alcohol workers in the city watch house to assess detainees' level of alcohol and drug use and to make referrals to appropriate service providers.

Funding of approximately \$190 000 has been provided for this initiative.

RAH discharge protocols for intoxicated Aboriginal people

It has been reported that when intoxicated Aboriginal people are discharged from the RAH they are not being referred into the care of appropriate support services such as the Aboriginal Sobriety Group. DHS is examining this problem and the possibility of establishing a Memorandum of Understanding between the RAH and the ASG so that the ASG's mobile assistance patrol will be called to the RAH when an intoxicated Aboriginal person is being discharged.

Several Government Agencies are involved in the development of relevant policy, development of strategies that impact on needs of public drinkers, the causes and effects of public drinking and the establishment of implementation programs and processes.

Inner City Services Strategic Plan (see above)

The Department of Human Services in collaboration with the Adelaide City Council and key inner-city agencies is working jointly to develop strategies that will form the basis for planning and delivery of services over the next three years. These services are focused on meeting the needs of disadvantage and vulnerability that clients present to inner city services through a combination of problems including mental health, violence, poverty, physical health, drug and alcohol use associated with clients who are transient, mobile and isolated.

The draft strategic plan, states that the Dry Area controls "have altered the way in which inner city agencies have had to respond to homeless and vulnerable people in the city." The strategic plan is focused on addressing a range of impacts that are associated with the changed relationship between inner city agencies and clients.

The strategic plan therefore is focused on common issues and working towards an integrated approach to develop and implement responses to produce better outcomes.

11.3 Gaps in Strategies

Whilst the range of initiatives, implemented and being finalised are substantial and wide ranging, there are several opportunities that appear not to be under consideration. These, as stated earlier are:

- Strengthen community liaison strategies to enable greater participation in joint problem solving.
- The provision of a public awareness program.

[These are included above]

12. Responses to Terms of Reference

12.1 Objective 1

Has the implementation of the Dry Area achieved its intended Stage 1 and Stage 2 objectives?

12.1.1 General

The stage 1 objectives were:

- "Reduction in the incidence of public drinking in designated Dry Area locations
- Reduction in the incidence of anti-social or criminal behaviour by public drinkers
- An improved perception of safety in the CBD
- The success of the service and safety initiatives
- Relevant aspects of harm minimisation
- Impact on some specific population groups, particularly young people, homeless people and Aborigines"

The stage 2 objectives are:

- "Reduction in the incidence of public drinking in designated Dry Area locations without displacement to other areas;
- Reduction in the incidence of anti-social or criminal behaviour by public drinkers;
- An improved perception of safety in the CBD;
- Impact on some specific population groups, particularly young people, homeless people and Aborigines;
- The implementation and appropriateness of existing services and safety initiatives available to support the Dry Area; and
- The identification and implementation of further strategies and services that will remove the need for a Dry Area."

12.1.2 Evaluation

Most of the objectives between the two stages are in common, these being:

- Reduction in the incidence of public drinking in designated Dry Area locations... [part]
- ... without displacement to other areas [part]
- Reduction in the incidence of anti-social or criminal behaviour by public drinkers
- An improved perception of safety in the CBD

Each of these objectives has been realised to varying degrees with each discussed below:

Reduction in the incidence of public drinking in designated Dry Area locations [part]

Issue: Has there been a reduction in the incidence of public drinking in the Adelaide City Council Dry Area other than in licensed premises?

The achievement of this objective has largely been validated through direct face-to-face interviews with residents, the public, transport drivers, business operators and service providers. Designated locations such as Victoria Square, North Tee, other Squares and North Adelaide, have seen a reduction in the incidence of public drinking.

Public Intoxication Act data informs on the number of incidents where a person has been apprehended for being intoxicated. This intoxication may have been as a result of public drinking or drinking in licensed premises.

Public Intoxication Act data indicates that over the past decade there has been a general reduction in the number of apprehensions under the PIA Act across the State which has also been paralleled by data from the City Watch House. The data indicate that whilst over the past decade apprehensions have decreased, over the past four years the number of

apprehensions has stabilisation, but in the period March 2001 to Jun 2002 an increase of 8% in PIA apprehensions occurred.

This PIA information, whilst providing some patterns and trends, does not clearly inform on whether there has been a reduction in public drinking. It tells us there has been a reduction over the longer period in the number of people who have been detected and apprehended for public intoxication, but at least some of these detections may have arisen from drinking in licensed premises

However, based on the data provided, the Dry Area does not seem to have impacted on the level of apprehensions under the Public Intoxication Act and hence this data does not support the proposition that there has been a reduction in the number of public drinkers.

The **Expiation notice** data provides details of expiations for offences under the Liquor Licensing Act for consuming or possessing liquor in a public place. The data relates to Adelaide and provides an overall assessment of the activity levels for the period January 2000 to June 2003. This data shows that expiations have increased 3 –4 times since the introduction of the Dry Area Trial, when compared with the levels recored when Hindley St and Rundle Mall were the only Dry Areas. This activity level, at June 2003, declined to the levels seen prior to the Dry Area Trial.

This data indicates there are more expiation notices being issued, but cannot advise whether this is a result of higher levels of policing or more people offending.

Apprehension reports from the City Watch House for alcohol related arrests indicate there has been a decline in apprehensions from Jan 2003 (120) to July 2003 (80). This relates to all types of offences. Most of these offences occurred in the NW quadrant of Adelaide's CBD, where a significant reduction has occurred over this period.

This is a very limited time period and as such a conclusion on this data would be inappropriate. Factors such as time of year, events and policing levels, must also be understood before a clear conclusion on this data can be provided.

Conclusion:

Information provided through interviews and surveys indicate that the objective has been achieved. However, this conclusion is not clearly supported by data.

...without displacement to other areas [part]

Issue: Has the Dry Area caused displacement of public drinkers and associated groups to other areas? If so,

- What has been the extent of that displacement?
- To which areas have the public drinkers and associated groups been displaced?
- What have been the effects (either positive or negative) of that displacement?

This objective was informed by the interviews held with a wide range of service providers (Indigenous and non-Indigenous), government agencies, police, public transport driver and business.

To respond clearly to this objective requires an understanding of displacement and where displacement occurred.

During the course of the evaluation many comments were provided describing the people who were affected by the Dry Area and the level and type of displacement that occurred. Much of the information provided was presented from various viewpoints and generally supported the activities and function of that organisation. That is, discussion on displacement would generally be provided to support or justify the organisation's role in providing services to "displaced people".

Given that there were inconsistencies and a range of definitions regarding who was displaced, it is difficult to state clearly whether there was significant or minor displacement. Displacement has occurred; the scale and type need to be identified.

Nevertheless, based on the range of discussions this evaluation concludes on displacement in the following way. People could be characterised (irrespective of being defined as homeless or having mental health issues) as:

- Campers
- Itinerants
- Day Visitors
- Loners (or solo drinkers)

Campers were located in the West Parklands on a permanent or semi permanent basis. Prior to the Dry Area they frequented Adelaide CBD during the day to access various service/welfare agencies. They participated in public drinking (primarily in the Camps or western areas of Adelaide) and returned to the West Parklands at night. The number of campers would vary from (30-150) depending on the time of year. Campers also included itinerants. Campers comprise of both Indigenous and non-Indigenous people. Campers (subject to Adelaide City Council activity), remained in the Parklands or were relocated into relevant accommodation or moved elsewhere. Some returned to family accommodation or to friends. The Dry Area has impacted on campers' ability to drink within the CBD (as they did pre Dry Area) and has meant they now drink in the Parklands or elsewhere. The current small number of campers would suggest that there has been a displacement of campers to other locations either to accommodation in Adelaide or to the suburbs. It has also been claimed that the real number of drinkers in the camps was approximately 20-40. Validation of these numbers is difficult.

Itinerants are temporarily in Adelaide CBD and may use the West Parklands or elsewhere in the City as a temporary stay. Itinerants may join with the campers (or stay alone), find squats, or utilise or access various service agencies. Currently it is assessed there are up to 150 itinerants in Adelaide. This highly mobile group generally has limited resources and utilise support services wherever possible. Whilst they may become involved in public drinking, they are primarily in Adelaide for personal (or a relatives) health issue or merely moving through to another location.

Day Visitors are people who come to Adelaide by public transport (train mainly), access the Beeline or Loop line bus, and (pre Dry Area) travel to Victoria Square to drink in groups. At night they would either utilise the services of MAP (Indigenous people) or public bus/train to travel back to their accommodation in the suburbs. The Dry Area has limited the number of "day visitors" of this type, as they cannot access Adelaide for public drinking. Currently, day visitors frequent the West Parklands. There are a limited number who are involved in this practice. Other day visitors are those who stated that their home was the Sobering Up Centre. They travel between the Sobering Up Centre and the West Parklands, on a daily basis. Prior to the Dry Area it was claimed the number of drinkers range from 20-30 during warmer days; half that number during winter months and during "pension" week the number of "day visitors" would double.

Loners (solo drinkers) generally are acting on an individual basis and are not attracted to the camps or to drinking in groups. They tend to disregard the Dry Area controls and drink where and when they want.

Based on the above definitions, the Dry Area has caused the displacement of some people who are public drinkers.

People from the camps return to the camps daily (subject to other Adelaide City Council activities), and are therefore not displaced. Itinerants are highly mobile and generally in Adelaide for a short time. They are not displaced. The Day Visitor has changed in behaviour and as a result the number of day visitors has reduced. This group has been displaced as they are now not coming to Adelaide to drink. The Loner acts independently and tends to have little regard for the Dry Area provisions and therefore they are not displaced.

In addition to the above, the impact of displacement on youth as a group needs to be considered. Several youth service providers have commented on the reduction of young

people who are at risk and are now less visible as a result of the Dry Area controls. These youth may or may not have been public drinkers.

These service providers are finding it more difficult to access young people because they are remaining in the suburbs. Service providers either have to seek out their clients (become more mobile in the suburbs) or wait until the client ventures into the City. Whilst this trend was not strong for youth service providers, there was a concern about its impact on future youth service provision strategies for the City compared with the suburbs.

The extent of displacement of those who are day visitors may mean relevant service providers refocus their services to non-City locations.

Conclusion:

The objective "...without displacement to other areas..." has not been achieved as displacement has occurred for some public drinkers (day visitors), campers (to the extent they are not able to access Adelaide CBD to drink) and youth.

Reduction in the incidence of anti-social or criminal behaviour by public drinkers

Issue: Has there been a reduction in the incidence of anti-social or criminal behaviour (such as assaults, good order offences and property damage) directly attributable to individuals drinking in the Dry Area (excluding as far as possible, criminal behaviour associated with drinking in licensed premises)?

Issue: Has there been a change in the number of people within the Adelaide City Council area who come into contact with the criminal justice system for alcohol related behaviour (differentiated according to age, gender and Indigenous identity)? If so, to what extent could this be attributed to the operation of the Dry Area, or to the consumption of alcohol in locations outside the auspice of the Dry Area?

The achievement of this objective has been validated through direct face-to-face interviews with residents, the public, transport drivers, business operators and service providers. The perceived or observed incidence of behaviours such as public drunkenness, people congregating in groups, begging, fighting/brawling and disruptive behaviour have reportedly seen a sharp decline in key locations. Whilst most respondents concluded there had been a reduction in behaviours, there is a concern that many respondents felt that there had been no change to these behaviours from 2 years ago. Whilst this may be true, it could also be a comment on the respondent's change in tolerance for these behaviours or they are promoting higher standards. That is, 2 years ago the behaviour may have been considered as minor but now it is seen as significant.

Relevant data has come from sources such as SAPOL and the Adelaide Convention Centre.

Offences based data, for offences such as assaults, hindering or resisting police, indecent or offensive language, loitering, urinating, defecating and data relating to total offences provide trends from July 1998. Whilst total levels of offences provide no evidence of trends, at a more detailed level such as hindering or resisting police, indecent or offensive language, loitering, urinating, defecating, there is evidence of downward trends, but they need to be assessed on the basis of seasonality, events and policing activities.

Data from the security function of the Adelaide Convention Centre also indicated that there has been an overall reduction in incidents such as property damage, drug and alcohol, car breaking, disorderly, intoxication, assaults, but the number of alcohol related incidents has fluctuated over the 2½ years of data provided, whereas disorderly behaviour has remained relatively high compared to other incident types.

Conclusion:

The objective has, according to the qualitative data been achieved, and is generally terms supported by available empirical data.

An improved perception of safety in the CBD

Issue: Has the Dry Area led to a change in the public's perceptions of safety when frequenting the city and/or to a change in their use of city space?

The achievement of this objective has largely been validated through direct face-to-face interviews with residents, the public, transport drivers and business operators. Data provided through questionnaires, (via telephone, face-to-face surveys and interviews) have also provided a significant base of qualitative evidence to support the objective.

The public survey indicated that there has been a shift in the perception of increased safety in Adelaide in the order of 20%. Currently, 90% of respondents feel safe in public places in Adelaide.

The residents also perceived improvements to personal safety inside the Dry Area and mainly around Victoria Square. Business and transport drivers supported this position.

Whilst this view of "improved perception" is significant, there was also alarm regarding the level of safety at the margins of the Dry Area, that is at the boundaries.

Residents and business provided the most critical comments. Generally, South Terrace for residents and West Terrace for business were seen as unsafe. The behaviour of public drinkers and other people who use the parklands for drinking, meeting and camping, drove this view. Essentially, the behaviours that were evident within the parklands were the same behaviours that occurred in Victoria Square and elsewhere prior to the adoption of the Dry Area Trial. Business and residents feel that whilst the Dry Areas have impacted positively on both safety and behaviour *within* the Dry Area, the boundaries are generally forgotten and not diligently policed (particularly South Tee). South Tee residents seek an expansion of the Dry Area to include a strip of Parklands to remove the public drinkers that locate in the South Parklands. Nevertheless, they do recognise that the needs of these drinkers should be addressed as part of providing a solution.

Conclusion:

The objective has been achieved within the Dry Area but has not been achieved on the Terraces, particularly South and West Terraces.

Other Objectives

Impact on some specific population groups, particularly young people, homeless people and Aborigines.

Issue: What has been the impact of the Dry Area on those specific groups, such as business people, young people, Indigenous groups, homeless individuals, transport drivers (taxi, bus, tram) and hospitality workers, who may be directly impacted by the Dry Area?

The Dry Area has had a direct impact on each of these three groups, in different ways.

Young people: As previously discussed, young people have been affected by the Dry Area in two ways:

- Service providers (particularly those who have street workers) believe that there are less at risk young people coming into the City to access services; and
- At risk young people, whilst well informed about the Dry Area, suggest they intentionally disregard Dry Area rules.

The impact, whilst difficult to verify, is nevertheless a statement on behaviour of vulnerable youth. Their attitudes have the potential to impact on the nature of service delivery models, service delivery practices, and education programs that may need to be considered for the future.

Homeless people: Many service providers have stated that the Dry Area is bad social policy and discriminatory. The Inner City Administrator's Group, which provides Services for Homeless and Vulnerable Adults, has recently reported on the direct impacts of the Dry Area on this group. ICAG stated

"...the Dry Zone decision was a bad decision and should be reversed with other service measures introduced to reduce the perceived problems with behaviour in and about the relevant parks and public squares... The impact of the Dry Zone varies between different social

groups and assistance needs to recognise the social and cultural differences affecting homeless and other vulnerable adults in the City.... A major issue is assisting those with exceptional needs in the City who are among those most affected by the Dry Zone decision but whom it is hardest to locate. This is particularly true of vulnerable adults with physical and/or mental disability who also abuse drugs and/or alcohol."

The direct impacts on the homeless are seen as:

Social exclusion – Access to public parks is denied.

Violence and injury – There are unsubstantiated reports of increases in assaults on homeless and other vulnerable adults.

Relocation of individuals to unsupervised/unsafe locations – As a result, service providers cannot manage them effectively.

Statistics from service providers indicate increasing rates of activity to provide services to people who are homeless, vulnerable or marginalised through poverty.

The linkage between the Dry Area and the impacts on the homeless, an expiation notice if a person does not comply with the Liquor Licensing Act regulation. The opportunity for a homeless person to drink alcohol, which can only be publicly, will mean infringement of the regulation.

Indigenous people: The impact, stated by many service providers within the Indigenous Community and policy organisations has been severe in several ways. They claim:

- Indigenous people are not able to meet in Victoria Square, which is viewed as being a culturally significant meeting place.
- Indigenous people who have been affected by the Dry Area are staying in the suburbs and their health/social issues and problems may now be transferred to the family or group environment in the suburbs, whereas pre Dry Area, issues and problems were visible and managed by service providers when the person was in the City.
- The Dry Area has focused attention on Indigenous people, negatively. That is, the controls were put in place to remove Indigenous people from Victoria Square.

These three factors, together with a range of comments contained within the body of this evaluation, indicate that the Dry Area is not a regulation supported by many Indigenous people or organisations. Nevertheless, organisations such as the Aboriginal Sobriety Group have proposed a number of solutions that would assist in overcoming some of the concerns within the Indigenous community and possibly removing the need for a Dry Area. These include:

- An alternative meeting place close to Victoria Square be established.
- A culturally appropriate sobering up centre is created.
- An Aboriginal Club is established.

It is suggested that these developments should also be supported by

- Declaring Victoria Square a significant site of the Kaurua people and
- Establishing cultural activities on this land

Conclusion:

The objective of identifying the impact on specific groups has been achieved. One of the most important aspects of the Dry Area that appears to be associated with misinformation is the view that "the Dry Area stops people from meeting in Victoria Square". The Dry Area only stops drinking in Victoria Square. An effective communication/education strategy is required to ensure the correct messages are conveyed to people. Nevertheless, it is recognised that some Indigenous people consider drinking alcohol is part of the ambiance of a meeting.

The implementation and appropriateness of existing services and safety initiatives available to support the Dry Area

Issue: Have the new services and safety initiatives intended to support the dry area been implemented and if so, to what extent? Have they helped improve service delivery to individuals who abuse alcohol, and if so, in what ways and with what results?

Issue: What has been the impact of the Dry Area on those services that supported/interacted with public drinkers before the Dry Area was established?

This objective is focused on implementation of safety initiatives and the adequacy of existing services.

Initiatives that have been identified by this evaluation are derived mainly through initiatives managed through government agencies such as the Department of the Premier and Cabinet, Department of Human Services and SA Police. Whilst these agencies may be primary drivers other agencies and organisations are involved in these initiatives through working groups and steering committees (eg Dry Area Steering Committee).

Initiatives have been described in the Chapter titled "Strategies".

Most service providers have not changed service levels or service direction over the past 2 years. Accordingly, the principal means of introducing new initiatives has been through the Dry Area Steering Committee and the Department of Human Services activities.

The Dry Area has been in place as a trial for nearly 2 years. Within the first year of the Dry Area trial the Police implemented education programs, cultural awareness training through the Aboriginal Sobriety Group and also a Memorandum of Understanding with the Aboriginal Sobriety Group (Mobile Assistance Patrol).

Whilst the range of initiatives is significant, there are a number that are nearing completion, which will complement those already implemented.

In regard to service providers, there are many service organisations that have as their objectives the provision of direct services and support services to vulnerable, homeless and marginalised people within the Indigenous and non-Indigenous communities. Service providers are either independently financed, are non-government organisations that largely rely on government funding, or are service providers within government agencies. Service providers also include organisations that are providing policy and funding advice.

In most instances service providers commented on their limited financial and operational resources to meet their objectives in servicing their clients. Most providers recognised that they were limited in their capacity to expand and yet there was little substantial evidence of working closely with other service providers, other than through service agreements or similar arrangements. Many providers share common interest through regular sector-based meetings but do not take it any further.

It was evident that there is a strong "silo" culture amongst service providers, in that they work within their current guidelines and share or participate in cross sector actions when there is a need to meet a common issue.

This narrow focus does not maximise the use of resources in an effective way. As funding is the principal means to ensure outcomes are achieved it is suggested that an approach based on "funding programs rather than funding organisations" be considered to change the culture of providing services. Whilst this suggestion requires structural adjustments to organisations and funding processes it has the potential to ensure required results are achieved through appropriately defined performance outcomes.

The identification and implementation of further strategies and services that will remove the need for a Dry Area

Issue: Have the further strategies and services required to remove the need for a Dry Area been appropriately identified and implemented?

The evaluation process involved consultation with a wide range of service providers and policy organisations. Several organisations were surprised but keen to put their viewpoint. They had not participated previously. It is evident that there are organisations that have views and ideas that could be harnessed for future debate or implementation. Opportunity should be given to

these organisations to participate in discussion about the Dry Area and other social issues. It is possible that these organizations are not aware or have elected not to participate through two peak organisations, SACOSS and ICAG. Both organisations are members of the Dry Area Steering Committee and as such individual organisations can have a voice and influence decisions made by that committee for the benefit of services within or associated with the Dry Area.

Other strategies that have been raised that could should add value in this environment are:

- A holistic response for Indigenous people who are affected by the homelessness, poverty, and alcohol abuse. Service development must become integrated and focus on breaking the cycle of social exclusion and marginalisation. A new basis of service delivery for Indigenous people should be designed and developed. Whilst this is seen by agencies as a focus that they are aiming for as part of other strategies such as the Inner City Services Strategy, there is a desire by service providers to participate in co-ordinated activities that focus on client outcomes based on addressing the client's needs.
- Strengthen community liaison strategies to enable greater participation in joint problem solving. This has some similarity to the holistic response but is focused more on the needs of the organisation to have a strong association with other organisations and the broader community in addressing relevant issues.
- The provision of a public awareness program. As indicated elsewhere there is a need for several levels of public awareness, education and communication.
 - The people who wish to meet in Victoria Square need to be advised in an appropriate way that that is possible.
 - If the Dry Area is continued or abandoned such information needs to be communicated effectively, the miles, location and boundaries well defined and clearly communicated.
 - Appropriate literature for tourists (visitors) needs to be available.
 - Depending on the future of the Dry Area business associations and community groups within the City of Adelaide should be accessed to inform continuously, the Dry Area Steering Committee, of issues associated with drinkers or associated issues within the Adelaide CBD.

12.2 Objective 2

Have its effects been sustained over time?

Based on the views expressed and the data provided and analysed in this document, there is evidence that the Dry Area has produced the following sustained effects, to date?

- The public and residents are enjoying a perceived higher level of safety within the City.
- Business operators comment on the impact of the Dry Area on tourists' views of the City.
- Public Transport Drivers and Conductors have commented on the significant decline in harassment of passengers (and harassment of themselves), substantial reductions in vandalism and higher levels of cleanliness of passenger vehicles, since the Dry Area was introduced.

12.3 Objective 3

Have there been any unintended consequences (either positive or negative), and if so, what?

The following points represent the unintended consequences of the Dry Area

- Residents and businesses on the boundaries of the Dry Area are affected negatively and in some instances seek expansion of the Dry Area.
- Public Transport drivers are enjoying the benefits of the Dry Area and are being approached by tourists as information sources.

- At risk young people are not travelling to Adelaide as often, causing case managers and service providers to search for their clients in suburban locations.
- Public drinkers who regularly visited Victoria Square pre Dry Area are venturing into Adelaide in smaller numbers. Their issues/needs are now located in the suburbs or in country locations. Services may not be accessible or provided to them.
- Business owners on the boundaries of the Dry Area feel as if they have been ignored or forgotten in terms of the issues that confront them with public drinkers.
- Residents located along South Tee have a similar view to those businesses that are located on the boundary of the Dry Area.

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13. Scenarios and Impacts

13.1 Scenario 1 – The Dry Area continues and is re-evaluated in 12 months

The Dry Area continues for 12 months and *is re-evaluated*. Consideration is given for the inclusion/exclusion of the North Adelaide residential area.

13.1.1 Advocates of this Scenario

This scenario would be selected and supported by service providers and government agencies that suggest there are insufficient services being provided to those people directly affected by the dry area; namely, public drinkers and others at risk, such as homeless and youth.

This scenario is ambivalent in regard to the need for the North Adelaide residential zone being included or excluded as part of the next 12 months of the Dry Area.

13.1.2 Considerations

This scenario has several important aspects:

1. The Dry Area has provided benefits to business, tourism, residents and the public.
2. The continuation of the Dry Area is subject to there being effective and appropriate services available for those people affected by the Dry Area.
3. There has been a wide range of services planned, in the process of implementation or have been implemented to supplement the range of existing services provided.
4. A range of stakeholders have each agreed to develop and provide evidence of the continuing impact of the Dry Area on their business/organisation and their clients/customers.
5. These additional services when completely implemented may provide the range of service outcomes essential for the care and responsible management of people at risk, with a focus on those affected by alcohol within the Dry Area.
6. North Adelaide did not feature significantly in the discussions as part of this current evaluation, but there were some comments that stated the infrequent public drinking in Wellington Square has now been eliminated.
7. An effective stakeholder education/information program is provided as part of the future management of the Dry Area.

13.1.3 Risks

1. The time taken to develop, implement and consolidate all planned services is not achieved within the short term (less than 12 months).
2. The re-evaluation in 12 months is not conclusive, in terms of the effectiveness of the range of services being provided.
3. The evidentiary data is not capable of concluding effectively whether the Dry Area has provided additional benefits to all stakeholders after 3 years of a Dry Area.
4. The residents of North Adelaide and other stakeholders will debate openly the inequities associated with North Adelaide being removed from the Dry Area.
5. People in business, and residents of North Adelaide become concerned that whilst additional services have not been implemented effectively, it will cause public drinkers to target North Adelaide as a close substitute for Adelaide CBD.

13.1.4 Conclusion

This is a viable scenario in regard to the continuation of the Dry Area for an additional 12 months, but subject to re-evaluation. The evaluation should be focused on the extensiveness of service implementation, the completeness of that implementation, and effectiveness of the service provision, in meeting the needs of the public drinkers and others at risk, such as homeless and youth. North Adelaide should not be treated separately to the Adelaide CBD.

13.2 Scenario 2 – The Dry Area continues and is abandoned in 12 months

The Dry Area continues for 12 months and is then abandoned. Consideration is given for the inclusion/exclusion of the North Adelaide residential area, now.

13.2.1 Advocates of this Scenario

This scenario would be selected and supported by service providers and government agencies that believe there are sufficient programs implemented to support those people directly affected by the dry area; namely, public drinkers and others at risk, such as homeless and youth. Additionally, this scenario is ambivalent regarding the need for North Adelaide residential being included or excluded as part of the next 12 months of the Dry Area.

13.2.2 Considerations

This scenario has several important aspects:

1. The Dry Area has provided benefits to business, tourism, residents, and the public based on evidence provided.
2. The continuation of the Dry Area is subject to there being effective and appropriate services available for those people affected by the Dry Area.
3. The range of services planned to address service gaps is implemented within the next 12 months to supplement the range of existing services provided.
4. Provided all relevant services have been effectively implemented, there is no need for the Dry Area once all the services have been implemented. The Dry Area is abandoned at its 12-month anniversary.
5. North Adelaide did not feature significantly in the discussions as part of this current evaluation, but there were some comments that stated, the infrequent public drinking in Wellington Square has now been eliminated.

13.2.3 Risks

1. The time taken to develop, implement and consolidate all planned services is not achieved within the short term (less than 12 months).
2. There is no re-evaluation in 12 months, therefore the performance and focus of the services (and whether there is any continuing service gaps) will not be assessed.
3. Evidentiary data (sought from a range of stakeholders) is not used to conclude on whether the Dry Area has provided additional benefits to all stakeholders.
4. The residents of North Adelaide and other stakeholders will debate openly the inequities associated with North Adelaide being removed from the Dry Area.
5. People in business, and residents of North Adelaide become concerned that whilst additional services have not been implemented effectively, this will cause public drinkers to target North Adelaide as a substitute for the Adelaide CBD.
6. Residents' fears materialise initially with Wellington Square being a target for public drinking, prior to public drinker returning to the Adelaide CBD, in 12 months.

13.2.4 Conclusion

This is a moderately viable scenario, which supports the continuation of the Dry Area for an additional 12 months to allow all relevant services to be implemented, and as a result, the Dry Area ultimately abandoned. If no re-evaluation is undertaken because it is known in advance that the Dry Area is to be abandoned, then there is scope for comprehensive service provision not being achieved as part of the cessation of the Dry Area. This could lead to inadequate services being provided and not meeting the needs of the public drinkers and others at risk, such as homeless and youth. North Adelaide should not be treated separately to the Adelaide CBD.

Based on the evaluation findings, this is moderately viable but has negative consequences if all services have not been implemented effectively and public/business stakeholders have not been informed on the range of services that have been implemented. The perceptions of business/resident in 12 months time about the Dry Area will be guided largely through education and information.

This scenario is not preferred.

13.3 Scenario 3 – The Dry Area is Expanded

The Dry Area is expanded

- a) To accommodate South Tee concerns
- b) To accommodate River Torrens concerns
- c) To embrace the entire Parklands environment

13.3.1 Advocates of this Scenario

This scenario is selected and supported by those who would advocate that, irrespective of the extent by which existing or new services have been implemented, the Dry Area has been successful for the removal of public drinkers and associated behaviours. The extension is now needed to ensure that areas of specific interest are included in the Dry Area, whereas to date they have not been.

- The South Tee expansion option is to establish a buffer zone along South Tee to remove the behaviours currently being observed and inflicted on residents;
- The second option is to remove the poorly defined boundary between the Morphett St Bridge and Adelaide Bridge by including all parklands between the two bridges, south of and including the Torrens riverbank; and
- The third option is to expand the Dry Area to include the entire Parkland precincts.

13.3.2 Considerations

This scenario has several important aspects:

1. South Tee expansion
 - a. Creates a buffer zone that would be difficult to define
 - b. Provides an additional zone to be policed under the Dry Area regulations.
 - c. The expansion may cause difficulty with service providers in Hutt St and on South Tee.
 - d. The expansion may be seen as racially prompted and add further to the notion of dislocating vulnerable people from the South Parklands.
 - e. Stakeholders do not want to see public drinkers further displaced but their [the drinkers] needs resolved.
2. River Torrens expansion
 - a. Removes the artificial boundary that is physically difficult to define and police.
 - b. Creates a natural boundary, being the south bank of the River Torrens.
 - c. Enables easier policing.
 - d. This area does not cause dislocation but may impact on public drinkers who are using the river bank as their drinking venue, and then undertake behaviours that cause stakeholders to feel unsafe.
3. Entire Parklands environment
 - a. Removes the need for the 2 above expansion options.
 - b. The expansion may be claimed as another instance of intolerance and adds further to the dislocation of vulnerable people outside of the Adelaide CBD.
 - c. Stakeholders do not want to see public drinkers further displaced but their [the drinkers] needs resolved.

13.3.3 Risks

1. South Tee expansion
 - a. This places pressure on adjacent sporting and other facilities that would be outside but on the boundary of the Dry Area and may become the subject of inappropriate behaviours.
 - b. The public drinkers may become indifferent to the expansion and drift into the Dry Area, as there is nowhere else to drink. In turn they become more obvious to service providers and police.
2. River Torrens expansion
 - a. Creates an administrative and policing issue for events held at Elder Park where alcohol has historically been allowed. This would include community events where people may consume alcohol but where a special or restricted license would ordinarily not be considered for the event.
3. Entire Parklands environment

- a. It may displace (subject to service developments) public drinkers to areas outside of the Adelaide LGA.
- b. It may cause public drinkers to become indifferent to the expansion and drift into the Dry Area, as there is nowhere else to drink. In turn they become more obvious to service providers and police.
- c. Creates an administrative and policing issue for events held in the parklands where alcohol has historically been allowed, such as community events where people may consume alcohol, where a special or restricted license would not ordinarily be considered for the event.
- d. Creates a possible confrontation with Councils sharing boundaries with the Adelaide City Council, where they believe the expansion may adversely affect their ratepayers. As a result either the adjoining Councils have to meet the potential for further displacement through their own services programs, or they are obliged to seek approval for a Dry Area(s) within their Council zone.

13.3.4 Conclusion

This scenario has mixed viability.

As the needs of public drinkers are seen as a major concern by stakeholders, it would be inappropriate to expand the Dry Area and subject public drinkers to possible displacement, and be forced into unsafe, unsupervised, or remote environments.

The only expansion option that has minimal impact but provides a cleaner boundary for enforcement purposes is the River Torrens expansion option within this scenario.

Accordingly the expansion of the Dry Area

- a) To accommodate South Tee concerns is not preferred.
- b) To accommodate River Torrens concerns has merit.
- c) To embrace the entire Parklands environment is not viable.

13.4 Scenario 4 – The Dry Area is Abandoned

The Dry Area is abandoned, now.

13.4.1 Advocates of this Scenario

This scenario is selected and supported by those who would advocate that all relevant services are now being provided to those people directly affected by the dry area namely; public drinkers and others at risk, such as homeless and youth.

13.4.2 Considerations

This scenario has several important aspects:

1. The Dry Area has provided benefits to business, tourism, residents, and the public.
2. Business interests, residents and the public together see merit in the presence of the Adelaide Dry Area.
3. The continuation of the Dry Area is subject to there being effective and appropriate services available for those people affected by the Dry Area.
4. The range of services that have been implemented, are operational, are comprehensive, are supportive of the wide range of needs, and there are no gaps in these services.
5. There is no need for the Dry Area now that all the services have been implemented. The Dry Area is abandoned at its expiry date.
6. That the range of services now provided will address the needs of public drinkers and others at risk, such as homeless and youth.

13.4.3 Risks

1. There is a presumption that all services have been implemented and are providing comprehensive and effective service delivery.
2. If the services are not as intended in 1 above, then gaps will occur and the servicing of the needs of public drinkers and others at risk, will be less than desired.
3. Public drinkers, encountered as part of the evaluation, are generally drinking outside of the Dry Area and are not receiving a comprehensive range of services nor are they venturing into the Dry Area (for the purpose of this evaluation), except for the purchase of alcoholic beverages.
4. The public drinkers, in a short period of time, will probably return to the Dry Area.
5. The return of public drinkers to Adelaide CBD will be seen as a coup, and drinkers, campers and others will see the removal of the Dry Area as a "victory", and will be drawn from around the Adelaide CBD and broader metropolitan area, to maximise media exposure, as part of their return to the key area, eg Victoria Square.

13.4.4 Conclusion

This success of this scenario relies on the implementation of comprehensive service programs. This has not been fully achieved to date. On this basis the scenario is flawed.

The scenario is unsupportable.

14. Conclusions and Recommendations

14.1 Conclusions

Conclusions

These conclusions are based on the evidence provided in the evaluation report.

The dry area, having been in operation for nearly 24 months, has been shown to have:

- a. reduced the incidence of public drinking in designated Dry Area locations
- b. reduced the incidence of anti-social or criminal behaviour by public drinkers
- c. Improved the perception of public safety in the City of Adelaide.

The dry area has also:

- displaced some groups of public drinkers, in particular those who frequented Victoria Square, who have now largely stopped travelling from their homes in the suburbs to consume alcohol in public areas in the city
- been a catalyst for the establishment and implementation of programs for facilities and other initiatives to support public drinkers
- impacted differently on target population groups such as Aboriginal people, young people and the homeless
- shown that there is limited public knowledge about the dry area and its relative benefits for the Adelaide community.
- identified that there is an issue with the current boundary of the dry area that needs to be resolved, if it continues
- been regarded as unnecessary by some groups who believe that use of existing provisions in the Public Intoxication Act, the Liquor Licensing Act and the Summary Offences Act can obviate the need for a dry area in the City of Adelaide.

14.2 Recommendations

1. It is recommended that the Adelaide City Council seek a 12 month extension of the City of Adelaide dry area and that the Government endorse the application and that during this period the dry area be continuously monitored through the Dry Area Steering Committee using a combination of public surveys and data review.
2. It is recommended that a structural analysis of service and policy providers be completed to establish more effective funding models that focus on service outcomes and program performance.
3. It is recommended that service providers strengthen their communications with peak organisations represented on the Dry Area Steering Committee (i.e., ICAG and SACOSS) to ensure they have their views and opinions considered as part of future planning and strategy development and implementation.

4. It is recommended that consideration be given to enlarging the boundaries of the dry area so that it extends north to the River Torrens to include the area between the Morphet Street Bridge and Adelaide Bridge.
5. It is recommended that an education (marketing and promotional program) be designed and implemented to better inform stakeholders about the effects of the dry area.
6. It is recommended that the Dry Area Steering Committee be recognised for the initiatives achieved to date, given the complexities of achieving common understandings and agreements between providers.
7. It is recommended that the Dry Area Steering Committee continues to work on the initiatives it has identified to address the impacts of the dry area.

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ATTACHMENT A

EVALUATION REPORT
CITY OF ADELAIDE DRY AREA TRIAL

EXECUTIVE SUMMARY

CONFIDENTIAL DRAFT

EXECUTIVE SUMMARY

Introduction

Plexus Strategic Solutions was appointed by the Department of the Premier and Cabinet, the Attorney General's Department and the Adelaide City Council to evaluate the City of Adelaide dry area trial.

The evaluation commenced in April 2003 and was completed in October with the presentation of this report.

Background

The City of Adelaide dry area trial began on 29 October 2001 following the previous Government's approval of an application by the Adelaide City Council to declare a dry area covering all city public roads and squares but excluding the parklands.

The initial declaration was for 12 months. On 28 October 2002 the Government approved a 12 month extension of the trial.

An evaluation was carried out in 2002 but its findings were inconclusive and the Government and the Adelaide City Council agreed that a further evaluation should be undertaken.

Objectives

The purpose of the evaluation was to assess whether the dry area had achieved its intended objectives:

1. a reduction in the incidence of public drinking in designated dry area locations
2. a reduction in the incidence of anti-social or criminal behaviour by public drinkers
3. an improved perception of safety in the city
4. the implementation of services to support the operation of the dry area
5. the identification of services and strategies required to remove the need for a dry area.

The evaluation also examined:

1. whether the dry area had resulted in the displacement of public drinkers to other areas of the city
2. its effects on service providers
3. its effects on specific population groups, particularly Aboriginal people, young people and the homeless.

Evaluation Method

The evaluation used both qualitative and quantitative data to assess the dry area's effects.

Qualitative data included:

- semi-structured interviews with government and non-government inner city service providers
- semi-structured interviews with key informants from government, local government and non-government agencies with an interest in the dry area trial
- discussions with Aboriginal people, homeless people and transient people in the inner city and parklands
- focus groups with young people
- interviews of commercial associations, businesses and traders
- a survey of the general public in the City of Adelaide
- a survey of residents living in the City of Adelaide

The primary sources of quantitative data were SAPOL and the Drug and Alcohol Services Council. These agencies provided data about offences under the Public Intoxication Act and the Liquor Licensing Act together with information about alcohol related apprehensions and trends in recorded crime in the City of Adelaide.

The evaluation was constrained by the limited availability of relevant quantitative data, especially baseline data for the period prior to the introduction of the dry area.

Results

Overall each of the objectives of the dry area have been realised to varying degrees as discussed below.

A reduction in the incidence of public drinking in designated dry area locations

The evaluation found evidence that there had been a reduction in public drinking in the designated dry area locations.

Key informants (e.g., service providers, business operators, the public and residents) reported that the dry area had reduced the incidence of public drinking, particularly in Victoria Square, other squares, the North Terrace area and North Adelaide.

The quantitative data provided some support for these perceptions although it was more ambiguous. The level of apprehensions under the Public

Intoxication Act do not seem to have been affected, although there has been a decline in the number of Aboriginal people apprehended under this Act.

The number of expiation notices issued for contravention of the dry area initially increased after the dry area trial commenced, but since June 2003 have declined to the levels seen prior to the trial. Whether this is due to a recent decrease in the number of persons offending or to changes in policing levels has not been determined.

Data pertaining to the number of persons arrested and processed through the Adelaide City Watchhouse indicated that over a six month period, from January 2003 to July 2003, the number of such arrests which were alcohol related decreased from 120 to 80. Again though, care should be exercised when interpreting this information because of the limited time period surveyed.

The declaration was found to have had little effect on the long standing dry areas of Rundle Mall and the Hindley Street area.

A reduction in anti-social or criminal behaviour by public drinkers

Key informants stated that since the introduction of the dry area there had been a reduction in anti-social and criminal behaviour in designated dry area locations. They reported having observed a reduction in public drunkenness, begging, people congregating in groups, fighting, and disruptive behaviour generally. This reduction was most evident in Victoria Square.

These comments were confirmed by crime statistics data. These showed that following the introduction of the dry area there had been a reduction in the incidence of offences such as hindering or resisting police, indecent or offensive language, loitering and urinating in public which came to police attention. Again though, these could be impacted by factors such as seasonality, sporting activities, and public events.

Has there been an improved perception of public safety in the city?

The public survey found that the introduction of the dry area had increased people's feelings of safety in the city. This increase in perceptions of safety was especially marked in relation to Victoria Square: 40% of respondents said that prior to the introduction of the dry area they had felt unsafe in Victoria Square but since its introduction no respondents said they felt unsafe there.

The only exceptions to these findings were from residents and businesses on South and West Terraces respectively, which mark the borders of the dry area. Respondents at these locations believed that the declaration had improved public safety in the city and squares but had reduced feelings of safety for people on the dry area boundaries. They reported this was due to the displacement of public drinking to the parklands. These respondents raised the issue of extending the dry area's boundary.

Displacement of public drinkers to other areas of the city

It was found that the dry area had resulted in the displacement of public drinkers.

This occurred on two levels. First, itinerants and parklands' campers who came into the city to buy and then consume alcohol were no longer able to do so, with all their drinking now occurring in the parklands, in particular the west parklands.

The main displacement effect, however, was in relation to 'day visitors'. This refers to people who live in the Adelaide suburbs and travel (generally by public transport) to the city to meet friends and drink and then return to their homes in the evening. It was this group that made up the majority of public drinkers in Victoria Square. The evaluation found that this behaviour had ceased as a result of the dry area declaration, with these people no longer travelling to the city to drink. It was concluded that their public drinking had been displaced to the suburbs.

The evaluation found no evidence to support the view that drinkers who had frequented Victoria Square prior to the introduction of the dry area had been displaced to the parklands.

What has been the effect of the dry area on specific population groups, in particular Aboriginal people, young people and the homeless?

Key informants reported that the greatest impact of the dry area was on Aboriginal people, in particular by reducing their ability to congregate in Victoria Square, which was a historical and culturally significant meeting place. There were comments that the dry area was a racist policy that had been put in place expressly to remove Aboriginal people from Victoria Square.

Concerns were also raised that the apparent displacement of Aboriginal drinking to the suburbs had resulted in a concomitant displacement of the behavioural problems associated with public drinking (e.g., fighting/brawling, quarrelling and domestic violence) to the family environment, whereas pre dry area, such problems were visible and managed by service providers when the person was in the city.

Organisations such as the Aboriginal Sobriety Group propose several options to deal with this displacement, including the establishment of an alternative meeting place close to Victoria Square. An effective communication/education strategy was also suggested as a way of conveying the message to Indigenous people that they could still meet in Victoria Square but not consume alcohol there.

The dry area was found to have had relatively little impact on young people. There were anecdotal reports from service providers that as a result of the dry

area there were fewer vulnerable young people coming to the city, however this could not be confirmed.

The dry area was also found to have had relatively little impact on homeless people. Service providers commented that it had resulted in the dispersal of homeless people through the parklands, which had affected service provision by making it more difficult to locate and manage clients. There were unsubstantiated reports that displacement to the parklands had been associated with increased violence against homeless people.

The impact of the dry area on service providers

Service providers reported the dry area had increased the demand for their services. These comments came principally from non-government service organisations located in the north west corner of the city. An examination of services' workload records found no supporting data to verify these comments. Some increases in service demand were identified, however these pre-dated the dry area. In particular, an examination of services' client data found no increase in the number of clients with alcohol abuse problems following the introduction of the dry area.

It was concluded that the dry area had a minimal impact on service providers.

Progress on the identification and implementation of services and strategies

The evaluation found that progress has been made over the previous 12 months to identify and implement dry area service responses and strategies.

Initiatives and their implementation status are listed below:

- stabilisation facility – implemented
- improved pedestrian safety on West Terrace – implemented
- SAPOL strategies to reduce offending in and around licensed premises – implemented
- regular SAPOL meetings with licensees to reinforce responsibilities under the Liquor Licensing Act – implemented
- increased police patrols to the parklands – implemented
- appointment of an Aboriginal Community Constable - implemented
- establishment of a Mobile Legal Service – implemented
- provision of housing and intensive supervision for people with multiple, complex needs – implemented
- increased funding for City Homeless Assessment Support Team – implemented
- increased funding for Mobile Assistance Patrol – implemented
- memorandum of understanding between SAPOL and Aboriginal Sobriety Group – implemented

- in principle agreement between Department of Human Service and the Adelaide City Council about government-council priorities for human service planning – implemented
- additional funding for Multi Agency Housing Support Authority – implemented
- SAPOL implementation of Operation Shut Eye for at risk young people – implemented
- additional funding for Kumangka Aboriginal Youth Service – implemented
- establishment of inner city Visiting Health Service – under development
- Aboriginal detoxification facility and family centre – under development
- detention facility pursuant to the Public Intoxication Act - under development
- establishment of transitional accommodation - under development
- long term, supported accommodation for people with multiple, complex needs - under development
- improved procedures for the verification of Aboriginality - under development
- provision of emergency housing for Aboriginal people - under development
- Inner City Services Strategic Plan - under development
- TRAH discharge protocols for intoxicated Aboriginal people - under development
- city watch house drug and alcohol referral service - under development

The problems the dry area was set up to address are complex and multi-faceted. Therefore it is acknowledged that a number of the key service responses (e.g. visiting health service, transitional accommodation, Aboriginal detoxification and family centre) will have long implementation lead times.

Dry area scenarios

Four scenarios were developed to assist decision making about the future of the dry area. These were that the dry area:

- continue and is re-evaluated in 12 months time
- continue for another 12 months but then allowed to lapse
- is expanded, to accommodate issues associated with South Terrace; West Terrace and the River Torrens environs
- is allowed to lapse at the end of October 2003.

Based on the evaluation findings, it was concluded that the most appropriate scenario was the continuation of the dry area and its re-evaluation in 12 months time. That re-evaluation should take the following form:

- analysis of offences and apprehensions associated with public drinking

- analysis of the implementation of initiatives and their effectiveness, including performance evaluation of the individual initiatives
- feedback and data from key informants using a planned process that commences at the beginning of the next 12 month period.

A decision should also be made about whether or not to include North Adelaide - this evaluation found public drinking was not a signification issue in this precinct.

Conclusions and Recommendations

Conclusions

These conclusions are based on the evidence provided in the attached evaluation report.

The dry area, having been in operation for nearly 24 months, has been shown to have:

- reduced the incidence of public drinking in designated Dry Area locations
- reduced the incidence of anti-social or criminal behaviour by public drinkers
- Improved the perception of public safety in the City of Adelaide.

The dry area has also:

- displaced some groups of public drinkers, in particular those who frequented Victoria Square, who have now largely stopped travelling from their homes in the suburbs to consume alcohol in public areas in the city
- been a catalyst for the establishment and implementation of programs for facilities and other initiatives to support public drinkers
- impacted differently on target population groups such as Aboriginal people, young people and the homeless
- shown that there is limited public knowledge about the dry area and its relative benefits for the Adelaide community.
- identified that there is an issue with the current boundary of the dry area that needs to be resolved, if it continues
- been regarded as unnecessary by some groups who believe that use of existing provisions in the Public Intoxication Act, the Liquor Licensing Act and the Summary Offences Act can obviate the need for a dry area in the City of Adelaide.

Recommendations

1. It is recommended that the Adelaide City Council seek a 12 month extension of the City of Adelaide dry area and that the Government endorse the application and that during this period the dry area be continuously monitored through the Dry Area Steering Committee using a combination of public surveys and data review.
2. It is recommended that a structural analysis of service and policy providers be completed to establish more effective funding models that focus on service outcomes and program performance.
3. It is recommended that service providers strengthen their communications with peak organisations represented on the Dry Area Steering Committee (i.e., ICAG and SACOSS) to ensure they have their views and opinions considered as part of future planning and strategy development and implementation.
4. It is recommended that consideration be given to enlarging the boundaries of the dry area so that it extends north to the River Torrens to include the area between the Morphett Street Bridge and Adelaide Bridge.
5. It is recommended that an education (marketing and promotional program) be designed and implemented to better inform stakeholders about the effects of the dry area.
6. It is recommended that the Dry Area Steering Committee be recognised for the initiatives achieved to date, given the complexities of achieving common understandings and agreements between providers.
7. It is recommended that the Dry Area Steering Committee continues to work on the initiatives it has identified to address the impacts of the dry area.