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Chapter 17

**THE CASE FOR ALCOHOL OUTLET DENSITY
CONTROLS AS A PROMISING APPROACH
TO PREVENT DOMESTIC VIOLENCE**

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ABSTRACT

Domestic violence is a major global public health concern that causes significant social and economic burdens. Governments from around the world are implementing policies and practices to effectively address and prevent domestic violence from occurring in the first place. Related to this, leaders in the domestic violence movement and in government are beginning to address the connection between domestic violence and alcohol. Research shows that an over-concentration of locations that sell and serve alcohol is associated with higher rates of alcohol-related disorder and crime, including domestic violence. Thus, some governments have begun to shift policy direction to address the relationship between alcohol and domestic violence. This chapter examines how diverse governments have incorporated alcohol policies and strategies into their domestic violence prevention plans and provides examples of alcohol outlet density control measures. Findings show that while most governments acknowledge the connection between alcohol and domestic violence, to date, a majority have not incorporated comprehensive alcohol reduction strategies into their domestic violence prevention plans. Further, even though theoretical evidence suggests that reducing alcohol outlet density may be a promising approach to prevent and reduce domestic violence, there is little evidence of the real-world effectiveness of such policies; as such, additional research and evaluation are needed in this area. Despite such limitations, the emerging body of knowledge on this issue points to a promising leverage point for policy and practice to prevent domestic violence.

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INTRODUCTION

Over the past three decades, the discourse on domestic violence has changed significantly. Researchers, policy makers and practitioners have increasingly recognized the complexity and effects of domestic violence on individuals, families, communities and broader society. Domestic violence also results in significant use of social service interventions, medical treatments and policing resources, and is a major contributor to the disproportionate burden of morbidity and mortality experienced by victims (Begget al., 2007; National Center for Injury Prevention and Control 2003; Varcoe et al., 2011; Walby 2009).

Often defined differently across contexts and sometimes used interchangeably with terms like family violence, intimate partner violence, or a form of violence against women, for the purposes of this paper, we consider domestic violence to be:

... the attempt, act or intent of someone within a relationship, where the relationship is characterized by intimacy, dependency or trust, to intimidate either by threat or by the use of physical force on another person or property. The purpose of the abuse is to control and/or exploit through neglect, intimidation, inducement of fear or by inflicting pain. Abusive behaviour can take many forms including: verbal, physical, sexual, psychological, emotional, spiritual and economic, and the violation of rights. All forms of abusive behaviour are ways in which one human being is trying to have control and/or exploit or have power over another. (Calgary Domestic Violence Collective 2012, p. 2)

An area where a strong body of knowledge has amassed concerns the relationship between alcohol consumption and domestic violence (Devries et al., 2014; Foran and O’Leary 2008; Gerber 2013; World Health Organization [WHO], 2005). Both issues are major global public health concerns that cause significant social and economic burdens, have multifaceted determinants, and require multi-level and multi-dimensional actions to effectively address them (WHO 2010a; 2010b). Past work has also indicated that high alcohol outlet density is a factor that is consistently linked to increased rates of domestic violence (Kearns, Reidy, and Valle 2015).

Research conducted by Shift¹ between 2012 and 2014 (Wells 2014; Wells, Dozois, and Esina 2013) also supports evidence of a relationship between alcohol consumption, alcohol outlet density² and domestic violence, yet our cursory research in this area indicated that this linkage has been largely ignored as a key primary prevention strategy within the domestic violence literature and in government-endorsed domestic violence prevention plans from

¹ The research for this chapter was conducted within a broader research program developed by Shift: The Project to End Domestic Violence located at the Faculty of Social Work, University of Calgary, Canada (www.preventdomesticviolence.ca). Shift’s purpose is to develop, implement and scale up best and promising primary prevention practices, strategies and actions in partnership with government, systems and civil society with the goal of preventing domestic violence before it starts.

² In this chapter, alcohol outlet density refers to “the number of locations where alcohol can be purchased (calculated per area or per population) and can be differentiated into on-premise settings (e.g., bars, restaurants, ballparks) or off-premise settings (e.g., packaged liquor stores, grocery stores, convenience stores)” (Kearns et al., 2015, pp. 21-22).

around the world. Therefore, Shift conducted additional research on this topic, and our preliminary research concluded that reducing and/or mitigating excessive alcohol outlet density may be one possible action that could be part of a broader toolkit of actions to reduce and/or prevent domestic violence.

Building on this past work, this chapter discusses relevant alcohol policies with a specific focus on alcohol outlet density controls and regulations as domestic violence primary prevention tools. Examples of how governments are developing and implementing these policies across international jurisdictions are provided. These cases were selected to illustrate a range of local contexts and pragmatic ways to work within diverse policy regimes, including privatization of retail alcohol sales (defined as “the repeal of the government (i.e., nation, state, county, city, or other geo-political unit) control over the retail sales of one or more types of alcoholic beverages, thus allowing commercial retailing of those beverages”; *The Guide to Community Preventive Services* 2011, para 1). Governments and communities from around the world can learn from these examples of regulating alcohol outlet density and consider applying those that are most suitable within their own jurisdictions. Through this research, it is hoped that governments will more fully acknowledge the link between domestic violence and alcohol consumption, and specifically take policy action that will implement controls and regulations as part of their comprehensive domestic violence prevention strategies.

It is important to note that the body of evidence that demonstrates whether measures that regulate alcohol outlet density have a discernible impact on domestic violence remains emergent at this point. It is therefore incumbent on researchers to pursue this area of study further to inform future policy development. Despite current limitations, the existing body of evidence supports the need for governments to consider including comprehensive alcohol policies and practices within their domestic violence prevention plans, starting with measures to reduce alcohol outlet density.

The Consequences of Enhanced Alcohol Availability

The ready availability of alcohol, which may be precipitated by high numbers of outlets operating for longer hours, can provoke violent behaviours, including domestic violence. Indeed, a growing body of evidence links high alcohol outlet density to both domestic violence and child maltreatment, as well as to other health issues, mortality, crime, suicide and homicide (Campbell et al., 2009; Cunradi, Mair, Ponicki, and Remer 2011; 2012; Freisthler, Midanik, and Gruenewald 2004; Freisthler, Needell, and Gruenewald 2005; Freisthler, Gruenewald, Remer, Lery, and Needell 2007; Freisthler and Weiss 2008; Gorman, Speer, Gruenewald, and Labouvie 2001; Livingston 2010; 2011a; 2011b; McKinney, Caetano, Harris, and Ebama 2009; Morton, Simmel and Peterson 2014; Popova, Giesbrecht, Bekmuradov, and Patra 2009). In fact, alcohol outlet density is one of the strongest—and, in some cases the single greatest predictor of violent crime in several U.S. jurisdictions (Gruenewald and Remer 2006).

Research also suggests that full and partial privatization of liquor sales is associated with negative social outcomes in addition to increased domestic violence, such as increases in other types of violent and non-violent crime (Stockwell et al., 2009; Stockwell et al., 2011). Privatization boosts the number of alcohol outlets, which in turn, contributes to increased

alcohol consumption (Babor et al., 2010; Flam Zalcman, and Mann 2007; Hahn et al., 2012; Popova et al., 2012; Stockwell et al., 2009). For example, in British Columbia, Canada, where the sale of alcohol has been semi-privatized, the growth of privately-owned liquor stores was associated with higher rates of alcohol-related mortality and consumption (Stockwell et al., 2011). Interestingly, low-income neighbourhoods tend to have a higher density of alcohol outlets, and this disproportionate density appears to exacerbate existing negative neighbourhood effects on residents' health and well-being (Escobedo and Ortiz 2002; Romley, Cohen, Ringel, and Sturm 2007).

Alcohol use is both a risk factor for and an outcome of domestic violence, and is often present before, during, and after domestic violence incidents. Recent systematic reviews and meta-analytical studies demonstrate a positive association between alcohol use and subsequent domestic violence (Devries et al., 2014; Foran and O'Leary 2008), with an increased number of domestic violence incidents and increased severity when the perpetrator is drinking during the incident (Gerber 2013). Evidence from meta-analyses also shows a positive association between victimization and subsequent alcohol use (Devries et al., 2014). Related to this, Kaysen and colleagues (2007) found that adult victims of domestic violence often use alcohol as a trauma-related coping strategy. The World Health Organization (WHO) has also recently launched a series of reports highlighting the relationship between alcohol misuse and domestic violence, child maltreatment, and a range of other violence-related issues, and are encouraging governments to take heed and prioritize actions to mitigate negative impacts (Krug, Dahlberg, Mercy, Zwi, and Lozano 2002; WHO Europe 2005; WHO 2005; 2010a; 2011).

Despite global recognition of both alcohol misuse and domestic violence as pressing public health issues, only two literature reviews on the connection between alcohol policies and the relationship to domestic violence have been completed to date. These reviews identify three alcohol-related policy areas that have been studied in relation to their impact on domestic violence rates: taxation and pricing, hours and days of sale, and alcohol outlet density (Kearns, Reidy, and Valle 2015; Wilson, Graham, and Taft 2014). Both reviews found an association between alcohol outlet density and domestic violence rates, even in studies controlling for socio-demographic variables such as poverty and unemployment (e.g., Cunradi et al., 2011; Livingston 2010), and concluded that existing evidence supports a relationship between alcohol outlet density and domestic violence. This suggests that alcohol policies that control outlet density may be a promising tool for reducing rates of domestic violence.

The purpose of this chapter is to examine how different levels of governments have incorporated alcohol policies and strategies into their domestic violence prevention plans and provide examples of governments' designing and implementing alcohol density control measures as one policy tool for the prevention of domestic violence.

METHOD

Since 2012, Shift has had an annual process to identify and monitor national and provincial/state government endorsed prevention of domestic violence plans, and has created and maintained a repository of these documents. This document search is part of an ongoing

research process to understand governments' commitment to evidence informed primary prevention strategies. Given Shift's location and mandate, the annual search involves nine countries that are socially similar to Canada (Australia, Canada, New Zealand, United Kingdom (England, Scotland, Wales, and Northern Ireland), Republic of Ireland and the United States). To locate the documents for this repository, Google search engines and government websites are searched to identify government-endorsed plans to prevent domestic violence, family violence, intimate partner violence, or violence against women published in these countries between 2001-2014, using the following search terms (and combinations thereof): violence against women, family violence, domestic violence, intimate-partner violence, abuse, safety, women, prevention, framework, strategy, and plan. To date, a total of 37 government-endorsed domestic violence prevention plans (eight national and 29 provincial/state) have been located and reviewed from these nine countries. For the list of plans reviewed, please see Table 1³.

Given the research discussed in the Introduction, we were also aware that, with a view to reducing alcohol-fueled social problems, many countries and governments have recognized the connection between alcohol outlet density and alcohol-related harm, and in response, have started to move into some policy action in these areas. Thus, to examine if and how governments have incorporated alcohol policies and strategies into their domestic violence prevention plans, we re-analyzed the 37 located domestic violence prevention plans for alcohol-specific content. Specifically, using the "key-word in context" method (Ryan and Bernard 2003), the documents in our existing repository of national and provincial/state government endorsed domestic violence plans were searched using five specific key-words – 1) alcohol, 2) liquor, 3) substance, 4) drink and 5) consumption. Based on this key-word search, six themes were identified: (1) link between alcohol consumption and domestic violence; (2) strategy or recommendation to provide treatment for alcohol abuse; (3) strategy or recommendation to conduct research on the relationship between alcohol and domestic violence; (4) connection with other government alcohol strategies; (5) inclusion of at least one alcohol-related strategy in the plan besides treatment; and (6) mention of density of alcohol outlets.

To identify governments (within the nine countries) that were implementing controls and actions specific to alcohol density (i.e., controls/actions that were outside of their domestic violence plans), further research was conducted using Google search engines and government and quasi-government websites for grey literature, as well as through the EBSCO databases for academic literature, using the following key terms (and combinations thereof): alcohol, liquor, outlet, store, establishment, on/off-sale, on/off-premise, density, availability, overconcentration, regulation, control, moratorium, ban, limit, cap, policy, act, legislation, ordinance, local, municipal, state, provincial, territorial, impact, evaluation, and effect. Based on this search, governments in New Zealand, Canada, the United States, England and Wales were found to be recognizing, developing and implementing some type of regulation on alcohol outlet density. However, the discussion of all examples of density regulation within

³ The authors would like to acknowledge that in June 2015, after the submission of this chapter, Australia launched a new national framework for action to prevent alcohol-related family violence. Developed by the Foundation for Alcohol Research & Education (2015), the framework was based on extensive research and consultations and identifies twenty actions to prevent alcohol-related family violence across four priority areas. This framework was not included in the review but represents the first example of a comprehensive and exemplar national strategy.

these countries is beyond the scope of this chapter; instead, select examples from each country are discussed. The examples chosen for this chapter reflect different levels of government (i.e., municipal, state/provincial, and/or federal) leading the development of an alcohol control policy and display various dimensions of alcohol retailing systems (i.e., fully privatized, government run, mixed). Where relevant, personal communication was used to confirm documentation findings.

In accordance with the Canadian Tri-Council Policy Statement on Ethical Conduct for Research Involving Humans (TCPS 2 Articles 2.2 to 2.4), the authors did not seek ethics approval for this chapter as it relied on a review of published or publicly reported literature.

RESULTS

Within the 37 government-endorsed domestic violence prevention plans, 23 clearly made the link between alcohol and domestic violence, 13 emphasized the need to provide treatment for substance abuse as part of the intervention continuum, two recommended conducting more research on the relationship between alcohol and domestic violence, six made explicit connections to other government alcohol reduction strategies, and three plans, including two from Australia (national plan and Tasmanian plan) and one from Canada (Newfoundland provincial plan), incorporated specific strategies for reducing alcohol consumption (e.g., fostering community initiatives and building community capacity to reduce alcohol and substance abuse; reducing access to and harmful use of alcohol; and implementing a province-wide substance abuse prevention and education strategy, respectively) (Table 1). No reviewed plan had a comprehensive alcohol reduction strategy or mentioned alcohol outlet density controls or regulations as a strategy to mitigate or prevent domestic violence.

Table 1. An overview of 8 national and 29 provincial/state government endorsed domestic violence prevention plans, by six alcohol related themes

#	Name of the domestic violence plan	Theme 1	Theme 2	Theme 3	Theme 4	Theme 5	Theme 6
8 national domestic violence plans:							
1	Australia's National Plan to Reduce Violence against Women and Their Children: 2010-2022. Released in 2011.	√	√	√		√	
2	England's Call to End Violence against Women and Girls. Released in 2012.						
3	Northern Ireland's Strategy for Addressing Domestic Violence and Abuse: Tackling Violence at Home. Released in 2005.	√			√		
4	Preventing Violence Against Women Action Across the Scottish Executive. Released in 2001.	√	√		√		
5	Republic of Ireland's National Strategy on Domestic, Sexual and Gender-based Violence 2010-2014. Released in 2010.	√					
6	TeRito New Zealand Family Violence Prevention Strategy. Released in 2002.						
7	Wales' Strategy The Right to Be Safe. Released in 2010.	√	√				
8	United Kingdom's Strategy: Together We Can End Violence against Women and Girls. Released in 2009.	√					

#	Name of the domestic violence plan	Theme 1	Theme 2	Theme 3	Theme 4	Theme 5	Theme 6
29 Provincial/state domestic violence plans:							
1	It Stops Here: Standing Together to End Domestic and Family Violence in New South Wales (NSW): The NSW Government's Domestic and Family Violence Framework for Reform. Released in 2014.	√					
2	Taking Action: Tasmania's Primary Prevention Strategy to Reduce Violence Against Women and Children 2012-2022. Released in 2013.	√	√		√	√	
3	A Queensland Government Strategy to Reduce Domestic and Family Violence 2009-2014. Released in 2009.				√		
4	Victoria's Action Plan to Address Violence against Women and Children 2012-2015. Released in 2012.	√	√		√		
5	Western Australia's Family and Domestic Violence Prevention Strategy to 2022: Creating Safer Communities. Released in 2010.						
6	Family Violence Hurts Everyone: A Framework to End Family Violence in Alberta. Released in 2013.	√	√				
7	British Columbia's Provincial Domestic Violence Plan. Released in 2014.	√					
8	Manitoba's Multi-Year Domestic Violence Prevention Strategy. Released in 2012.	√					
9	A Better World for Women: Moving Forward 2005-2010. New Brunswick, Canada. Released in 2005.						
10	Taking Action Against Violence 2006-2012: Violence Prevention Initiative. Newfoundland, Canada. Released in 2006.	√	√			√	
11	Northwest Territories Family Violence Action Plan Phase 2: 2007-2012. Released in 2009.	√					
12	Domestic Violence Action Plan: All Persons in Nova Scotia Should Live Free from Domestic Violence and Abuse. Released in 2010.	√	√	√	√		
13	Domestic Violence Action Plan for Ontario. Released in 2004.						
14	Premier's Action Committee on Family Violence Prevention: Five Year Strategy. Prince Edward Island, Canada. Released in 2002.	√					
15	Quebec's Government Action Plan on Domestic Violence: 2012-2017. Released in 2012.						
16	Action Plan for Saskatchewan Women: Moving Forward. Released in 2002.		√				
17	Alaska's 2009-2019 Strategic Plan. Released in 2009.						
18	The State Plan on Domestic and Sexual Violence: A Guide for Safety and Justice in Arizona. Released in 2004.	√	√				
19	Building Florida's Capacity to Prevent Intimate Partner Violence: Eight-Year Strategic Plan. Released in 2009.	√					
20	Violence and Abuse Prevention: Hawaii Injury Prevention Plan 2012-2017. Released in 2012.						
21	Indiana's Action Plan: Domestic Violence and Sexual Assault Services. Released in 2011.						

Table 1. (Continued)

#	Name of the domestic violence plan	Theme 1	Theme 2	Theme 3	Theme 4	Theme 5	Theme 6
29 Provincial/state domestic violence plans (continued):							
22	Addressing Domestic Violence: Maryland's Plan 2010-2011. Released in 2010.	√	√				
23	Nebraska's State Plan Addressing Domestic and Sexual Assault 2012-2013. Released in 2012.						
24	North Dakota Intimate Partner and Sexual Violence Prevention Plan. Released in 2009.	√					
25	New Hampshire Violence Against Women State Plan: A Framework for Action. Released in 2006.	√	√				
26	Strategic Directions for the Prevention of Intimate Partner Violence in New York State. Released in 2009.						
27	South Carolina's Domestic Violence State Plan 2006-2007. Released in 2006.						
28	A Strategic Plan to Prevent Violence Against Women in Texas. Released in 2004.	√	√				
29	Forward to a Domestic Violence-Free Wisconsin: Statewide Plan for the Prevention of Domestic Violence. Released in 2006.	√					
Total Number of National and Provincial/State Plans by Theme		23	13	2	6	3	0

Theme 1: Link between alcohol and domestic violence.

Theme 2: Strategy or recommendation to provide treatment for alcohol abuse.

Theme 3: Strategy or recommendation to conduct research on the relationship between alcohol and domestic violence.

Theme 4: Connection with other government alcohol strategies.

Theme 5: Inclusion of at least one alcohol-related strategy in the plan besides treatment.

Theme 6: Mention of density of alcohol outlets.

Although governments did not introduce alcohol outlet density strategies within their domestic violence prevention plans, many jurisdictions have taken action outside of these plans to reduce the density of alcohol outlets. To highlight these types of actions (i.e., alcohol density control policies that are not part of a larger government endorsed domestic violence strategy), six examples reflecting different levels of government, contexts, and alcohol control systems are provided below. These examples are not intended to represent an exhaustive list of such initiatives, but rather to serve as examples of diverse measures that are being implemented in various contexts.

OVERVIEW OF GENERAL ALCOHOL DENSITY POLICIES

The diverse measures found in these non-domestic violence specific plans include: population-based limits; geographic-based limits, including moratoriums; proximity measures, specifically around sensitive areas including residentially zoned property, public or private schools, health care facilities, places of worship, parks and/or playgrounds; proximity measures between existing on-sale and off-sale alcohol outlets; cumulative impact zones that take into consideration adverse social effects of alcohol market saturation; community participation in the license review process; revoking or restricting new licenses; and

strengthening local zoning regulations to avoid density and congestion. These examples demonstrate that governments are trying to implement a variety of alcohol density policies and controls in different contexts (i.e., at different levels of governments and with different alcohol retailing systems).

1. New Zealand

In 2012, the New Zealand national parliament passed the Sale and Supply of Alcohol Act (2012), providing territorial authorities (local councils) with the ability to develop local alcohol policies related to licensing that can limit the number and location of alcohol outlets. Included in the Act is a mandatory consultation process with communities and leaders such as police, licensing inspectors, and medical officers of health to develop the local policy. As of April 1, 2015, 47 of 67 territorial authorities were in the process of developing local alcohol policies (personal communication with Cathy Bruce, Principal Advisor Local Government, Health Promotion Agency, April 14, 2015). Some of these draft policies include density measures for proximity to sensitive areas (e.g., schools) and caps on number of licenses within specific communities (personal communication with Amy Robinson, Health Promotion Advisor, Alcohol Healthwatch, April 1, 2015). Not surprisingly, the alcohol industry has appealed “almost every provisional Local Alcohol Policy so far” (Alcohol Healthwatch 2014, p. 1), demonstrating a potential key barrier to the implementation of such policies. At this stage, only one policy has not been appealed (Ruapehu District Council 2014), while two policies have been through the complete appeals process and became law in 2015 (Tasman District Council 2015; Waimakariri District Council 2015).

2. Province of Saskatchewan, Canada

To date, Saskatchewan is the only province in Canada to introduce legislation that limits the number of alcohol outlets based on population. The Alcohol Control Regulations Act (2013) limits the number of restaurant and tavern permits that can sell alcohol for consumption outside the premises (off-sale endorsements) based on population. The maximum number of such endorsements varies from one for 2,500 people to one for every 10,000 people depending on the population of the municipality. The Act does not specify if local government or communities can be involved in the decisions regarding licensing applications and it is too early to know the impact of the policy.

3. State of Wisconsin and City of Madison, Wisconsin, United States of America

The State of Wisconsin delegates authority over both alcohol licensing and regulation of alcohol outlet density based on population or geographic areas to municipalities (Alcohol Beverages 2015). And, in 2007, the City of Madison enacted the Alcohol Beverages License Density Plan (2007) ordinance to reduce the number of bars and taverns in the downtown

area. Subsequent legislation replaced the ordinance with zoning regulations to reduce on-premise alcohol licenses throughout the entire city (City of Madison 2014; Tarr 2014).

4. State of California and City of El Cajon, California, United States of America

In the mid-1980s, with a view to decreasing the number of alcohol sale outlets in their communities, municipalities in California legally challenged the State's longstanding exclusive power over the licensing and regulation of the sale of alcohol. The California Supreme Court and the California Court of Appeals consistently found in favour of the municipalities and, by 1993, about half of the 475 municipalities in California had used zoning and ordinances to restrict alcohol sales in one or more ways, often including the number and concentration of outlets allowed in a neighbourhood (Ashe, Jernigan, Kline, and Galaz 2003).

What appear to be the toughest zoning and licensing restrictions on alcohol sales in California were recently passed by the City of El Cajon, which now has the authority to restrict or revoke sale privileges from existing alcohol outlets and enforce restrictions for new establishments (City of El Cajon 2015; Nguyen 2015). For example, the distance between off-sale and on-sale alcohol outlets must be between 600 and 1,000 feet to sensitive areas (e.g., schools, health care facilities, etc.) or to other existing alcohol outlets. In addition, the location of alcohol outlets can be restricted to ensure they do not aggravate existing problems in specific neighborhoods identified by the police department (City of El Cajon Municipal Code 2013).

5. City of Baltimore, Maryland, United States of America

In 2009, the City of Baltimore incorporated provisions in their proposed local zoning code including 300 feet distance between liquor outlet stores, restrictions on taverns with off-sale retail, and mandatory termination of one hundred nonconforming alcohol outlets (City of Baltimore 2009; Kuebler 2014; Thornton et al., 2013). The city's planning commission voted in favour of the provisions in the zoning code ordinance but these changes still need approval from city council (Kuebler 2014). To date, these policies have not been implemented.

6. England and Wales, United Kingdom

In England and Wales, The Licensing Act (2003) gives local authorities permission to implement "cumulative impact policies" to strengthen licensing powers and limit the growth of on- and off-premise alcohol outlet density (Grace, McGill, and Egan 2014). Local authorities have the power to "designate boundaries within their borough as cumulative impact zones (CIZs) if adverse social effects of alcohol market saturation can be demonstrated" (p. 1). As of March 31, 2014, there were 208 CIZs in England and Wales (Home Office 2014). These policies are currently under evaluation, specifically by the School

of Public Health Research at the London School of Hygiene and Tropical Medicine, whose research efforts are focusing on the impact of the alcohol outlet density policies on the London borough of Islington (Lock, Hart, Gibbons, Ashton, and Egan 2014).

CONCLUSION

This chapter presents evidence on the relationship between alcohol consumption and domestic violence, with a specific focus on the role of alcohol outlet density as a potential tool for violence prevention. The authors argue that governments must pay attention to this relationship and should consider developing comprehensive alcohol prevention policies that are inclusive of alcohol outlet density control measures within their domestic violence prevention plans. Evidence presented suggests that reducing alcohol outlet density may be a theoretically promising approach to prevent and reduce the occurrence of domestic violence.

Governments in Canada, New Zealand, the United States, England and Wales are experimenting with different types of local alcohol policy interventions to regulate the physical availability of alcohol, specifically through limiting alcohol outlet density. Illustrative cases representing six diverse implementation contexts were discussed to showcase examples of governments taking action and negotiating local dynamics.

The authors found that the current body of evidence assessing whether policies that regulate alcohol outlet density have a measurable impact on domestic violence rates remains emergent. Future research should focus on assessing whether efforts to limit alcohol availability are being implemented and to what effect in order to better inform policy making. In particular, the role of local versus state/national authority over access to alcohol should be assessed to determine at which level controls are best placed to prevent domestic violence.

Despite progress in some jurisdictions, research suggests that there is no easy way to reduce alcohol outlet density once it is established. Therefore, it would be prudent to introduce density controls before issues begin to escalate. Clearly, a proactive approach is preferable; such an approach could include national and provincial/state governments developing comprehensive alcohol primary prevention strategies within their domestic violence prevention plans. Finally, it is important to note that density controls are but one of a number of alcohol policies that can be implemented to reduce social harm. As Giesbrecht and colleagues (2013) suggest, pricing, minimum drinking age, controls on marketing and public education measures are also needed.

Several limitations of the study should be noted, particularly the key-word in context method used to analyze government-endorsed domestic violence prevention plans. Specifically, while this method allows for systematic identification of study-relevant content, the authors did not apply a comprehensive discourse analysis to these plans; given the prescribed scope of this review, we instead focused on scanning content for explicit discussion of alcohol and alcohol outlet density. However, because this decision led to a narrow analysis of these documents, we likely missed additional information relating to these plans, such as implementation updates, that could have provided relevant information. Furthermore, the six alcohol outlet density cases presented in the chapter were selected in order to illustrate diverse implementation settings and approaches, and were not the result of a comprehensive selection process with deliberate criteria; additional research that

comprehensively reviews existing policy, including evidence of effectiveness of this policy, is needed. Finally, we did not interview representatives from governments or organizations working on developing or implementing the measures presented. Personal communication was only used when documents could not be obtained. Thus, the authors relied on available documentation obtained online, which limits the research findings.

Despite these limitations, the evidence currently available identifies alcohol outlet density as a potential strategy within a comprehensive, evidence-informed toolkit of possible actions to prevent and end domestic violence. As such, governments are encouraged to begin exploring the inclusion of alcohol density control measures in their domestic violence plans.

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